

ELC EFFLUENT

OCT 9 - 2014

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NPDES PERMIT NO. NC0021482 DISCHARGE NO. 001 MONTH August YEAR 2014
 FACILITY NAME TOWN OF MAYSVILLE CLASS 2 COUNTY JONES
 CERTIFIED LABORATORY (1) ENVIRONMENT ONE, INC. CERTIFICATION NO. 10 OCT 14 2014
 (list additional laboratories on the backside/page 2 of this form)
 OPERATOR IN RESPONSIBLE CHARGE (ORC) BRIAN ODUM GRADE 2 CERTIFICATION NO. 991108
 PERSON(S) COLLECTING SAMPLES STAFF ORC PHONE 910-743-4441
 CHECK BOX IF ORC HAS CHANGED NO FLOW / DISCHARGE FROM SITE

Mail ORIGINAL and ONE COPY to:
 ATTN: CENTRAL FILES
 DIVISION OF WATER QUALITY
 1617 MAIL SERVICE CENTER
 RALEIGH, NC 27699-1617

x *R K O* 9.24-14

(SIGNATURE OF OPERATOR IN RESPONSIBLE CHARGE) DATE
 BY THIS SIGNATURE, I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DATE	Operator Arrival Time 2400 Clock		ORC On Site? **	50050		00010	00400	50060	00310	00610	00530	31616	00300	00600	00665	ENTER PARAMETER CODE ABOVE NAME AND UNITS													
	HRS	HRS		Y/B/N	FLOW											TEMPERATURE	pH	RESIDUAL CHLORINE	BOD ₅ 20°C	AMMONIA NITROGEN	TOTAL SUSPENDED	FECAL COLIFORM (Geometric Mean)	DISSOLVED OXYGEN	TOTAL NITROGEN	TOTAL PHOSPHORUS				
					EFF <input checked="" type="checkbox"/>											INF <input type="checkbox"/>										DAILY RATE	CELSIUS	UV disinfection	UNITS
1	0800	3	Y	.264	24								7.8																
2	0630	4	N	.355	24								7.5						RECEIVED										
3	0700	9	N	.404	23								7.9																
4	0730	7.5	Y	.429	23								7.2						OCT 02 2014										
5	0730	8	Y	.204	24								6.7																
6	0730	8.5	Y	.236	24								6.1						CENTRAL FILES										
7	0800	7	Y	.216	24	7.7		2.0	0.36	2.5	1800	7.0							SECTION										
8	0700	4.5	Y	.217	25								7.4																
9	0900	3	B	.122	24								7.6																
10	0900	3	B	.142	24								7.4																
11	0800	7.5	N	.144	24								7.8																
12	0730	7	B	.139	25								7.7																
13	0700	7	Y	.130	25								7.2																
14	0730	8	Y	.122	24			2.7	0.16	2.5	6500	7.7																	
15	0730	4.5	B	.128	24								7.6																
16	0700	3	N	.134	24								7.4																
17	0700	2	N	.113	24								7.8																
18	0700	9.5	Y	.228	25								7.7																
19	0700	8.5	Y	.278	25								6.8																
20	0700	8	Y	.174	25								6.7																
21	0630	7.5	Y	.168	25	7.4		3.3	0.31	2.5	6000	6.9																	
22	0630	4	Y	.185	26								5.4																
23	1000	3	B	.157	26								7.5																
24	1000	3	B	.125	24								7.7																
25	0700	8.5	Y	.130	25								7.4																
26	0630	8.5	Y	.127	25								7.6																
27	0630	8.5	Y	.111	25								7.0																
28	0630	8.5	Y	.106	24			2.0	0.12	2.5	1	7.1																	
29	0700	6	Y	.096	24								6.9																
30	0700	3	N	.093	25								7.1																
31	0745	3	N	.087	25								6.8																
AVERAGE				.192	24				2.5	0.24	2.5	514.7	7.3																
MAXIMUM				.404	26	7.7			3.3	0.36	2.5	6500	7.9																
MINIMUM				.087	23	7.4			2.0	0.12	2.5	1	6.1																
Comp. (C) / Grab (G)					C	C			C	C	C	C	C																
Monthly Limit				0.180	N/A	6.0-9.0		N/A	30	2.3	30	200	5.0	N/A	N/A														

INFLUENT

NPDES Permit No. NC0021482 Discharge No. 001 Month August Year 2014
 Facility Name TOWN OF MAYSVILLE County JONES

DATE	Time 2400 Clock	Composite Time	00010	00400	00310	00610	00530	ENTER PARAMETER CODE ABOVE, NAME AND UNITS BELOW									
			Temperature °Celsius	pH	BOD ₅ , 20°C	Ammonia Nitrogen as N	Total Suspended Solids										
			°C	UNITS	mg/L	mg/L	mg/L										
	HRS	HRS															
1																	
2																	
3																	
4																	
5																	
6	0800																
7	0800	24	4		49		63										
8																	
9																	
10																	
11																	
12																	
13	0800																
14	0800	24	4		82		86										
15																	
16																	
17																	
18																	
19																	
20	0800																
21	0800	24	4		34		48										
22																	
23																	
24																	
25																	
26																	
27	0800																
28	0800	24	4		76		56										
29																	
30																	
31																	
Average					60		63										
Maximum			4		82		86										
Minimum			4		34		48										
Comp.(C)/Grab(G)			G		C		C										

NPDES Permit No. NC0021482 Discharge No. 001 Month August Year 2014
 Facility Name TOWN OF MAYSVILLE County JONES
 Stream WHITE OAK RIVER Stream WHITE OAK RIVER
 Location 100' UPSTREAM Location 300' DOWNSTREAM

