

OKLAHOMA DEPARTMENT OF ENVIRONMENTAL QUALITY
APPLICATION FOR PERMIT TO DISCHARGE MUNICIPAL/DOMESTIC WASTEWATER
UNDER THE OKLAHOMA POLLUTANT DISCHARGE ELIMINATION SYSTEM (OPDES)

Application for Permit to Discharge Municipal/Domestic Wastewater
FORM 2M1 (Major)

FOR DEQ USE ONLY	Application/Permit Number OK00 _____ Facility ID No. _____
	Date Received: _____
	SIC Code: _____
	If a proposed facility, give estimated date of completion: _____
	DEQ PERMIT ENGINEER: _____

DO NOT attempt to complete this application without reading the instructions!

SECTION I

1. Legal name of applicant: City of Okmulgee

2. Mailing address of applicant:

Street Address or P.O. Box PO Box 250

City Okmulgee County Okmulgee State OK Zip Code 74447

Telephone 918-758-1190 Fax 918-758-1186

E-mail Address WWTP@OKmcity.net

3. Name and address of facility:

Facility Name City of Okmulgee Wastewater Treatment Plant

Street Address 1700 S. Oklahoma St

City Okmulgee County Okmulgee State OK Zip Code 74447

Telephone 918-758-1190 Fax 918-758-1186

E-mail Address WWTP@OKmcity.net

4. Location of discharging facility (e.g., NE 1/4, SW 1/4, SE 1/4, Section 1, Township 2 North, Range 3 West):

Legal Description of Facility Location SE 1/4, SE 1/4, NE 1/4, Section 13, Township 13 N, Range 12 E.

Latitude: 35°35'39.475" N Longitude: 95°58'46.429" W

5. Type of Ownership: Public Private Federal State

6. Contact Person:

Name and Title Keith Fleming / Plant Supervisor
Address 1700 S. Oklahoma St City OKmulgee
County OKmulgee State OK Zip Code 74447 Telephone 918-758-1190
Fax 918-758-1186 Cell Phone 918-629-0148
E-mail Address wwtp@okmcity.net

7. Type of discharge:

- A. Wastewater from lagoon system
- B. Wastewater from mechanical plant
- C. Other (specify) _____

8. Type of treatment:

- A. Lagoon system with total retention by evaporation (Does not require this form, it requires Form 530E)
- B. Lagoon system with effluent used for land application only (Does not require this form, it requires Form 627-WRP)
- C. Lagoon system with effluent discharge to receiving water
- D. Lagoon system with effluent discharge and water reuse (Also fill out Section III of application)
- E. Mechanical Plant with effluent discharge: (please describe briefly the type of treatment plant)
Aerobic
- F. Mechanical Plant with discharge and water reuse: (please describe briefly the type of treatment plant and fill out Section III of application)

9. Is chlorine or any other halogen used at this facility?

- Yes No

If yes, is dechlorination or dehalogenation used at this facility? (See instructions)

- Yes No

Is an ultraviolet (UV) system used at this facility?

- Yes No

10. Design flow of facility in million gallons per day (mgd) 4.15

**11. Discharge point number
(List all outfalls)**

001 520700
002 (if applicable)
003 (if applicable)

**Total volume presently discharged
million gallons per day (mgd)**

2.63

12. Legal description(s) of all discharge point(s):

Outfall 001:

Name of receiving water(s): OKmulgee Creek, Tributary Deep Fork River

Discharge is (check one): Continuous Batch Intermittent Seasonal

Latitude: 35 35' 4" N Longitude: 95 58' 45" W

Legal Description of discharge point _____, _____, _____, Section _____, Township _____, Range _____

Outfall 002 (if applicable):

Name of receiving water(s): N/A

Discharge is (check one): Continuous Batch Intermittent Seasonal

Latitude: _____ N Longitude: _____ W

Legal Description of discharge point _____, _____, _____, Section _____, Township _____, Range _____

