Town of Cazenovia Water Pollution Control Facility

7 Albany Street, Cazenovia, New York, 13035 Phone 315-655-2261 Fax 315-655-2331

February 10, 2020

Sally Rowland, Ph.D., P.E.

NYS Department of Environmental Conservation
Bureau of Waste Reduction & Recycling-Annual Report
Division of Material Management 9th floor
625 Broadway, Albany, New York 12233-7253

Additional copy sent to:

Thomas Annal NYSDEC Region 7 Division of Solid Materials Management 615 Erie Blvd, West Syracuse, New York 13204-2400

Re: Town of Cazenovia Water Pollution Control Facility, formulary the Madison County Sewer District, 2019 Annual Biosolids Composting Facility Report.

Dear Ms. Rowland,

Please find attached the Madison County Sewer District's 2019 biosolids composting report. As of January 1st 2018 The Madison County Sewer District no longer exist. The Town of Cazenovia has become the owner of the treatment facility. The Town of Cazenovia Water Pollution Control Facility applied for a new SPDES permit in December of 2017. As of today the Town of Cazenovia Water Pollution Control Facility has not received the new SPDES permit. No compost was produced during all of 2019 at the Town of Cazenovia Water Pollution Control Facility. All aerobically digested biosolids have been dewatered and hauled to the Madison County Landfill for disposal.

Respectfully,

Jim Cunningham

Town of Cazenovia Water Pollution Control Facility, Manager

Cc: Town Supervisor: William Zupan

New York State Department of Environmental Conservation Division of Materials Management Albany, New York 12233-7253

2019

PERMITTED FACILITY ANNUAL REPORT BIOSOLIDS

COMPOSTING/OTHER PROCESSING

6 NYCRR Part 361-3.2

This annual report is for the year of operation from <u>January 01, 2019</u> to <u>December 31, 2019</u>

Annual Report Form Due: No Later than March 1, 2020

This form is for biosolids composting facilities that are permitted under section 361-3.2 previously 360-5 of Part 360. Permits for existing permitted facilities prior to November 2017 remain in effect until their expiration date, unless a modification is issued. Permittees must comply with the previous Part 360 regulations and their permit's special conditions until renewal or modification.

Forms for all solid waste management facilities can be found at http://www.dec.ny.gov/chemical/52706.html. If you have any questions on this form, please e-mail organicrecycling@dec.ny.gov.

Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual Report requirements of 6 NYCRR Part 360 series.

Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

PERMITTED FACILITY NAME: Madison County Sewer District Compost Facility	
PERMIT NUMBER: 7-2522-00030/00004	
SW FACILITY ACTIVITY NUMBER: (Ex. 02PP0099) e.g.99c12	
COUNTY WHERE FACILITY IS LOCATED: Madison	

DEC USE ONLY

Region:

SWIMS:

MATRIX:

Date Reviewed:

Reviewed By:

Data Entered:

PERMITTED BIOSOLIDS COMPOSTING FACILITY ANNUAL REPORT SECTION 1 – FACILITY INFORMATION

FACILITY INFORMATION				
FACILITY NAME:				
Madison County Sewer	District Compostin	ig Fa	acility	
FACILITY LOCATION ADDRESS:	FACILITY CITY: STATE:		ZIP CODE:	
4500 Route 13 North	Cazenovia NY 13035		13035	
FACILITY TOWN:	FACILITY COUNTY: FACILITY PHONE NUMBER:			E NUMBER:
Cazenovia	Madison	Madison 315-655-2261		
NYSDEC 7 REGION #: 7				
				SANIAL COLUMN TO THE SANIAL CO
FACILITY CONTACT: CONTACT PHONE NUMBER: Jim Cunningham 315-525-4420				
CONTACT EMAIL ADDRESS: jimcnwt@gmail.com				
	OWNER INFORMATION	· · · · · · · · · · · · · · · · · · ·	 	
owner name: Town of Cazenovia	OWNER PHONE NUMBER: 315-655-2261			
OWNER ADDRESS:	OWNER CITY:		STATE: NY	ZIP CODE: 13035
7 albany street	Cazenovia		INY	13035
OWNER CONTACT: OWNER CONTACT EMAIL ADDRESS: Jim Cunningham jimcnwt@gmail.com				
g	OPERATOR INFORMATION			
OPERATOR NAME: ✓ Same as owner				
	PREFERENCES			
Preferred address to receive correspondence: Facility location address Other (provide):				
Preferred email address: Facility Contact Owner Contact				
Other (provide):				
Preferred individual to receive correspondence: Facility Contact Owner Owner Contact Other (provide):				
Did you operate in 2019? Yes; Complete this form. No; Complete and submit Sections 1 and 13. If you no longer plan to operate and wish to relinquish your permit/registration associated with this solid waste management activity, please notify the regional office of your intent. See attachment for Regional Office addresses and contacts.				