UPSTREAM

DOWNSTREAM

DATE	Time 2400 Clock	00010	00400	00310	00300	31616	00095	Enter Parameter Code Above, Name and Units Below						
		Temperature °Celsius	pH	BOD ₅ , 20°C	Dissolved Oxygen	Fecal Coliform (geometric mean)	Conductivity							
		HRS	°C	UNITS	mg/L	mg/L	#/100 ml	µmhos/cm						
1														
2														
3														
4														
5														
6														
7	0915	24			5.9									
8														
9														
10														
11														
12														
13														
14	1000	24			4.8									
15														
16														
17														
18														
19														
20														
21	0945	25			5.9									
22														
23														
24														
25														
26														
27														
28	1000	24			6.2									
29														
30														
31														
Average		24			5.7									
Maximum		25			6.2									
Minimum		24			4.8									

DATE	Time 2400 Clock	00010	00400	00310	00300	31616	00095	Enter Parameter Code Above, Name and Units Below						
		Temperature °Celsius	pH	BOD ₅ , 20°C	Dissolved Oxygen	Fecal Coliform (geometric mean)	Conductivity							
		HRS	°C	UNITS	mg/L	mg/L	#/100 ml	µmhos/cm						
1														
2														
3														
4														
5														
6														
7	0915	24			5.7									
8														
9														
10														
11														
12														
13														
14	1000	24			4.6									
15														
16														
17														
18														
19														
20														
21	0945	25			6.2									
22														
23														
24														
25														
26														
27														
28	1000	24			6.4									
29														
30														
31														
Average		24			5.7									
Maximum		25			6.4									
Minimum		24			4.6									

Facility Status: (Please check one of the following)

All monitoring data and sampling frequencies meet permit requirements
(including weekly averages, if applicable)

Compliant

All monitoring data and sampling frequencies do NOT meet permit requirements

Noncompliant

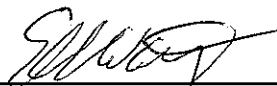
The permittee shall report to the Director or the appropriate Regional Office any noncompliance that potentially threatens public health or the environment. Any information shall be provided orally within 24 hours from the time the permittee became aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances.

If the facility is noncompliant, please attach a list of corrective actions being taken and a time-table for improvements to be made as required by Part II.E.6 of the NPDES permit.

"I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations."

Edward Waltz, Mayor

Permittee (Please print or type)



Signature of Permittee***

Date

(Required unless submitted electronically)

P.O. Box 265 Maysville, NC 28555

910-743-4441

31-Jul-12

Permittee Address

Phone Number

e-mail address

Permit Expiration Date

ADDITIONAL CERTIFIED LABORATORIES

Certified Laboratory (2)	_____	Certification No.	_____
Certified Laboratory (3)	_____	Certification No.	_____
Certified Laboratory (4)	_____	Certification No.	_____
Certified Laboratory (5)	_____	Certification No.	_____

PARAMETER CODES

Parameter Code assistance may be obtained by calling the NPDES Unit at (919) 807-6300 or by visiting <http://portal.ncdenr.org/web/wq/swp/ps/npdes/appforms>.

Use only units of measurement designated in the reporting facility's NPDES permit for reporting data.

- * **No Flow/Discharge From Site:** Check this box if no discharge occurs and, as a result, there are no data to be entered for all of the parameters on the DMR for the entire monitoring period.
- ** **ORC On Site?:** ORC must visit facility and document visitation of facility as required per 15A NCAC 8G .0204.
- *** **Signature of Permittee:** If signed by other than the permittee, then the delegation of the signatory authority must be on file with the state per 15A NCAC 2B .0506(b)(2)(D).

Mayor
Mr. Edward Waltz

Commissioners
Mr. Schumata Brown (Mayor Pro-tem)
Mrs. Janet G. Baker
Mr. David F. Chapman, Jr.
Mr. Bobby Flowers
Mrs. Elaine White



Town Manager
Jonathan Franklin

Clerk/Finance Officer
Hans Kalwitz

Town of Maysville
404 Main St. P.O. Box 265
Maysville, NC 28555
(910) 743-4441 Fax (910) 743-0895

September 25, 2014

Amy Adams
Regional Supervisor
Surface Water Protection Section
Washington Office
Washington, NC 27889

Mrs. Adams,

The Maysville WWTP was non-compliant in July due to exceeding fecal coliform limits and flow limits due to these reasons.

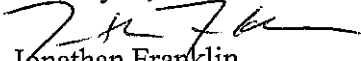
Due to the high flows staff had to turn the plant off in order to handle all of the flow. Due to turning the plant off, old UV lights and the high flows the turbidity and clarity of the effluent hindered the effectiveness of the UV treatment system. Staff added chlorine sticks to the effluent basin to trying to assure a good kill.

We continued to have even more problems with the UV light distributor. We finally got the new jackets in on 9/10/14, two weeks after they were promised. Then come to find out we were shorted 6 bulbs and 20 gaskets. We changed all the lights, jackets and gaskets that we could and have requested our missing items from the manufacturer.

To make circumstances worse, we received 10.5 inches of rain in the month of August. The amount of rain and its recurrence never allowed the plant to recover and settle out. We are currently in the process of buying a sewer camera to better help us identify sources of I & I. We have also commissioned a PER to apply for EDA, Golden Leaf and USDA funds to do a sewer upgrade project to add a EQ basin and make other needed repairs.

We believe that staff followed the correct procedures during the events and we will continue to operate the plant in accordance with our permitted limits. We feel we have made some serious headway in solving our I & I issues and will continue to work on those issues. If you have any questions, please give me a call, 910-743-4441.

Thank you,


Jonathan Franklin
Town Manager