Outfall 003 (if applicable):

Name of receiving water(s): N/A

Discharge is (check one): Continuous Batch Intermittent Seasonal

Latitude: _____ N Longitude: _____ W

Legal Description of discharge point _____, _____, _____, Section _____, Township _____, Range _____

13. During periods of heavy rain, is the increased flow:

- Bypassed to the receiving stream with no treatment
- Given partial treatment and discharged
- Given complete treatment and discharged
- Stored for later treatment

14. Biosolids/Sludge generated by this facility:

A. Current biosolids/sludge treatment process. (Please explain)

Sludge is pumped to a Gravity thickener then to a Aerobic digester and then dewatered through a Belt Filter Press

B. Amount of biosolids/sludge produced (dry metric tons/year) 102.67

1. Land application of biosolids

Sludge management plan, if any: _____

Sludge management permit number 35560005 approved by the Oklahoma Department of Environmental Quality or the Oklahoma State Department of Health on 5-14-96

Location(s) of current land application site(s) (legal description to the nearest 10 acres).

Site 1: SW 1/4, NW 1/4, Section 13, Township 13N, Range 12E, County OKmulgee

Site 2: S 1/2, NW 1/4 SW 1/4, Section 13, Township 13N, Range 12E, County OKmulgee
(if applicable)

Site 3: _____, Section _____, Township _____, Range _____, County _____
(if applicable)

2. Landfilled sludge

Sludge disposition plan, if any: N/A

Sludge disposition permit number (if applicable) _____ approved by the Department of Environmental Quality or the Oklahoma State Department of Health on _____

Name of Landfill _____

Landfill's permit number _____

15. Does this facility receive industrial wastewater?

Yes No

If "Yes", Submit Section II of this form (attached) for each significant industrial facility discharging to the sewer system, including wastewater from water treatment plant.

Are industrial discharge(s) to the system(s) controlled by

Ordinance
 Pretreatment Program

Yes No

16. Does this facility supply reclaimed water?

If "Yes", Submit Section III of this form (attached) for each user of reclaimed water.

17. **Maps and drawings - Attach all required maps and drawings to the back of this application. (see instructions)**
18. **Complete attached Table 1 detailing both influent and effluent pollutants.**
19. **Submit test results of a 24-hour composite sample of effluent, for all pollutants listed in 40 CFR 122, Appendix D, Table II and Table III.**
20. **Submit quantitative data on pollutants listed in 40 CFR 122, Appendix D, Table IV and Table V that are known or reasonably expected to be discharged.**
21. **Submit tabulations of all results collected pertaining to the quality and quantity of all toxic pollutants identified as a constituent in the publicly owned treatment works (POTW) effluent and regulated or prohibited by an Industrial Waste Ordinance during the period from three years prior to the date of this application to the present. Also, tabulate the PQL used to quantify the toxic pollutants.**
22. **Landowner Notification** (THIS SECTION MUST BE COMPLETED PRIOR TO SUBMISSION OF THE APPLICATION – THE APPLICATION WILL AUTOMATICALLY BE CONSIDERED INCOMPLETE IF IT IS NOT COMPLETED):

Is any part of the land on which the facility is located (including treatment units, discharge conveyances, stormwater holding basins, and/or flow equalization basins) owned by a person or entity other than the applicant?

No

Yes – the applicant or applicant’s certifying official must ensure that such landowner(s) have been notified of the applicant’s intent to obtain an OPDES permit and initial the box to the right indicating that such notification has been made.

