

**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
NEW ENGLAND - REGION I
ONE CONGRESS STREET, SUITE 1100
BOSTON, MASSACHUSETTS 02114-2023**

**Request for General Permit Authorization to Discharge Wastewater
(Notice of Intent to be covered by the General Permit (NOI))**

**Potable Water Treatment Facility (PWTF)
NPDES General Permit No. MAG640000 and NHG640000**

A. Facility Information

1. Facility Owner:

Name Lynnfield Center Water District e-mail _____
Street/PO Box 83 Phillips Road City Lynnfield
State Massachusetts Zip Code 01940
Contact Person Kenneth Burnham Telephone Number 781-334-3901

2. Facility Operator (if different from above):

Name _____ e-mail (optional) _____
Street/PO Box _____ City _____
State _____ Zip Code _____
Contact Person _____ Telephone Number _____

3. Facility Data (attach topographic map or other map showing facility/discharge location):

Name Phillips Road Pumping Station #3 (Greensand Filter Facility) e-mail (optional) _____
Street/PO Box 83 Phillips Road City Lynnfield
State Massachusetts Zip Code 01940
Contact Person Kenneth Burnham Telephone Number 7813343901
Latitude 42.545833 Longitude -71.050278

4. Standard Industrial Classification (SIC Codes) and Descriptions of Processes:

SIC Code(s) 4941
Description(s) Water Supply

5. Current Permitting Status (please check yes or no):

1. Has a prior NPDES permit been granted for the discharge? Yes ☒ (Permit Number: MAG640017)
No ☐
2. Is the discharge a "new discharge" as defined by 40 CFR Section 122.22? Yes ☐ No ☒
3. Is the facility covered by an individual NPDES permit? Yes ☐ (Permit Number) No ☒
4. Is there a pending application on file with EPA for this discharge? Yes ☐ (Date of submittal:) No ☒

B. Discharge Information

1. Name of Receiving Waterbody Beaverdam Brook
2. Type of Receiving Waterbody (e.g. stream, lake, reservoir, estuary etc) Brook
3. State Water Quality Classification: B Freshwater: X Marine Water:
4. Describe the discharge activities for which the owner/applicant is seeking coverage, including process discharges not specifically authorized in the PWTF GP which need to be authorized for discharge (and which attain the

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effluent limits and other conditions of the general permit). This description should include all treatment methods used on the wastewater prior to discharge including lagoons, baffles, filter presses etc. If lagoons are used at the facility, please include the number and size of lagoons; the size and elevation of the entry pipe; the time of travel from the entry point of the discharge into the lagoon to the entry point to the receiving water; and the length of backwash cycle for any combination of number of filters. (attach extra sheets if necessary):

Please see Attachment 1

5. Please provide a diagram depicting the treatment methods, outfalls, and receiving water. Please see Figure 1 and 2.

6. Number of outfalls: 1 Latitude and Longitude for each outfall
OUTFALL # 1 Latitude 42.545833 Longitude -71.050278

7. What is the proposed sampling location(s) and proposed consistent times of the month for collecting samples:

The greensand filters require backwashing approximately twice per year. For this reason, samples are taken on average twice per year.

When backwashing does occur, discharge samples are collected prior to the District's two sludge drying beds.

C. Effluent Characteristics

1. List here and attach information on any water additives used at the facility (Including chemicals for pH adjustment, dechlorination, control of biological growth, and control of corrosion and scale in water pipes):

Please see Attachment 2

2. Please report here any known remediation activities or water-quality issues in the vicinity of the discharge.

There are no known remediation activities or water-quality issues within a 1/2 mile radius of the discharge. Please see Figure 3.

3. Are aluminum-containing coagulants used at this facility? Yes No ☒

4. Does the discharge contain residual chlorine? Yes No ☒

5. Does the facility provide treatment to remove arsenic from the raw water source? Yes No ☒

6. Are phosphorus-containing chemicals added to the treated water at this facility? Yes No ☒

7. All applicants must attach a separate sheet listing all laboratory results (minimum of five) for total recoverable aluminum (in micrograms per liter) taken within the last six months. Do not include dilution when recording your results. See Section 4.4.5 of General Permit for more information.

Not applicable, no aluminum added.

8. Please include the following effluent data for each outfall:

Characteristic (report if measured)	Average Monthly	Maximum Daily
Discharge Flow (gpd)	N/A	12,000
TSS (mg/l)	N/A	1
pH (s.u.)	(min) N/A	(max) 7.1
Total Recoverable Aluminum (ug/l)	N/A	0.062
Total Residual Chlorine (ug/l)	N/A	<0.02

(continued on next page) Note: Average monthly values are not listed, as there are approximately two discharges from the lagoon per year. The data provided are test results from 6/19/2009, the date of the most recent backwash.

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8. Continued

Characteristic (report if measured)

Whole Effluent Toxicity (%) LC50 N/A and/or C-NOEC _____

9. If the discharge contains aluminum and/or residual chlorine, please provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water, the dilution factor, and attach any calculations used to support stream flow and dilution calculations (See Appendix VII for dilution calculations and additional information):

7Q10 _____ cfs Dilution Factor _____ cfs The discharge at the Lynnfield WTP does not contain aluminum and/or residual chlorine.

D. Endangered Species Act Eligibility

1. Using the instructions in Appendix I of the PWTF GP, under which criterion listed in Part II are you eligible for coverage under this general permit?
A ☒ B _____ C _____ D _____ E _____ F _____
2. If you selected criteria D or F, has consultation with the federal services been completed? Yes _____ No _____
3. If consultation with U.S. Fish and Wildlife Service and/or NOAA Fisheries Service was completed, was a written concurrence finding that the discharge is "not likely to adversely affect" listed species or critical habitat received? Yes _____ No _____
4. Attach documentation of ESA eligibility as described below and required at Part 3.4.1 and Appendix I, Part III, Step 4, of the General Permit. Please see Attachment 3.

Criterion A - No federally-listed threatened or endangered species or federally-designated critical habitat are present: A copy of the most current county species list pages for the county(ies) where your site or facility and discharges are located. You must also include a statement on how you determined that no listed species or critical habitat are in proximity to your site or facility or discharge locations.

Criterion B - Section 7 consultation completed with the Service(s) on a prior project: A copy of the USFWS's and/or NMFS's, as appropriate, biological opinion or concurrence on a finding of "unlikely to adversely effect" regarding the ESA Section 7 consultation.

Criterion C - Activities are covered by a Section 10 Permit: A copy of the USFWS's and/or the NMFS's, as appropriate, letter transmitting the ESA Section 10 authorization.

Criterion D - Concurrence from the Service(s) that the discharge is "not likely to adversely affect" federally-listed species or federally-designated critical habitat (not including the four species of concern identified in Section I of Appendix I): A copy of the USFWS's and/or the NMFS's, as appropriate, letter or memorandum concluding that the discharge is consistent with the general permit's "not likely to adversely affect" determination.

Criterion E - Activities are covered by certification of eligibility: A copy of the documents originally used by the other operator of your site or facility (or area including your site) to satisfy the documentation requirement of Criteria A, B, C or D.

Criterion F - Concurrence from the Service(s) that the discharge is "not likely to adversely affect" species of concern, as identified in Section I of Appendix I: A copy of the USFWS and/or the NMFS, as appropriate, concurrence with the applicant's determination that the discharge is "not likely to adversely affect" listed species.

E. National Historic Properties Act Eligibility