SECTION 2 - QUANTITY OF MATERIAL RECEIVED

Please report quantities received from <u>January 01, 2019</u> to <u>December 31, 2019</u>

Compost Input	Quantity	Unit	% Solids	Source
Biosolids (Sewage Sludge)	None	Choose Units		
Bulking Agent/Amendment Specify:	None	Choose Units		
Other:		Choose Units		

SECTION 3 - COMPOST PRODUCTION

WHAT IS THE PROCESS DETENTION TIME? Note: Total time material is processed, not Including storage time		days
COMPOST PRODUCED DURING THE YEAR:	None	_cubic yards o <i>r</i> _ tons
COMPOST DISTRIBUTED DURING THE YEAR:	None	_ cubic yards o <i>r</i> _ tons
QUANTITY CURRENTLY STOCKPILED: Note: Finished product stockpiled	None	_ cubic yards <i>or</i> _ tons
AGE OF OLDEST PRODUCT ON SITE:	0	_ months

SECTION 4 - COMPOST DISTRIBUTION

Quantity Distributed (cubic yards)	Use of Compost (landscaping, agriculture, highway, onsite, bagged, etc.)

SECTION 5 – BIOSOLIDS ANALYSES

Please attach sampling analyses and laboratory reports as required under Part 360 or your permit. Copies of original laboratory results must be attached. All results, except pH and Total Solids, must be on a dry weight basis.

Summarize data in table below or attached document. Print additional pages as needed.

Analysis Date ====>	Permit Pre 2017 Regs.	Permit Post 2017 Regs.
	Monthly Conc. (mg/kg)	Max. Conc. (mg/kg)
Arsenic (mg/kg)	41	41
Cadmium (mg/kg)	21	10
Chromium (mg/kg)	1,000	1,000
Copper (mg/kg)	1,500	1,500
Lead (mg/kg)	300	300
Mercury (mg/kg)	10	10
Molybdenum (mg/kg)	40	40
Nickel (mg/kg)	200	200
Selenium (mg/kg)	100	100
Zinc (mg/kg)	2,500	2,500
TKN (mg/kg)		
Ammonia Nitrogen (mg/kg)		
Nitrate (mg/kg)		
Total Phosphorus (mg/kg)		
Total Potassium (mg/kg)		794
pH (s.u.)		
Total Solids(%)		
Total Volatile Solids (%)		

SECTION 8 - SAMPLE MANAGEMENT

Describe the number, frequency and location of samples taken. Include a diagram showing all sampling locations.

No Compost was produced in 2019. All aerobically digested and dewatered biosolids were hauled to Madison County Landfill.

SECTION 9 - ATTACHMENTS

Please attach:

If yes, please explain.

- Temperature monitoring and detention time data.
- Sample analyses laboratory reports.
- Any additional reporting requirements.

Tary additional reporting requirements.
Do you have a variance to the Part 360 permit requirements? Yes No
If yes, please describe:
SECTION 10 – UNAUTHORIZED WASTE
Has unauthorized solid waste been received at the Processing Facility during the reporting period?
Yes No

SECTION 6 – PATHOGEN REDUCTION & VECTOR ATTRACTION REDUCTION

Check one method for each:

Pathogen Reduction 361-3.7(a)

Windrow Composting
Aerated Static Pile Composting
In-vessel Composting
Other (specify):
Vector Attraction Reduction 361-3.7(b)
38% Volatile Solids Reduction
Bench Scale Anaerobic Digestion
Bench Scale Aerobic Digestion
SOUR
Aerobic Process 14 days, >40 °C, >45 °C avg.
pH raised to ≥12 for 2 hours and ≥11.5 for 22 hours
75% solids
90% solids (untreated solids)

Attach operating and monitoring data to show compliance with methods chosen. Temperature data records should indicate when a pile was created, pile was moved, additional material was added and/or pile was turned.

SECTION 7 - FINISHED COMPOST ANALYSIS

Please attach sampling analyses and laboratory reports as required under Part 360 or your permit. Copies of original laboratory results must be attached. All results, except pH and Total Solids, must be on a dry weight basis.

Summarize data in table below or attached document. Print additional pages as needed.

Analysis Date ===>	Permit Pre 2017 Regs. Monthly Conc. (mg/kg)	Permit Post 2017 Regs. Max. Conc. (mg/kg)
Arsenic (mg/kg)	41	41
Cadmium (mg/kg)	10	10
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Mercury (mg/kg)	10	10
Molybdenum (mg/kg)	40	40
Nickel (mg/kg)	200	200
Selenium (mg/kg)	100	100
Zinc (mg/kg)	2,500	2,500
TKN (mg/kg)		
Ammonia Nitrogen (mg/kg)		
Nitrate (mg/kg)		Apparent Ma th dear
Total Phosphorus (mg/kg)		
Total Potassium (mg/kg)		
pH (s.u.)		esperatus de la companya de la comp La companya de la co
Total Solids (%)	10 mm 18 41 18 41	and a superior and a
Total Volatile Solids (%)		
Fecal Coliform (MPN/g)	<1,000	MPN/g
Salmonella sp. (MPN/4g)	<3MP	'N/4g
Other		

SECTION 11 - PROBLEMS/COMPLAINTS

Describe any operational problems or complaints arising from the composting operation and include any methods used to remedy the situations. This should include odor complaints, marketing difficulties, major equipment failure, etc.

No compost was produced in 2019.

Section 12 – QUESTIONS

Please identify any questions or concerns that you would like the Department to answer or consider:

The Madison County Sewer District no longer exists. The Town of Cazenovia became the owner of the wastewater treatment facility as of January 1, 2018. The Town of Cazenovia Water Pollution Control Facility contacted NYSDEC region 7 for a new SPDES permit December 2017. As of February 2020 the Town of Cazenovia has not recieved its new SPDES permit from the NYSDEC. No Compost was produced during 2019 at the Town of Cazenovia Water Pollution Control Facility for all of 2019. All aerobically digested biosolids were dewatered and hauled to an approved landfill site. (Madison County Landfill).

SECTION 13 - CERTIFICATION

The Owner or Operator must sign, date and submit one completed form with an original signature to the appropriate Regional Office (See attachment for Regional Office addresses and Contacts.)

The Owner or Operator must also submit one copy by email, fax or mail to:

New York State Department of Environmental Conservation Bureau of Waste Reduction and Recycling – Annual Report 625 Broadway – 9th Floor Albany, New York 12233-7253

> Phone: 518-402-8706 Fax 518-402-9024

Email address: organicrecycling@dec.ny.gov

Permit prior to November 2017:

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority to sign this report form pursuant to 6 NYCRR Part 360. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Permit Post November 2017:

I certify, under penalty of law, that the information that will be used to determine compliance with the requirements in Subpart 361-3 of 6 NYCRR Part 361 has been prepared under my direction and supervision in accordance with the system designed to ensure that qualified personnel properly gather and evaluate this information. I am aware that false statement made herein are punishable pursuant to section 210.45 of the penal law.

	2-10-2020
Signature	Date
Jim Cunningham	Town of Cazenovia WPCF Manager
Name (Print)	Title (Print)
jimcnwt@gmail.com	
Email (Print)	
7 Albany Street	Cazenovia
Address	City
New York 13035	315 525 4420
State and Zip	Phone Number
ATTACHMENTS: ONO YES (IF YES, LIST A	ATTACHMENTS)

New York State Department of Environmental Conservation Division of Materials Management Bureau of Waste Reduction and Recycling

MATERIAL MANAGEMENT PROGRAM CONTACTS

CENTRAL OFFICE

Bureau of Waste Reduction and Recycling 625 Broadway Albany, NY 12233-7253 Phone: (518) 402-8706

For Submission of Organics Recycling Annual Reports only:

Fax: (518) 402-9024

Email: organicrecycling@dec.ny.gov

REGIONAL OFFICE ADDRESS & LEAD CONTACT PERSON

REGION 1 (Nassau, Suffolk)

Syed Rahman/David Gibb SUNY @ Stony Brook 50 Circle Road Stony Brook, NY 11790 Phone: (631) 444-0375 SWMFannualreportR1@dec.ny.gov

REGION 2 (Bronx, Kings, New York, Queens, Richmond)

Joseph O'Conneil 47-40 21st Street Long Island City, NY 11101-5407 Phone: (718) 482-4896 SWMFannualreportR2@dec.ny.gov

REGION 3 (Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester)

James Lansing 21 South Putt Corners Road New Paltz, NY 12561 Phone: (845) 256-3123 SWMFannualreportR3@dec.ny.gov

REGION 4 (Albany, Columbia, Delaware, Greene, Montgomery, Otsego, Rensselaer, Schenectady, Schoharie)

Victoria Schmitt 1130 North Westcott Road Schenectady, NY 12306 Phone: (518) 357-2243 SWMFannualreportR4@dec.ny.gov

REGION 5 (Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, Warren, Washington)

Jessie Sangster 1115 State Route 86, PO Box 296 Ray Brook, NY 12977 Phone: (518) 897-1266 SWMFannualreportR5@dec.ny.gov

REGION 6 (Herkimer, Jefferson, Lewis, Oneida, St. Lawrence)

Gary McCullouch 317 Washington Street Watertown, NY 13601 Pnone: (315) 785-2513 SWMFannualreportR6@dec.ny.gov

REGION 7 (Broome, Cayuga, Chenango, Cortland, Madison, Onondaga, Oswego, Tioga, Tompkins)

Thomas Annal 615 Erie Boulevard West Syracuse, NY 13204 Phone: (315) 426-7419 SWMFannualraportR7@dec.ny.gov

REGION 8 (Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Yates)

Greg MacLean 6274 East Avon-Lima Road Avon, NY 14414 Phone: (585) 226-5411 SWMFannualreportR8@dec.ny.gov

REGION 9 (Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Wyoming)

Peter Grasso 270 Michigan Avenue Buffalo, NY 14203 Phone: (716) 851-7220 SWMFannualreportR9@dec.ny.gov

December 2019