***Note: Please mail completed landowner affidavit from to DEQ (see instructions)**

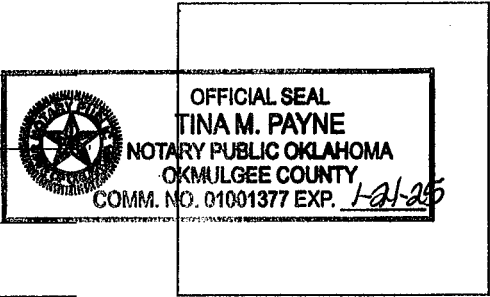
23. **List other information which should be brought to the attention of the Department of Environmental Quality (DEQ) in regard to the issuance of a discharge permit for the facility.**

Certification:

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 manage the system or those directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I also certify that I will provide for the operation of this facility in accordance with the Oklahoma Discharge Permits and Pollution Control Regulations and will provide certified operators as required by the Oklahoma Water and Wastewater Operators Certification Act. I further certify that I shall acquire or possess a right to the use of the property or properties on which the discharging facilities, activities, or discharge sources are located as well as the property on which the proposed discharge point(s) are located, including the access route thereto. I understand I shall maintain such right of use and access for the duration of the permit term. I am aware that there are significant penalties for submitting false information, including revocation of the permit and the possibility of fine and imprisonment for knowing violations.

Note: Applications must be signed by the authorized chief elective or executive officer of the applicant, or by the applicant, if an individual.

Name (print) Tom Giulioli
Title Okmulgee City Manager
Date 2-22-22
Signature *[Handwritten Signature]*



Subscribed and sworn to before me this 22nd day of February, 2022.
Tina M Payne My commission expires 1-21-25
Notary Public Signature

Notary Seal

The application shall be filed in duplicate with the original and one copy to be submitted to the DEQ, and one copy to be submitted to the local DEQ office.

Please return completed form with application fee and attachments to:
Water Quality Division
Department of Environmental Quality
707 N. Robinson
P.O. Box 1677
Oklahoma City, Oklahoma 73101-1677

**TABLE I
DESCRIPTION OF INFLUENT AND EFFLUENT**

Parameter and Storet Code	Influent	Effluent					Sample Type (7)
	Annual Average Value (1)	Annual Average Value (2)	Lowest Monthly Average Value (3)	Highest Monthly Average Value (4)	Frequency of Analysis (5)	No. of Samples (6)	
Flow (millions gallons per day) 50050		2.68	1.84	4.06	Daily	361	Flow Meter
pH 00400	N/A	N/A	6.1	7.5	Daily	360	Grab
Temperature - winter (° F) 74028	N/A	55.5	48.7	61.3	Daily	360	Grab
Temperature - summer (° F) 74027	N/A	71.9	60.8	78.6	Daily	360	Grab
Fecal Streptococci Bacteria (number/100 ml) 75054 (Provide if available)	N/A	—	—	—	—	—	—
E. Coli (number/100 ml) 51041 (Provide if available)	N/A	26.5	9.2	47.0	2/week	45	Grab
Total Coliform Bacteria (number/100 ml) 75056 (Provide if available)	N/A	—	—	—	—	—	—
BOD 5-day (mg/l) 00310	89.9	2.14	2.0	2.36	1/week	52	Comp 24 hr
Chemical Oxygen Demand (mg/l) 00340 (Provide if available) OR Total Organic Carbon (mg/l) 00680 (Provide if available) (Either analysis acceptable)	237	27	24	33	1/week	52	Comp 24 hr

TABLE I (Continued)
DESCRIPTION OF INFLUENT AND EFFLUENT

Parameter and Storet Code	Influent	Effluent					
	Annual Average Value (1)	Annual Average Value (2)	Lowest Monthly Average Value (3)	Highest Monthly Average Value (4)	Frequency of Analysis (5)	No. of Samples (6)	Sample Type (7)
Chlorine - Total Residual (mg/l) 50060	N/A	—	—	—	—	—	—
Total Solids (mg/l) 00500	N/A	—	—	—	—	—	—
Total Dissolved Solids (mg/l) 70300	N/A	258	205	306	1/Month	12	Comp 24 hr
Total Suspended Solids (mg/l) 00530	127	6.7	5.25	8.0	1/week	52	Comp 24 hr
Settleable Matter (Residue) (mg/l) 00545	N/A	—	—	—	—	—	—
Kjeldahl Nitrogen (mg/l) Ammonia 00625 00610 (Provide if available)	N/A	0.28	0.21	0.38	1/week 3/week winter	96	Comp 24 hr
Nitrate (as N) (mg/l) 00620 (Provide if available)	N/A	—	—	—	—	—	—
Nitrite (as N) (mg/l) 00620 (Provide if available)	N/A	—	—	—	—	—	—
Phosphorous, Total (as P) (mg/l) 00665 (Provide if available)	N/A	—	—	—	—	—	—
Dissolved Oxygen (DO) (mg/l) 00300	N/A	8.69	7.22	10.70	1/week	360	Comp 24 hr

9:12:57 AM
7/16/2009

Logon Logoff

Operator Level
Name 0

- Legend
- Plant Overview
- EPA Station
- Headworks
- Aeration Basins
- RAS/WAS
- Sludge Handling

- Alarms & Events
- Alarm Database
- Trend Chart
- Data Extraction
- ETM's/Flow Totals
- Alarm Acknowledge



West Valve	East Valve
0.17 feet	0.24 feet

West Valve	East Valve
0.17 feet	0.24 feet



SECTION II

INDUSTRIAL WASTEWATER CONTRIBUTION TO MUNICIPAL SYSTEM

Submit a description of each industrial facility discharging to the municipal system, using a separate Section II for each. Indicate the 4 digit Standard Industrial Classification (SIC) Code for the industry, the major product or raw material, the flow (in gallons per day), and the characteristics of the wastewater discharged from the industrial facility into the municipal system. For wastewater from a drinking water plant, indicate the type of treatment plant (conventional, R.O. etc.) in item 2 below.

1. Major Contributing Facility

Contact person and Title Jerico Winkelman / Plant Engineer
 Name of facility Polyvision
 Address 4301 N. Wood Drive
 City OKmulgee County OKmulgee
 State OK ZIP Code 74447
 Telephone 918-759-6050 Fax 678-542-3325 Cell Phone 405-397-9835
 E-mail Address _____

2. Product or item produced at this facility Porcelain Enamel

3. Primary Standard Industrial Classification (SIC) Code 3497

4. Principal Product or Raw Material

Product or Raw Material	Quantity	Units
<u>Porcelain Enamel</u>	<u>90,000 5g/ft</u>	<u>Daily</u>
_____	_____	_____
_____	_____	_____

5. Flow: Indicate the volume of wastewater discharged into the municipal system in gallons per day (gpd) and whether this discharge is intermittent or continuous.

10,000 GPD Intermittent Continuous

6. Pretreatment Provided: Indicate if pretreatment is provided prior to entering the municipal collection system. Yes No

7. Characteristics of Wastewater: Please list the pollutants and maximum concentrations of the pollutants in the table below.

Pollutant	<u>Metals</u>			
Maximum Concentration	<u>See Attached</u>			

SECTION III

USAGE OF NON-POTABLE RECLAIMED WATER (If Applicable)

A. Supplier Information (Attach a schematic of the additional treatment given to the wastewater for reuse showing sampling point and flow meters for reclaimed water for each user)

1. Category of reclaimed water to be supplied (See OAC 252:656 Subchapter 27 and OAC 252:627 for details)
 Category 2 Category 3 Category 4 Category 5
2. DEQ Permit No. and Date of Approval of Construction to supply reclaimed water _____
3. Approximate Quantity of reclaimed water to be supplied _____
4. Location of sampling point for reclaimed water: Latitude: _____ N, Longitude: _____ W
5. Attach site plan of the supplier.

B. User Information (Use separate sheet for each site of the reclaimed water. Also, submit a signed copy of the agreement with each user)

1. Name of user _____
 Contact person and title NJA
 Address _____
 City _____ County _____
 State _____ ZIP Code _____
 Telephone _____ Cell Phone _____
 E-mail Address _____
2. DEQ Construction Permit No. and Date of Approval to use reclaimed water _____
3. Section (¼, ¼, ¼), Township, and Range of the reuse site _____
4. Point of entry of reclaimed water at user's site: Latitude: _____ N, Longitude _____ W
5. Attach site plan for each user including the area exposed to the reclaimed water.
6. Description of the reuse activity: _____
7. Describe access control to general public during the use of reclaimed water:

8. Describe storage facility of reclaimed water at the reuse site:

9. Approximate acreage, type and amount of crop to be irrigated for each site (applicable only to land application of reclaimed water)

Site Location	Approximate Total Acres	Approximate Irrigated Acres	Type of Crop	Annual Quantity of Crop

INDUSTRIAL USER PERMIT

In accordance with the provisions of Ordinance No. 1691.

**Polyvision
4301 North Wood Drive, Hwy 75 N.
Okmulgee, OK 74447**

is hereby authorized to discharge industrial wastewater from the above identified facility and through the outfalls identified herein into the CITY OF OKMULGEE'S sewer system (POTW) in accordance with the conditions set forth in this permit. Compliance with this permit does not relieve the permittee of its obligation to comply with any or all applicable pretreatment regulations, standards or requirements under local, State, and Federal laws, including any such regulations, standards, requirements or laws that may become effective during the term of this permit.

Noncompliance with any term or condition of this permit shall constitute a violation of the CITY OF OKMULGEE'S sewer use ordinance.

This permit shall become effective **May 1, 2019**, and shall expire at midnight of **April 30, 2024**.

If the permittee wishes to continue to discharge after the expiration date of this permit, an application must be filed for a renewal permit in accordance with the requirements of Section 13.32.290 of Ordinance No. 1691, a minimum of 90 days prior to the expiration date.

By: 

Roger Ballenger
City Manager

Issued this 1st day of May 2019.

PART 1 – EFFLUENT LIMITATIONS

- A. During the period of **May 1, 2019, to April 30, 2024**, the permittee is authorized to discharge process wastewater to the CITY OF OKMULGEE’S POTW from the outfall listed below.

Description of outfalls:

<u>Outfall</u>	<u>Descriptions</u>
001	Sewer line following pretreatment facilities

- B. During the period of **May 1, 2019, to April 30, 2024**, the discharge from outfall 001 shall not exceed the following effluent limitations. Effluent from this outfall consists of all process water, wash water, and other water produced by the facility.

EFFLUENT LIMITATIONS

<u>PARAMETER</u>	<u>DAILY MAXIMUM (mg/l)</u>	<u>MONTHLY AVERAGE(mg/l)</u>
Cadmium	0.100	0.100
Chromium	0.42	0.17
Copper	1.52	1.52
Lead	0.15	0.13
Nickel	0.90	0.90
Zinc	1.33	0.56
Arsenic	0.15	0.15
Mercury	0.002	0.002
Silver	0.052	0.052
Cyanide	0.22	0.22
pH	No pH less than 5.0	

Rationale for Effluent Limitations

Polyvision is an Existing Source Porcelain Enameling-Steel Basis categorical industry discharging to a publicly owned treatment works and is therefore regulated by 40 CFR 466.14. These regulations establish effluent limitations for chromium, lead, nickel, and zinc however, the local limits for Nickel are lower than those established in 40 CFR 466.14 therefore, local limits are established for Nickel.

- C. The permittee shall not discharge wastewater containing any of the following substances or meeting any of the following characteristics from any of the outfalls:
1. Fats, wax, grease, or oils of petroleum origin, whether emulsified or not, in amounts that will cause interference or pass through or containing substances

which may solidify or become viscous at temperatures between 32 °F (0 °C) and 140 °F (60 °C);

2. Any gasoline, benzene, naphtha, fuel oil or other flammable or explosive liquids, solids or gases;
 3. Any ashes, hair, cinders, sand, mud, straw, shavings, metal, glass, rags, feathers, tar, plastics, wood, paunch, manure, or any other solid or viscous substances capable of causing obstructions or other interference with proper operation of the sewer system;
 4. Any pollutant, including oxygen demanding pollutants (Biodegradable fraction of COD, BOD, etc.) at flow rate and/or concentration which will cause the pollutant to pass through to the receiving waters or interfere with the POTW Treatment Plant. For the purpose of this section, the terms “pass through” and “interference” have the same definitions as appear in the City Ordinance **1691, Sections 13.32.030 (O) and 13.32.030 (S)**;
 5. Any wastewater which will induce a temperature that will inhibit biological activity in the first biological process (currently the biotowers) in the POTW. The temperature at the first biological process in the POTW shall not exceed 40 °C (104 °F), unless the Approval Authority, upon request of the POTW, approves alternate temperature limits.
- D. All discharges shall comply with all other applicable laws, regulations, standards, and requirements contained in Ordinance No. 1691 and any applicable State and Federal pretreatment laws, regulations, standards, and requirements including any such laws, regulations, standards, or requirements that may become effective during the term of this permit.

PART 2 – MONITORING REQUIREMENTS

- A. From the period beginning on the effective date of the permit until **April 30, 2019**, the permittee shall monitor outfall **001** for the following parameters, at the indicated frequency:

<u>Sample Parameter (units)</u>	<u>Measurement Location</u>	<u>Frequency</u>	<u>Sample Type</u>
Flow (GPD)	Effluent from	Daily	Flow Meter
Cadmium (mg/l)	Pretreatment	1/month	24hr Composite
Chromium (mg/l)	Facility	1/month	24hr Composite
Lead (mg/l)		1/month	24hr Composite
Nickel (mg/l)		1/month	24hr Composite
Zinc (mg/l)		1/month	24hr Composite
Arsenic (mg/l)		2/year	24hr Composite
Copper (mg/l)		2/year	24hr Composite
Mercury (mg/l)		2/year	24hr Composite

Silver (mg/l)	2/year	24hr Composite
Cyanide (mg/l)	2/year	Grab
pH (standard)	1/month	Grab

Flow Proportion Sampling:

Flow is consistent during the 24 hr sampling period therefore will not require flow proportion sampling.

- B. All handling and preservation of collected samples and laboratory analyses of samples shall be performed in accordance with 40 CFR Part 136 and amendments thereto unless specified otherwise in the monitoring conditions of this permit.
- C. The minimum frequency of sampling for the parameters regulated by 40 CFR 466.14 is once per month as well as pH. All other parameters must be sampled two times per year. The samples requiring continuous sampling can be time proportioned composites since the water discharge consistent with production.

All monitoring is required to be performed at the effluent of the pretreatment facility.

PART 3 – REPORTING REQUIREMENTS

A. Monitoring Reports

Monitoring results obtained shall be summarized and reported on an Industrial User Monitoring Report Form once per month. The reports are due on the 15th day of each month. The report for the last month covered under the previous permit is due on may 15, 2009. The first report under this permit is due on **June 15, 2014**. The report shall indicate the flow amounts and the nature and concentration of all pollutants in the effluent for which sampling and analyses were performed during the calendar month proceeding the submission of each report.

- B. If the permittee monitors any pollutant more frequently than required by this permit, using test procedures prescribed in 40 CFR Part 136 or amendments thereto, or otherwise approved by EPA or as specified in this permit, the results of such monitoring shall be included in any calculations of actual daily maximum or monthly average pollutant discharge, and results shall be reported in the monthly report submitted to the CITY OF OKMULGEE. Such increased monitoring frequency shall also be indicated in the monthly report.

C. Automatic Resampling

If the results of the permittee’s wastewater analysis indicate that a violation of this permit has occurred, the permittee must: