



# Application for a State Waste Discharge Permit to Discharge Domestic Wastewater to Ground Water by Land Treatment or Application

RECEIVED

FEB 02 2024

WA State Department  
of Ecology (SWRO)

This application is for a state waste discharge permit as required by Chapter 90.48 RCW and Chapter 173-216 WAC. Permit applications provide Ecology with information on pollutants in the waste stream, materials that may enter the waste stream, the flow characteristics of the discharge, and site characteristics at the point of discharge.

Ecology may request additional information to clarify the conditions of this discharge. The applicant should reference information previously submitted to Ecology that applies to this application in the appropriate section.

## SECTION A. GENERAL INFORMATION

1. Applicant Name: City of Port Townsend
2. Facility Name:  
(if different from applicant)
3. Applicant Address: 250 Madison  
Street  
Port Townsend 98368  
City/State Zip
4. Facility Location Address: 603 County Landfill Rd  
(if different from above) Street  
Port Townsend 9836834  
City/State Zip
5. Latitude/longitude of the processing facility as decimal degrees (NAD83/WGS84):  
48.0989 / 122.8340
6. Latitude/longitude of sprayfield/infiltration site discharge location (approximate center) as decimal degrees (NAD83/WGS84):  
48.0989 / 122.8340
7. Person to contact who is familiar with the information contained in this application:

Bliss Morris  
Name

Operations Manager  
Title

360-301-1485  
Telephone Number

Fax Number

bmorris@cityofpt.us  
Email

### FOR ECOLOGY USE ONLY

Check One

New/Renewal ☐

Modification ☐

Date Application Received

Application/Permit No.

Date Application Accepted

Date Fee Paid

8. Check One:

☒ **Permit Renewal** (including renewal of temporary permits)

Does this application request a greater amount of wastewater discharge, a greater amount of pollutant discharge, or a discharge of different pollutants than specified in the last permit application for this facility? ☐ YES ☒ NO

For permit renewals, the current permit is an attachment, by reference, to this application.

☐ **Permit Modification**

☐ **Existing Unpermitted Discharge**

☐ **Proposed Discharge**

Anticipated date of discharge:

*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 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 a fine and/or imprisonment for knowing violations.*

Bliss Morris  
Signature\*

1/30/2024  
Date

Operations Manager  
Title

Bliss Morris  
Printed Name

\*Applications must be signed by either a principal executive officer or a ranking elected official. If these titles do not apply to your organization, the person who makes budget decisions for this facility must sign the application. For state facilities, this is typically a program manager.

The application signatory may delegate signature authority for submittals required by the permit, such as monthly reports, to a suitable employee. You can delegate this authority to a qualified individual or to a position, which you expect to fill with a qualified individual. If you wish to delegate signature authority, please complete the following:

[Signature]  
Signature of delegated employee

1-31-24  
Date

City Manager  
Title or function at the facility

John Mauro  
Printed name

## SECTION B. TREATMENT PLANT INFORMATION

1. Identify all industries, commercial facilities or communities discharging to this publicly owned treatment works (POTW) by name, type of industry, address, telephone number and contact name. Attach extra sheet(s) if needed and label as attachment B1.

	INDUSTRY #1	INDUSTRY #2
NAME:	Goodman Sanitation	Enviro Check LLC
INDUSTRY:	Septic Pumper	Septic Pumper
ADDRESS:	2495 Cape George Rd Port Townsend	1612 Hastings Ave. Port townsend
TELEPHONE:	360-385-7155	360-379-9400
CONTACT NAME:	Amanda Grace	Dale Wurtsmith
INDUSTRIAL PRODUCT(S):		

2. POTW design and operation manuals available for this treatment facility:

Type of Manual	Date	Is there a copy at the POTW?
<input checked="" type="checkbox"/> Engineering Report		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<input checked="" type="checkbox"/> Operation and Maintenance Manual		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Crop Management Plan		<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Sprayfield Management Plan		<input type="checkbox"/> YES <input type="checkbox"/> NO

3. POTW Design Data:

a. Average Influent Flow for Maximum Month (MGD):	0.0021
b. Influent BOD Load (lbs/day):	3
c. Influent SS Load (lbs/day):	7
d. Began Operation (year):	1993
e. Last Major Upgrade (year):	1993
f. Planned Upgrades (year):	NA
g. Design Population:	NA
h. Actual Population:	NA
i. Sprayfield loading - attach copy of the irrigation schedule if schedule if available	NA

4. Are there plans to modify this facility within the next five years? If so, briefly describe what and when.

We are planning on replacing our 2 10,000 gallon steel holding tanks with one bigger concrete tank. We are planning on starting design for that in 2024 and planning construction in '25 or '26 as funding becomes available.



5. Attach a simple schematic drawing of the POTW. (*Label as attachment B.5. Attachments should be 11 x 17" or smaller*). The schematic should show all treatment processes (from B.6 below), flow direction and flow quantities in million gallons per day (MGD) or gallons per day (GPD).
6. Identify the type and number of unit processes at this facility.

Treatment	Unit Process	Number of Units
Lift stations	In collection system	
	At head of plant	1
Preliminary treatment	Manually operated bar screens	1
	Mechanically operated bar screens	
	Grit removal	1
	Pre-aeration	1
	Comminutors/grinders	
	Other ( <i>specify</i> )	
Primary Treatment	Primary Sedimentation Tank/Clarifiers	
	Septic tanks	
	Other ( <i>specify</i> ) RDT Dewatering unit	1
Secondary Treatment	Oxidation Ditch	
	Package Plant - Activated Sludge	1
	Package Plant - Physical/Chemical	
	Aerated Lagoon	
	Non-aerated Lagoon/Facultative Lagoon	
	Rotating Biological Contact	
	Secondary Clarifiers	
	Trickling Filter	
	Polishing Ponds	
	Other ( <i>specify</i> ) SBR process	1
Additional Treatment	Coagulation	
	Filtration	
	Storage (Lined Lagoon)	1
	Storage (Unlined Lagoon)	
	Other ( <i>specify</i> )	
Land Treatment or Application	Drainfield	
	Rapid Infiltration/Infiltration Lagoon	2
	Constructed Wetland	2
	Sprinkler Irrigation	
	Flood Irrigation	
	Ridge and Furrow Irrigation	
	Subsurface Irrigation	
	Other ( <i>specify</i> )	
Disinfection	Chlorination	1
	Ultraviolet	
	Other	



## SECTION C. WASTEWATER INFORMATION

average influent flow to the plant for the maximum month for at least the last 12 months:

3208 gallons/day

maximum daily flow applied to the land treatment/application site for the last 12 months:

5984 gallons/day

inches/acre/r

Describe how the influent and effluent flow are measured? Manual measurement

Attach flow records for at least the last 12 months. *(Label as attachment C.4.)*

Describe the collection method for the samples analyzed below (*i.e.*, grab, 24-hour composite). Applicants must collect grab samples (composites) for analysis of pH, temperature, cyanide, total phenols, residual chlorine, oil and grease, fecal coliform (including *E. coli*) Enterococci (previously known as fecal streptococcus at § 122.26 (d)(2)(iii)(A)(3)), or volatile organics.

Grab

Provide measurement values or range of measurements for treated wastewater prior to land treatment/application for the parameters with "X" in the left column of the table below. If you obtain the application from the Internet, contact Ecology's regional office to see if test subset of these parameters is permissible. All analyses (except pH) must be conducted by a laboratory registered or accredited by Ecology (AC 173-216-125). If this is an application for permit renewal, provide data for the last year for parameters that are routinely measured. For parameters measured only for this application, place the values under "Maximum." Report the values with units as specified in the parameter name or in the detection level.

The Permittee must use the specified analytical methods, detection limits (DLs) and quantitation levels (QLs) in the following table unless Ecology approves an alternate method or the method used produces measurable results in the sample and EPA has listed it as an EPA approved method in 40 CFR Part 136. If the Permittee uses an alternative method as allowed above, it must report the test method, DL, and QL on the discharge monitoring report or in the required report.

Parameter	Measurement Values			Number of Analyses	Analytical Method Std. Methods 19 <sup>th</sup> , 20 <sup>th</sup> edition or EPA	Detect Limit/Quar Level
	Minimum	Maximum	Average			
D (5 day)	1.7	7.5	3	34	SM 5210 B	/2 mg
D					SM 5220 D	/10 m
al suspended solids	3.2	24.05	7	34	SM 2540 D	/5 mg
al dissolved solids					SM 2540 C	
nductivity (cmhos/cm)					SM 2510 B	
monia-N as N					SM 4500-NH <sub>3</sub> C	/0.3 m
	7.3	7.8	7.5	34	SM 4500-H	0.1 standa
al Residual Chlorine	0.15	0.5	0.36	34	SM4500-Cl G	50/ µg
al coliform ganisms/100 mL)	<1E	13	<1E	34	SM 9221 E or 9222 D	
al coliform ganisms/100 mL)					SM 9221 B or 9222 B	
solved oxygen					SM 4500-O C/G	
rate + nitrite-N as N					SM 4500-NO <sub>3</sub> E	100 µ
al kjeldahl N as N					SM 4500-N <sub>org</sub> C/E/FG	300 µ
ho-phosphate-P as P					SM 4500-P E/F	10 µg
al-phosphorous-P as P					SM 4500-P E/P/F	10 µg
al Oil & grease					EPA 1664A	1.4/5 r
TPH - Dx					Ecology NWTPH Dx	250/250
TPH - Gx					Ecology NWTPH Gx	250/250
lcium					EPA 200.7	10 µg
loride					SM 4500-Cl C	0.15 µ
oride					SM 4500-F E	.025/0.1
gnesium					EPA 200.7	10/50
assium					EPA 200.7	700/ µ
dium					EPA 200.7	29/ µ
lfate					SM 4500-SO <sub>4</sub> C/D	/200 µ
alinity mg/L as CaCO <sub>3</sub>					SM 2320 B	/5 mg/L as

Parameter	Measurement Values			Number of Analyses	Analytical Method Std. Methods 19 <sup>th</sup> , 20 <sup>th</sup> edition or EPA	Detection Limit/Quarantile Level
	Minimum	Maximum	Average			
Asenic(total)					EPA 200.8	0.1/0.5
Barium (total)					EPA 200.8	0.5/2.5
Bismuth (total)					EPA 200.8	0.05/0.25
Bromine (total)					EPA 200.8	0.2/1.0
Copper (total)					EPA 200.8	0.4/2.0
Chromium (total)					EPA 200.7	12.5/50
Cadmium (total)					EPA 200.8	0.1/0.5
Manganese (total)					EPA 200.8	0.1/0.5
Mercury (total) pg/L					EPA 1631E	0.2/1.0
Molybdenum (total)					EPA 200.8	0.1/0.5
Nickel (total)					EPA 200.8	0.1/0.5
Selenium (total)					EPA 200.8	1/10
Silver (total)					EPA 200.8	0.04/0.2
Cobalt (total)					EPA 200.8	0.5/2.5

Detection level (DL) or detection limit means the minimum concentration of an analyte (substance) that can be measured and reported with a 99% confidence that the concentration is greater than zero as determined by the procedure given in 40 CFR part 136, Appendix B.

Quantitation Level (QL) also known as Minimum Level of Quantitation (ML) – The lowest level at which the entire analytical system must give a recognizable signal above the noise level. It is equivalent to the concentration of the lowest calibration standard, assuming that the lab has used all method-specified reagents, volumes, and cleanup procedures. The QL is calculated by multiplying the MDL by 3.18 and rounding the result to the number nearest to (1, 2, or 5) x 10<sup>n</sup>, where n is an integer. (64 FR 30417).

SO GIVEN AS:

the smallest detectable concentration of analyte greater than the Detection Limit (DL) where the accuracy (precision & bias) achieves the objectives of the intended purpose of the Federal Advisory Committee on Detection and Quantitation Approaches and Uses in Clean Water Act Programs Submitted to the US Environmental Protection Agency December 2007).



7. Has the effluent been analyzed for any other parameters than those identified in question C.6, or are there other pollutants that you know of or believe to be present?

☐ YES ☐ NO

If yes, specify the pollutants and their concentration if known (*attach laboratory analyses if available and label as Attachment C.6*). (*Note: Ecology may require additional testing.*)

## SECTION D. GROUNDWATER INFORMATION

Provide available data measurements or range of measurements from monitoring wells or supply wells in the area of discharge. Provide the analytical method and detection limit, if known. Provide the location of each well on the map required in E.3 below. Attach well logs when available (*label as Attachment D*). Copy this page as necessary for each well (*label as Attachment D*). Provide the latitude and longitude in decimal format.

Ecology Well Tag ID # M 1-93  
(*example AAB123*)

Well ID # \_\_\_\_\_ (*example MW-1*)

Latitude: \_\_\_\_\_

Longitude: \_\_\_\_\_

Well Elevation (to the nearest 0.01 feet) \_\_\_\_\_ Check the appropriate box; the elevation measurement is relative to: the NAVD88 standard ☐ mean sea level ☐

Parameter	Units	Range of Measurements	Number of Analyses	Analytical Method	Detection Limit
BOD (5 day)	mg/L				
COD	mg/L				
Total organic carbon	mg/L				
Dissolved Fixed Solids	mg/L				
Total dissolved solids	mg/L	166 to 416	2	SM2540 C	mg/L
pH	Standard units	6.6 to 7.2	11		
Conductivity	(micromhos/cm)	703 to 1100	11	SM 2510 B	mg/L
Alkalinity	mg/L as CaCO <sub>3</sub>				
Total hardness	mg/L	*			
Fecal coliform	organisms/100mL				
Total coliform	organisms/100mL	<2 to 280	11	SM 9223 B	MPN/100ml
Dissolved oxygen	mg/L				
Ammonia-N as N	mg/L				
Nitrate + nitrite-N, as N	mg/L	1.36 to 9.1	11	SM 4500 NO3 F	mg/l
Total kjeldahl N as N	mg/L				
Ortho-phosphate-P as P	mg/L				
Total-phosphorus-P as P	mg/L				
Total Oil & Grease	mg/L				
Total petroleum hydrocarbon	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Calcium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Chloride	<input checked="" type="checkbox"/> mg/L <input type="checkbox"/> µg/l	5.16 to 9.8	2	EPA 300.0	mg/l
Fluoride	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Magnesium	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	12.2 to 15.6	2	EPA 3005 A/610 D	ug/L
Potassium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Sodium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Sulfate	<input checked="" type="checkbox"/> mg/L <input type="checkbox"/> µg/l	16.8 to 19.4	2	EPA 300.0	mg/L
Barium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Cadmium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Chromium	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	6.32 to <9.0	2	EPA 3005 A/610 D	ug/L
Copper	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Iron	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	103 to <50	2	EPA 3005 A/610 D	ug/l
Lead	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	<0.004 to <0.007	2	EPA 3005 A/610 D	ug/L
Manganese	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	12.2 to 15.6	2	EPA 3005 A/610 D	ug/L
Mercury	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Selenium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				

Silver	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Zinc	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Depth to water level (to the nearest .01 feet)					

## SECTION E. SITE ASSESSMENT

**Note: The Department of Ecology Water Resources Section can be consulted for identifying wells within one mile of your site. The local library and local city or county planning offices may be helpful in providing the information required in this section.**

1. Give the legal description of the land treatment/application site(s) by section/township/range and latitude/longitude (approximate center of the site; NAD83/WGS84 reference datum). Indicate the owner for each site. Give the acreage of each land treatment/application site(s). Attach a copy of the contract(s) authorizing use of(s) used land for treatment/application. *(Label as attachment E.1)*

SE 1/4 SW 1/4 Section 8, Range 1W, Township, 30N. Latitude: 48° 06' 08" N Longitude: 122° 50' 05" W

2. If this is a new discharge, list all environmental control permits or approvals needed for this project; for example, SEPA review, engineering reports, hydrogeologic reports, , biosolids permits, or air emissions permits.

NA

3. Attach an original United States Geological Survey (USGS) 7.5 minute topographic map or aerial photograph that shows the POTW and the land treatment/application site(s).  
**USGS topographical maps are available from the Department of Natural Resources (360-902-1234), Metsker Maps (206-588-5222), and some local bookstores and internet sites.**  
Show the following on this map: *(Label as attachment E.3.)*
  - a. Location and name of internal and adjacent streets.
  - b. Surface water drainage systems within ¼ mile of the site.
  - c. All wells within 1 mile of the site.
  - d. Wastewater discharge points.
  - e. Land uses and zoning adjacent to the wastewater application site.
  - f. Ground water gradient.
4. Describe the soils on the site using information from local soil survey reports. **Soils information is available from your county conservation district or from information contained in the sites hydrogeologic report..**  
*(Label as attachment E.4.)*
5. Describe the local geology and hydrogeology within one mile of the site. Include any ground water quality data. **The local library, the sites hydrogeologic report, or soil conservation service may have this information.**  
*(Label as attachment E.5.)*
6. List the names and addresses of contractors or consultants who provided information, and cite sources of information by title and author.



## SECTION F. SLUDGE/BIOSOLIDS MANAGEMENT AND DISPOSAL

1. If your wastewater treatment is by lagoon:

Has the depth of the sludge been measured in the last five years?

☐ YES ☐ NO (If yes, include the measurements and a map that shows the approximate measurement sites)

Will sludge be removed from the lagoon(s) in the next five years? If so, describe the sludge, stabilization, utilization, and disposal methods. Attach extra sheets as necessary.

2. If your wastewater treatment is by methods other than lagoon:

Do you have a Sludge Management Plan? ☒ YES ☐ NO

Is the Plan approved by:

☒ Local health district? Date approved: 1994

☒ Department of Ecology? Date approved: 1994

3. Does your facility have a biosolids permit issued by Ecology? If so, please provide the permit's number and expiration date.

Biosolids Permit number BA0037052 Permit expiration Date 6/30/2024

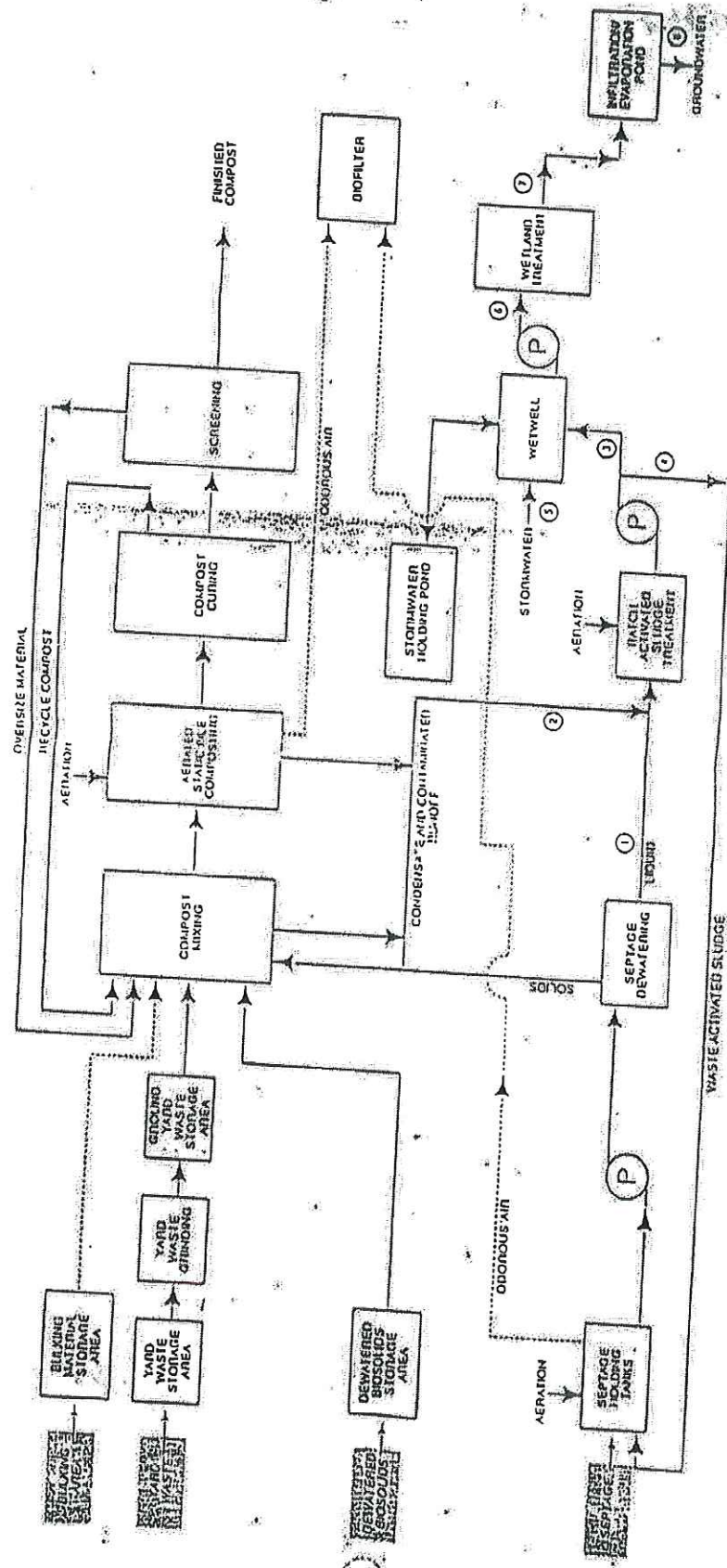
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### Summary of Attachments That May be Required for This Application:

(Please check attachments that are included)

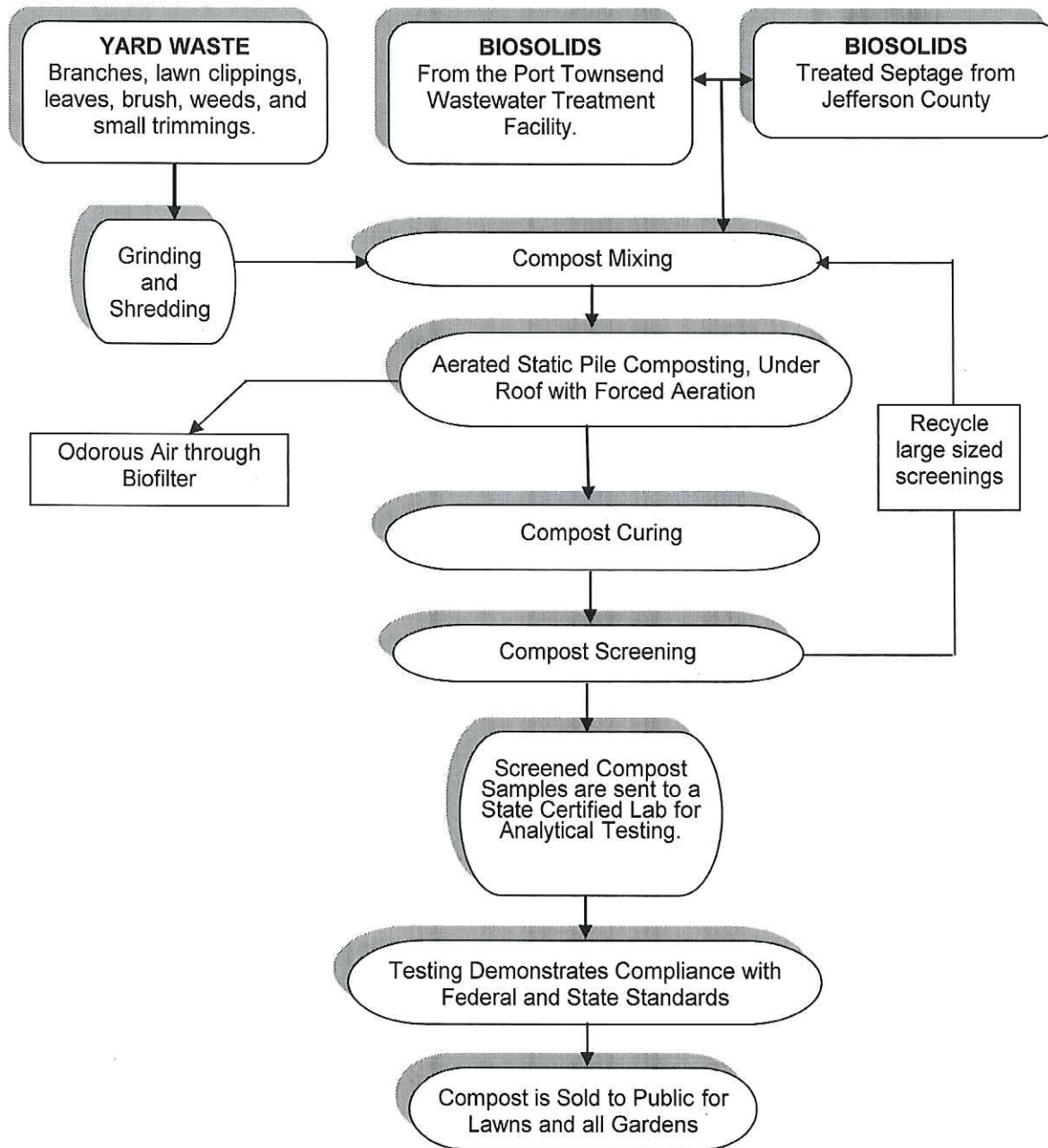
- ☒ B.5 Schematic drawing of POTW
- ☒ C.4 Flow records
- ☒ C.6 Additional effluent analysis
- ☒ D. Additional ground water data
- ☒ E.1 Copies of contracts authorizing use of land for treatment
- ☐ E.3 USGS topographic map
- ☐ E.4 Soil information
- ☐ E.5 Local geology and hydrogeology

*If you need this document in a format for the visually impaired, call the Water Quality Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.*



PROCESS FLOW DIAGRAM  
For Industrial Wastewater  
Composting Facility  
*Original*

**CITY OF PORT TOWNSEND**  
**COMPOST PROCESS FLOW CHART** *updated*





C.4

# CITY OF PORT TOWNSEND

## 2023 WWTF\COMPOST SOLIDS REPORT

### WWTF

82	65	60	67
MONTH	TOTAL VOL.	Ave. % SOLIDS	Ave. % SOLIDS
DRY LBS.	GALLONS	FEED TO BELT	AS REMOVED
JAN	457,400	1.24	12.89
FEB	415,430	0.99	12.25
MAR	558,870	0.85	13.29
APR	459,260	0.9	13.68
MAY	553,340	0.9	13.16
JUN	516,300	0.78	13.68
JUL	622,120	0.79	13.96
AUG	353,390	0.96	12.39
SEP	458,290	0.84	12.66
OCT	493,800	0.83	12.45
NOV	503,280	0.89	13.08
DEC	366,700	0.93	13.24

TOTAL DRY LBS.	431,465	TOTAL GAL.	5,758,180	ANNUAL AVE.	0.91	ANNUAL AVE.	13.06
METRIC TONS	195.68						

### COMPOST FACILITY

MONTH	DEWATERED SEPTAGE
	DRY LBS
JAN	4,248
FEB	3,173
MAR	3,532
APR	7,884
MAY	8,032
JUN	7,578
JUL	6,337
AUG	9,135
SEP	7,424
OCT	5,529
NOV	5,252
DEC	4,578

252.08

TOTAL DRY LBS.	72,702
METRIC TONS	32.97

TOTAL DRY TONS FOR 2022=	252.08
TOTAL DRY METRIC TONS FOR 2022=	228.65



## City of Port Townsend WWTP/Compost Facility Biosolids Contingency Plan

September 2022

BA0037052

WA0037052

ST6127

### **Current Disposition of Biosolids**

Biosolids and septage solids are processed through the City of Port Townsends Biosolids Composting Facility. They are composted to a class A exceptional quality and sold in bulk to residents and to commercial companies who use it or resell it themselves.

### **Current Storage of Biosolids**

Biosolids are stored in the aerobic digesters (two) at the WWTP which holds approximately 360,000 total gallons (180,000 each tank). They are stored for no more than a week usually. We dewater approximately 120,000 gallons per week on average. The septage is stored in two holding tanks at the City's Composting Facility which hold approximately 9,000 gallons each. The septage is the dewatered and the biosolids from that are composted along with the dewatered biosolids from the WWTP and ground yardwaste. The liquid is treated through the Compost Facilities SBR treatment plant. After treatment the liquid is disinfected and then discharged to ground through our infiltration basins meeting our discharge permit requirements (ST6127).

### **Notification of Non-Acceptance**

If we can not accept septage we will notify the septage haulers by phone calls and emails. If the delay in acceptance is for more than a day, we will also notify Jefferson County Health Dept. by email. The haulers will need to find other alternatives themselves.

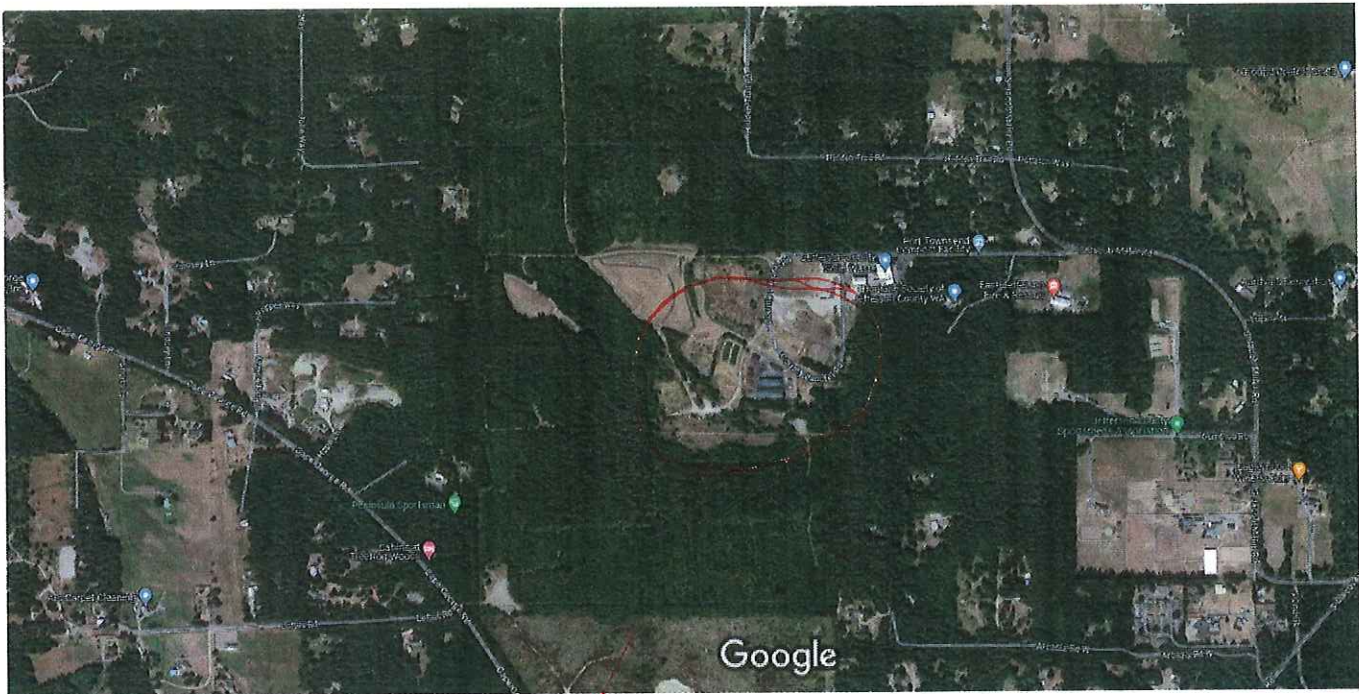
Scenarios	Contingency Option
Cannot Accept Septage due to equipment or treatment failure.	Haulers will need to haul to another facility or store it until we are up and running.
Cannot process our WWTP biosolids at the Compost Facility	We will store our biosolids at the WWTP in the processing tanks until we find another approved facility to take the materials or until we get our Compost Facility back in operation. We can hold for approximately 6 months.
Cannot dewater biosolids at WWTF	We will store biosolids in the WWTF system until we get the dewatering equipment repaired or we must bring in a portable dewatering machine.







Map showing City of Port Townsends Composting Facility at 603 County Landfill Rd.



Imagery ©2024 Airbus, CNES / Airbus, Maxar Technologies, U.S. Geological Survey, USDA/FPAC/GEO, Map data ©2024 500 ft

Compost Facility



PORT TOMLINSON  
GENERAL SITE PLAN

CITY OF PORT TOMLINSON  
COUNTY OF JEFFERSON, WASHINGTON

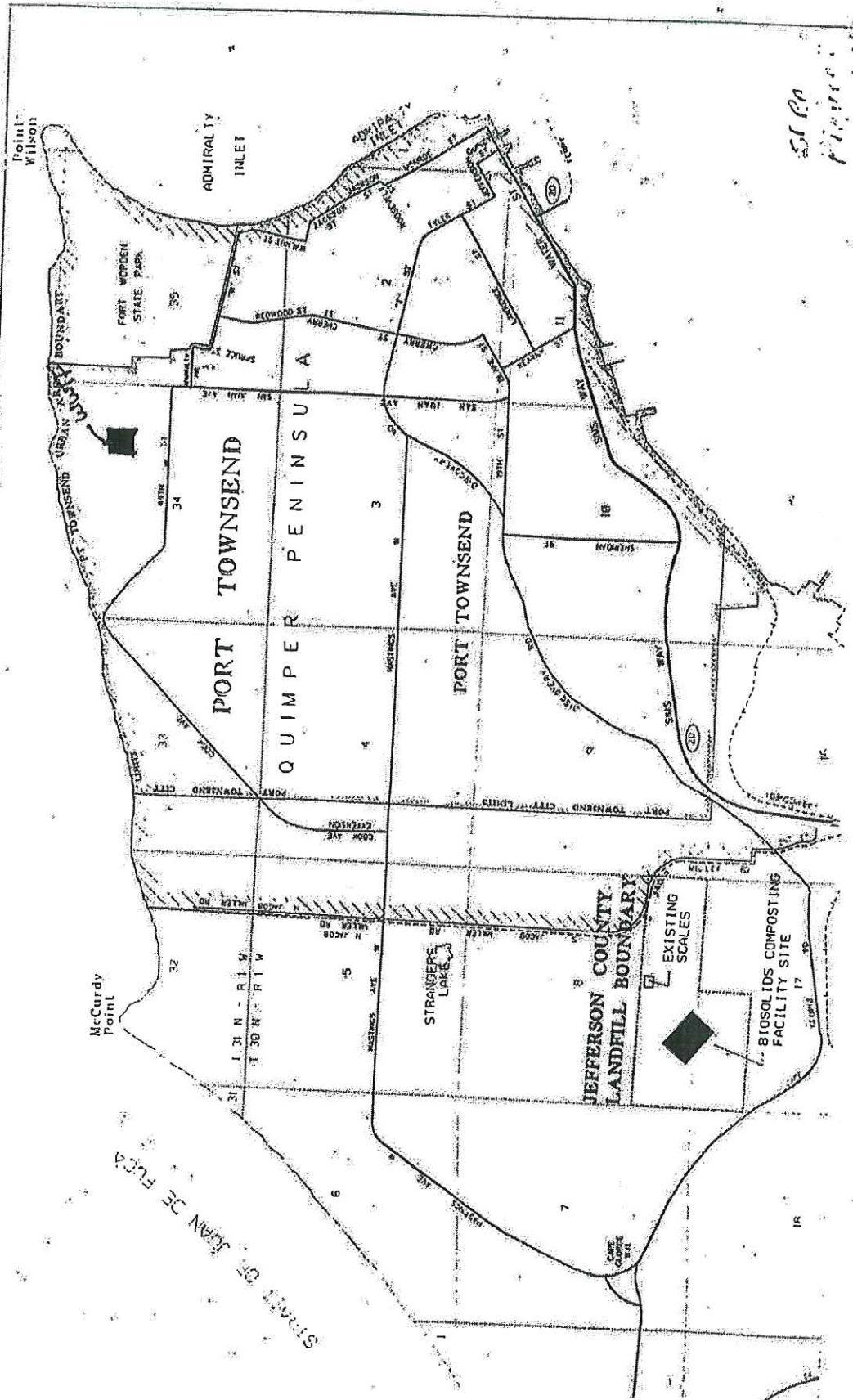
REUSE OF DOCUMENTS

LEGEND

SCALE



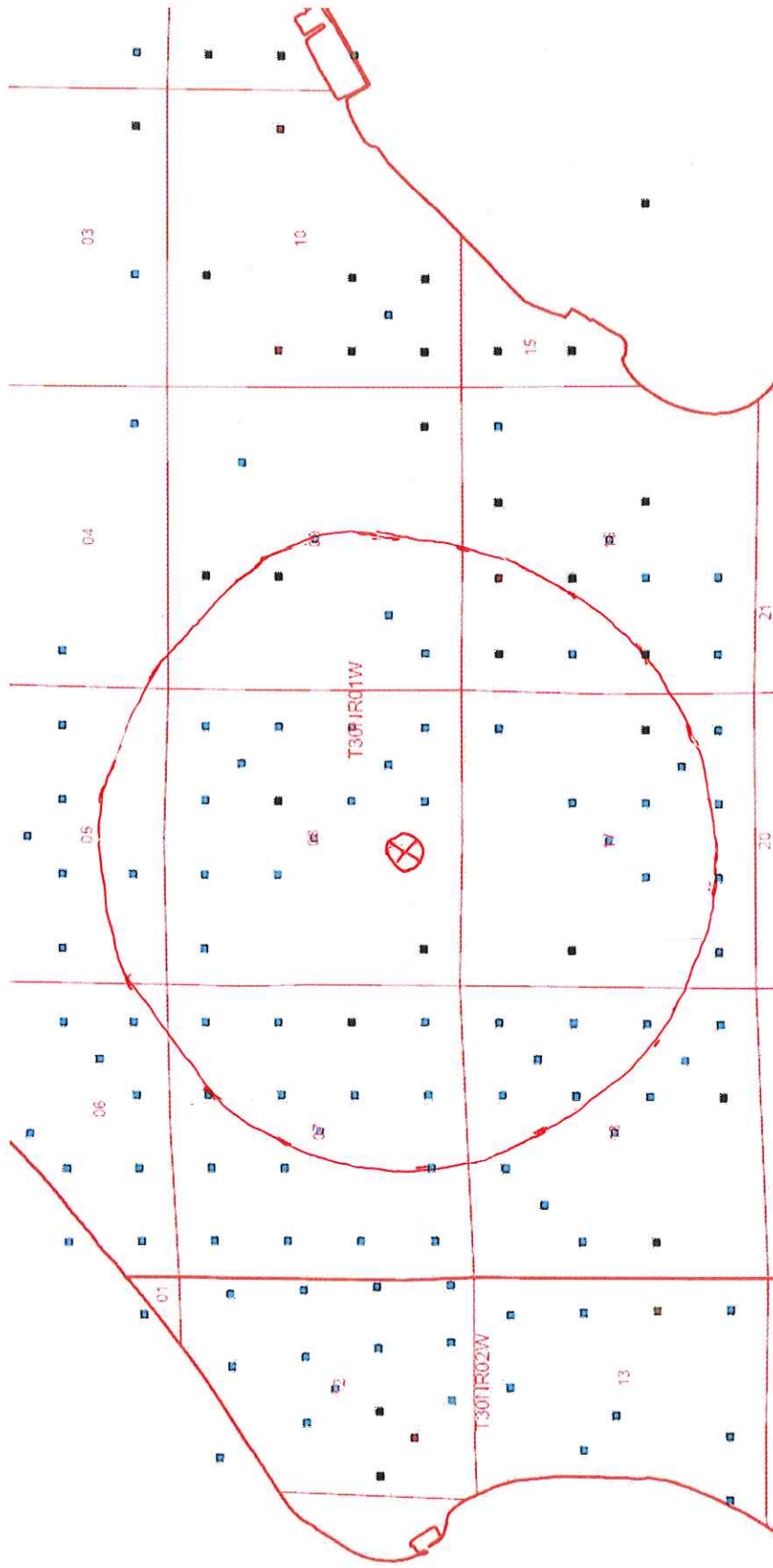
KPLAFUDLV



51 Pa  
Pioneer  
Village



Wells in a 1 mile circle around Compost facility

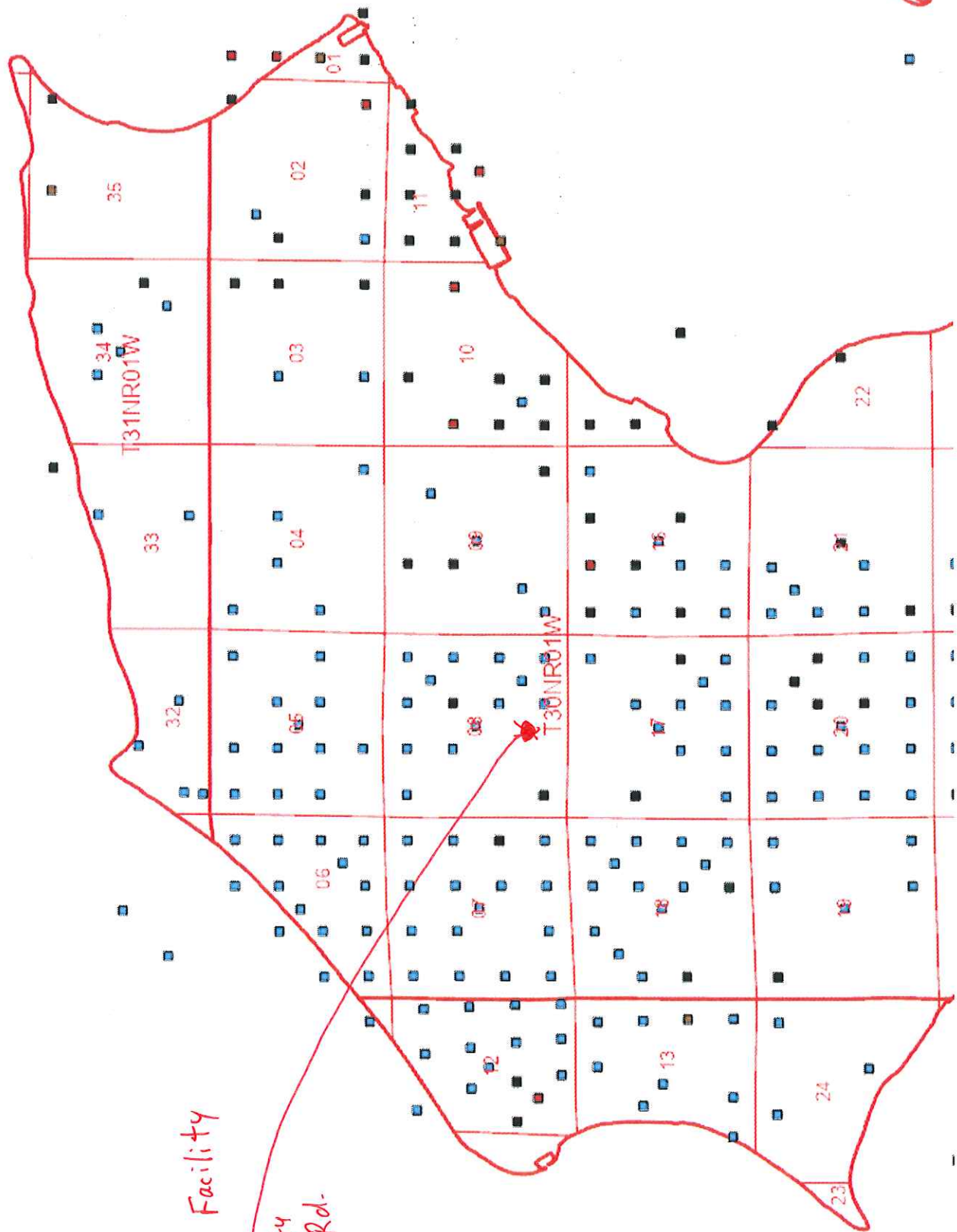


⊗ = Location of Composting facility

Scale - 1" = 36,112'

- 1 mile = 5280' x 12 = 63,360'

- 1 mile = 1.75 inches



Compost Facility

603 County  
Landfill Rd.



Google Maps 603 County Landfill Rd. City of Port Townsend Composting Facility



Imagery ©2024 Airbus, Maxar Technologies, U.S. Geological Survey, Map data ©2024 50 ft

- 1- Septage holding tanks - 2 x 10,000 gallons
- 2- 40,000 gallon SBR
- 3- Lined Holding Pond.
- 4- Lined man-made wetlands
- 5- Infiltration Basins x 2
- 6- Monitoring well 1-93

<https://www.google.com/maps/@48.1016815,-122.8350547,190m/data=!3m1!1e3?entry=ttu>



JEFFERSON COUNTY  
DEPARTMENT OF PUBLIC WORKS  
SOLID WASTE DIVISION

LANDS LICENSE for CITY OF PORT TOWNSEND BIOSOLIDS COMPOSTING FACILITY

THIS LICENSE is made by and between Jefferson County, acting through the Jefferson County Department of Public Works ("the County"), and the City of Port Townsend, acting through the City of Port Townsend Department of Public Works ("the City").

RECITALS

- A) The City desires to obtain from the County a License to conduct certain activities described below upon and at the lands commonly known as approximately 19.9 acres of the Jefferson County Solid Waste Facility or County Parcel # 001083012, and the County desires to enter into a License for the property to the City pursuant to the terms and conditions of this License.
- B) The City has used and intends to use the Licensed real property to implement and effectuate the composting of biosolids from the City's wastewater treatment plant and septage from licensed septage pump-out service providers with yard debris collected from county and city residents.
- C) The County acknowledges the importance of this operation and that the continuance of this program on behalf of its citizens and the Annual License Fee described in Section 5 below constitutes good and valuable consideration provided by the City to the County, said consideration being sufficient to support and validate this License.
- D) These recitals are material terms of this License.

THEREFORE, the parties agree as follows:

SECTION 1: PROPERTY

1.1 Property Defined. The County Licenses to the City and the City Licenses from the County the real property identified in Exhibit A: Area of Designated Use, (City to submit a legal description and site map) subject to the exceptions and restrictions set forth in this License. The property is inclusive of all property necessary for the operation of the City Biosolids Facility, including but not limited to:

- (a) Yard debris drop off
- (b) Yard debris grinding and storage
- (c) Disposal of organic residuals from yard debris grinding
- (d) Storage of finished compost product

- (e) Compost production
- (f) Compost sales
- (g) Biosolids treatment

1.2 Inspection. The County makes no representation regarding the condition of the Property, improvements located on the property, the suitability of the property for the City's permitted use, compliance with governmental laws and regulations, or availability of utility rights. The County makes no commitments to construct improvements on the property. The City has inspected the Property and accepts it "AS IS."

## SECTION 2: USE

2.1 Permitted Use. The City agrees to operate the Property as a site only for the composting of biosolids, septage and yard debris. The City further agrees that City operations for all functions of the Biosolids Facility, including those necessary for ancillary functions such as yard debris collection, storage and handling, are to be conducted within the Property.

2.2 Hours of Operation. The hours of operation for the septage Biosolids Facility will be established by the City and agreed upon by written consent of the County.

2.3 Conformance with Laws. The City shall, at all times, keep current and comply with all conditions and terms of any permits, licenses, certificates, regulations, ordinances, statutes, and other government rules and regulations regarding its use or occupancy of the Property. The County shall bear no responsibility for the securing of any permits, licenses or certificates as required for the operation of the Biosolids Facility including those necessary for ancillary functions such as yard debris collection, storage and handling.

2.4 Liens and Encumbrances. The City shall keep the Property free and clear of any liens and encumbrances arising out of or relating to its use or occupancy of the Property.

## SECTION 3: TERM

3.1 Term Defined. The term of this License is twenty (20) years (the "Term"), beginning on the 1st day of June, 2012 (the "Commencement Date") and ending on the 1st day of June, 2032 (the "Termination Date"), unless terminated sooner under the terms of this License. At any time, either party may terminate this License for its convenience by giving the other party 2 years written notice. Upon termination, there is no further liability for the City under this License, except for terms which relate to post-termination obligations, for example, 8.3. In addition SECTION 10: relating to indemnity survives termination.

3.2 Renewal of the License. The City shall have the option to renew this License once for an additional term of twenty (20) years and the City shall exercise this option by providing written notice of its election to renew at least one hundred eighty (180) calendar days prior to the Termination Date of the initial Term of this License. The City shall not be entitled to renew if it is in default under the terms of this License at the time the option to renew is exercised. The terms and conditions of any renewal term shall be the same as set forth in this License, except



that License Fee may be recalculated, the required amounts of financial security may be revised, and provisions dealing with site activity mitigation may be changed at the time of the renewal by mutual written consent.

3.3 Delay in Delivery of Possession. If The County, for any reason whatsoever, cannot deliver possession of the property to City on the Commencement Date, this License shall not be void or void-able, nor shall the County be liable to the City for any loss or damage resulting from the delay in delivery of possession. In such event, the date of delivery of possession shall be the Commencement Date for all purposes, including the payment of License Fee. In the event the City takes possession before the Commencement Date, the date of possession shall be the Commencement Date for all purposes, including the payment of License Fee. If the License Term commences earlier or later than the scheduled Commencement Date, the Termination Date shall be adjusted accordingly.

3.4 Hold Over. If the City remains in possession of the Property after the Termination Date, the occupancy shall not be an extension or renewal of the Term. The occupancy shall be on a month-to-month basis, on terms identical to the terms of this License, which may be terminated by either party on thirty (30) calendar days' written notice. The entire Annual License Fee shall be due immediately if there is a hold-over by the City of 14 days or more. If the County provides a notice to vacate the Property in anticipation of the termination of this License or at any time after the Termination Date and the City fails to do so within the time set forth in the notice, then the City shall be a trespasser, and the County may exercise all remedies at law.

#### SECTION 4: ANNUAL LICENSE FEE

4.1 Annual License Fee. Until adjusted as set forth below, the City shall pay to the County an annual License Fee of one (1) dollar. The sum of the annual License Fees owed for the full term of this License (\$20) shall be paid in advance no later than thirty (30) days after the Commencement Date.

4.2 Payment Place. Payment is to be made to Jefferson County Public Works, Attention: Solid Waste Manager, 623 Sheridan St. Port Townsend, WA 98368 and labeled "PAYMENT FOR BIOSOLIDS FACILITY LICENSE FEE"

4.3 Adjustment Based on Use. Annual License Fee is based on the City's Permitted Use of the Property, as described in Section 2 above. If the City's Permitted Use changes, the Annual License Fee shall be adjusted as appropriate for the changed use.

#### SECTION 5: CONSIDERATION

5.1 Consideration. This License is subject to the terms, covenants and conditions herein set forth in any exhibit hereto. Consideration for this License is the acceptance and processing of yard debris and septage, by residents of Jefferson County and biosolids from the Port Hadlock Sewer. The City shall have the right to determine the acceptable standards for the biosolids delivered to



the facility. The City may accept septage originating from outside Jefferson County so long as the City continues to accord priority to septage and biosolids originating from inside Jefferson County, with Jefferson County residents, inclusive of City residents, permitted to deliver up to the current design capacity.

5.2 Temporary Refusal of Septage and Biosolids. The City may, at its discretion, temporarily refuse to accept septage and biosolids at the facility under any of the following conditions:

- (a) If septage volume exceeds the septage handling capabilities of the facility
- (b) Freezing conditions that preclude the operation of dewatering facilities
- (c) Mechanical repairs, staffing or other operational issues which preclude the operation of the facility at full capacity
- (d) During periods when the facility is unable to operate within permit standards
- (e) Force Majeure

5.3 Additional consideration. Additional consideration is the acceptance of non-hazardous condensate from the County landfill flare station at no charge to the County. The County will test this liquid once per year at a minimum for pollutants prescribed by the City to confirm the non-hazardous nature of this material. The County will accept non-hazardous septage screenings and Biosolids Composting Facility trash at no charge to the City.

5.4 Other Wastes. For wastes other than domestic septage and non-hazardous County landfill flare station condensate, the City may apply special charges based on actual facility costs of treatment and capital facility needs.

## SECTION 6: FEES

6.1 County Collected Fee. The County will collect a fee from customers for yard debris dropoff. A periodic fee review by the City and County shall be conducted and the fee may be adjusted by mutual agreement by up to five (5) percent per annum per Jefferson County Code, appendix, FEE SCHEDULES or in excess of five (5) percent per annum by Ordinance. By mutual agreement, the County will receive an amount for each transaction including transactions generated by the City's curbside yard debris collection service.

Five (5) percent of the gross fees collected, net of tax, will be deposited into an account managed by the County for expenses related to educating residents and businesses about on-site yard debris management. The City and County may, by prior agreement, draw funds from this account for programs related to educating residents and businesses about on-site yard debris management. The fund level shall not exceed ten thousand (10,000) dollars in any year.

6.2 City Collected Fees and Other Charges. The City will collect a fee from septage hauler customers. A periodic fee review by the City and County shall be conducted and the fee may be

adjusted by mutual agreement by up to five (5) percent per annum or to the maximum as set by City of Port Townsend Resolution No. 10-035. The City shall determine the amount charged to customers for the purchase of materials created as part of the Biosolids Facility operation such as finished compost.

## SECTION 7: SHARED COSTS

7.1 Cost Share Formula. Where Solid Waste Facilities are used by customers of the City's Biosolids Facility, the City and County will share costs for Solid Waste Facility maintenance and capital replacement based on the percentage of use by customer group or by City or County staff or other measure of use as mutually agreed upon. Cost sharing arrangements shall be agreed upon in a Memorandum of Understanding between the City Public Works Director and the County Public Works Director. The City and County shall plan for and review Solid Waste Facility maintenance and capital replacement costs at least annually. Payments to either party may be made through an Agreement for Reimbursable Work or by other means as agreed upon by the City Public Works Director and the County Public Works Director.

7.2 Facility Improvements. The City and County agree to make Solid Waste Facility capital improvements as early as possible to the Solid Waste Facility access gate and the customer access road to the yard debris drop off area. The assignment of initial and ongoing costs associated with these improvements to the City and to the County are as attached in Exhibit B: Memorandum of Understanding for Biosolids Facility Cost Sharing.

7.3 Facility Replacement. The fee charged for yard debris drop-off and the amount of said fee allocated to the County shall continue to be set in accord with the costs associated with Scale Facility Administrative Costs, Maintenance and Facility Replacement, as mutually agreed upon.

## SECTION 8: IMPROVEMENTS

8.1 Existing Improvements. So long as this License remains in effect, the City shall retain ownership of all Existing Improvements, and all authorized improvements and trade fixtures it may place on the Property (collectively "City-Owned Improvements"). City-Owned Improvements shall not include any construction, reconstruction, alteration, or addition of any Unauthorized Improvements. No City-Owned Improvements shall be placed on the Property without the County's prior written consent, which shall not be unreasonably withheld.

8.2 Construction. Prior to any construction, alteration, replacement, removal or major repair of any improvements (whether County-Owned or City-Owned), the City shall submit to the County Public Works Director a letter of intention. If approved, the City shall then submit plans and specifications to the appropriate County permitting agency. Construction shall not commence until the County has approved those plans and specifications in writing. Upon completion of construction, the City shall promptly provide the County with as-built plans and specifications. The County's consent and approval shall not be required for any routine maintenance or repair of improvements made by the City pursuant to its obligation to maintain the Property in good order and repair that does not result in the construction, alteration, replacement, removal, or major repair of any improvements on the Property.



8.3 Removal. City-Owned Improvements shall be removed by the City by the Termination Date unless the County notifies the City that the City-Owned Improvements may remain. If the County elects for the City-Owned Improvements to remain on the Property after the Termination Date, they shall become the property of the County without payment by the County. To the extent that City-Owned Improvements include items of personal property which may be removed from the Licensed premises without harming the Property, or diminishing the value of the Property or the improvements, the County asserts no ownership interest in these improvements unless the parties agree otherwise in writing upon termination of this License. The City shall notify the County at least one hundred eighty (180) calendar days before the Termination Date if it intends to leave the City-Owned Improvements on the Property. The County shall then have ninety (90) calendar days in which to notify the City that it wishes to have the City-Owned Improvements removed or elects to have them remain. Failure to notify the City shall be deemed an election by the County that the City-Owned Improvements will remain on the Property. If the City-Owned Improvements remain on the Property after the Termination Date without the County's actual or deemed consent, they still will become the property of the County but the County may remove them and the City shall pay the costs of removal and disposal upon the County's demand.

8.4 Unauthorized Improvements. Improvements made on the Property without the County's prior consent which are not in conformance with the plans submitted to and approved by the County ("Unauthorized Improvements") shall immediately become the property of the County, unless the County elects otherwise. Regardless of ownership of Unauthorized Improvements, the County may, at its option, require the City to sever, remove, and dispose of them, charge the City License Fee for the use of them, or both. If the City fails to remove an Unauthorized Improvement upon request, the County may remove it and charge the City for the cost of removal and disposal.

8.5 Mutually Beneficial Improvements. Where improvements may be made that are to the mutual benefit of the City and County, the costs for such improvements may be shared by prior written agreement between the City Public Works Director and the Jefferson County Public Works Director. Payments to either party may be made through an Agreement for Reimbursable Work or by other means as agreed upon by the City Public Works Director and the County Public Works Director.

## SECTION 9: ASSIGNMENT AND SUBLETTING

9.1 County Consent Required. The City shall not sell, convey, mortgage, assign, pledge, sublet, or otherwise transfer or encumber all or any part of the City's interest in this License.

## SECTION 10: INDEMNITY, FINANCIAL SECURITY, INSURANCE

10.1 Indemnity. Except for liability that is subject to immunity as provided in Chapter 38.52 RCW, each party shall indemnify, defend and hold harmless the other parties, their officers, agents, employees, and volunteers from and against any and all claims, demands, damages, judgments, losses, liability and expense (including attorney's fees), including but not limited to



those for personal injury, death or property damage suffered or incurred by any person, by reason of or in the course of performing this Agreement which is or alleged to be caused by or may directly or indirectly arise out of any act or omission of the party, its officers, employees, agents and volunteers. The City shall be solely responsible under this agreement for the operation of the site for the composting of biosolids, septage and yard debris, and agrees to defend, indemnify, and to hold the County harmless from any claims directly or indirectly resulting from the operation of the site for the composting of biosolids, septage and yard debris .

Except as provided above, in the event more than one party is responsible or negligent, each party shall be responsible in proportion to its negligence.

It is understood and agreed that nothing contained in the Agreement shall be considered as in any way constituting a partnership between the County and the City.

The County shall be solely responsible under this Agreement for operation of the property that is located around the site that is subject to this License Agreement and agrees to defend, indemnify, and to hold the City harmless from any claims directly or indirectly resulting from the County's operation, including from any loss, claim, liability, damage, expense from hazardous substances, including attorney's fees, expenses of litigation and costs from appeal, even if said loss, claim, liability, damage, or expense is alleged to have resulted from the City use of the Property subject to this Agreement.

It is understood that both parties to this agreement are self insured and shall remain self insured for the duration of this license agreement.

#### SECTION 11: MAINTENANCE AND REPAIR

11.1 County Repairs. The County shall not be required to make any alterations, improvements, maintenance, replacements, or repairs in, on, or about the Property, or any part thereof, during the Term, except as provided in this Agreement (for example, Section 7) or by mutual agreement.

11.2 City Repairs, Alteration, Maintenance and Replacement.

(a) The City shall, at its sole cost and expense, keep and maintain the Property in good order and in a clean, attractive, and safe condition.

(b) Any additions, repairs, alterations, replacements or changes to the Property and to any improvements on the Property shall require the prior written approval of the County and shall be made in accordance with, and ownership shall be governed by, Section 8, above.

#### SECTION 12: DAMAGE OR DESTRUCTION

12.1 Damage or Destruction.

(a) In the event of any damage to or destruction of the Property or any improvements, the City

shall promptly give written notice to the County. Unless otherwise agreed in writing, the City shall promptly reconstruct, repair, or replace the Property and any improvements as nearly as possible to its condition immediately prior to the damage or destruction.

(b) City duty to reconstruct, repair, or replace any damage or destruction of the Property or any improvements on the Property shall not be conditioned upon the availability of any insurance proceeds to the City from which the cost of repairs may be paid.

(c) Unless this License is terminated by mutual agreement, there shall be no abatement or reduction in License Fee during such reconstruction, repair, and replacement.

(d) Any insurance proceeds payable by reason of damage or destruction shall be first used to restore the real property covered by this License, then to pay the cost of the reconstruction, then to pay the County any sums in arrears, and then to the City.

(e) In the event the City is in default under the terms of this License at the time damage or destruction occurs, the County may elect to terminate the License and the County shall then have the right to retain any and all insurance proceeds payable as a result of the damage or destruction.

(f) The City shall not be held liable for damage to the property not caused by the operation of the Biosolids Facility.

#### SECTION 13: ENTRY BY THE COUNTY

The County shall have the right to enter the Property at any time to inspect for compliance with the terms of this License or in the event of emergency and for other Solid Waste operations such as conveyance of fill materials from other areas of the property and maintenance of the perimeter fence and road.

#### SECTION 14: NOTICE

Any notices required or permitted under this License may be personally delivered, or mailed by certified mail, return receipt requested, to the following addresses or to such other places as the parties may direct in writing from time to time:

The County:  
Director  
Jefferson County Department of Public Works  
623 Sheridan St.  
Port Townsend, WA 98368

City of Port Townsend:  
Director  
City of Port Townsend Department of Public Works  
250 Madison St.  
Port Townsend, WA 98368

#### SECTION 15: MISCELLANEOUS

15.1 Authority. The City and the County person or persons executing this License on behalf of the City and the County represent that they are qualified to do business in the State of Washington, that the City has full right and authority to enter into this License, and that each and every person signing on behalf of the City is authorized to do so. Upon the County's request, the City will provide evidence satisfactory to the County confirming these representations.

15.2 Successors and Assigns. This License shall be binding upon and inure to the benefit of the parties, their successors and assigns.

15.3 Heading. The headings used in this License are for convenience only and in no way define, limit, or extend the scope of this License or the intent of any provision.

15.4 Entire Agreement. This License, including the exhibits and addenda, if any, contains the entire agreement of the parties. All prior and contemporaneous agreements, promises, representations, and the statements relating to this transaction or to the Property, if any, are merged into this License.

15.5 Waiver. The waiver by the County of any breach or default of any term, covenant, or condition of this License shall not be deemed to be a waiver of such term, covenant, or condition; of any subsequent breach or default of the same; or of any other term, covenant, or condition of this License. The County's acceptance of a License Fee payment shall not be construed to be a waiver of any preceding or existing breach other than the failure to pay the particular License Fee payment that was accepted.

15.6 Cumulative Remedies. The rights and remedies of the County under this License are cumulative and in addition to all other rights and remedies afforded to the County by law or equity or otherwise.

15.7 Language. The word "City" as used in this License shall be applicable to one or more persons, as the case may be. The singular shall include the plural, and the neuter shall include the masculine and feminine. The word "persons," whenever used, shall include individuals, firms, associations, and corporations.

15.8 Invalidity. If any provision of this License shall prove to be invalid, void, or illegal, it shall



in no way affect, impair, or invalidate any other provision of this License.

15.9 Applicable Law and Venue. This License shall be interpreted and construed in accordance with the laws of the State of Washington. Any reference to a statute shall mean that statute as presently enacted or hereafter amended or superseded.

15.10 Modification. Any modification of this License must be in writing and signed by the parties. The County shall not be bound by any oral representations or statements.

15.11 Administration of Agreement. The County hereby appoints, and the City hereby accepts the Jefferson County Director of Public Works, or his designee (the Director) as the County's representative for the purpose of administering the provisions of the agreement, to request and receive additional information from the City, to assess the general performance of the City under this agreement, to determine if contracting obligations are being performed in accordance with federal, state, or local law.

15.12 Annual Meeting of the Parties. Representatives of each party to this agreement will meet annually to review the past 12 month's operation. The City will present a summary of the past years' operation. This requirement for an annual meeting shall not prevent the parties from meeting jointly at other times to discuss and act upon matters affecting this agreement.

15.13 Access.

(a) Access to the Licensed site is provided by way of County Landfill Road, an existing asphalt surface road. No improvements to access roads are planned for or implied through the terms of this License. The County is responsible for all costs for maintenance of County Landfill Road.

(b) Customer Access to the area for yard debris drop-off is provided by way of a customer access road as indicated in Exhibit A: Area of Designated Use. The City and County shall determine the road standard and shall jointly initiate any repairs by prior written agreement. Costs for maintenance of the customer access road are shared between the City and County per Exhibit B.

15.14 Repealer. This license agreement hereby repeals and replaces, in its entirety, the document titled Interlocal Agreement Between City of Port Townsend and Jefferson County for Biosolids Composting Facility approved on October 8, 1992.

## SECTION 16: RESOLUTION OF DISPUTES

16.1 Resolution of Disputes. The City and County agree to make a good faith effort to resolve any disputes that arise from operation of the Biosolids Composting Facility.

## SECTION 17: EXHIBITS

17.1 Exhibits.

(a) Exhibit A is "Area of Designated Use"

(b) Exhibit B is "Memorandum of Understanding for Biosolids Facility Cost Sharing"

THIS AGREEMENT requires the signature of all parties and is executed as of the date of the last signature below.

IN WITNESS WHEREOF the parties have hereunto set their hands and seals the dated

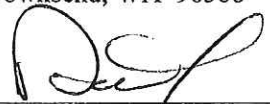
**Licensors:**

County of Jefferson, Board of Commissioners

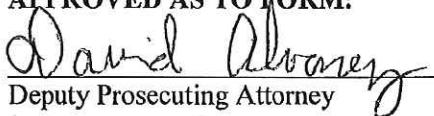
 5/21/12  
John Austin, Chair

**Licensee:**

City of Port Townsend  
250 Madison St.  
Port Townsend, WA 98368

  
David Timmons, City Manager

**APPROVED AS TO FORM:**

  
Deputy Prosecuting Attorney

Date: 3-16-12

END OF LICENSE



## EXHIBIT A: AREA OF DESIGNATED USE

### LEGAL DESCRIPTION:

A PARCEL OF LAND LYING WITHIN THE SOUTH HALF. OF THE SOUTH HALF. OF SECTION 8. TOWNSHIP 30 NORTH. RANGE 1 WEST. W.M. JEFFERSON COUNTY, WASHINGTON. MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT THE SOUTH 1/4 CORNER OF SAID SECTION 8, REPRESENTED BY A 1-3/4 INCH DIAMETER BRASS CAP WITH PUNCH MARK ON A 4"X4" CONCRETE MONUMENT:

THENCE N 87°26'08" W ALONG THE SOUTH LINE OF SAID SECTION 8, SAID LINE BEING MARKED BY A STEEL POST AND WIRE FENCE, A DISTANCE OF 1108.50 FEET:

THENCE N 02°33'52" E, A DISTANCE OF 676.00 FEET:

THENCE N 88°29'28" E, A DISTANCE OF 179.56 FEET:

THENCE N 36°49'35" E, A DISTANCE OF 74.92 FEET:

THENCE N 83°14'16" E, A DISTANCE OF 106.42 FEET:

THENCE S 59°04'46" E, A DISTANCE OF 118.84 FEET:

THENCE N 50°08'40" E, A DISTANCE OF 174.13 FEET:

THENCE N 06°48'41" E, A DISTANCE OF 158.96 FEET:

THENCE S 74°12'40" E, A DISTANCE OF 535.94 FEET:

THENCE S 00°38'18" E, A DISTANCE OF 204.61 FEET:

THENCE S 14°42'18" W, A DISTANCE OF 216.57 FEET:

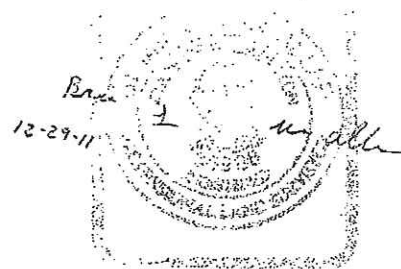
THENCE S 34°57'58" W, A DISTANCE OF 215.00 FEET:

THENCE S 29°06'21" E, A DISTANCE OF 314.08 FEET TO THE SAID SOUTH 1/4 CORNER OF SECTION 8 AND THE TRUE POINT OF BEGINNING.

CONTAINING 19.90 ACRES MORE OR LESS

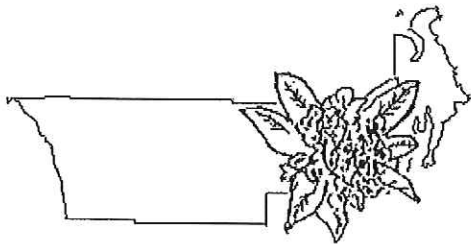
THE ABOVE DESCRIBED EASEMENT IS DEPICTED ON THE ACCOMPANYING MAP LABELED EXHIBIT B. WHICH IS ATTACHED HERewithIN AND MADE PART OF THIS LEGAL DESCRIPTION.

END OF DESCRIPTION





**EXHIBIT B: MEMORANDUM OF UNDERSTANDING FOR BIOSOLIDS FACILITY COST SHARING**



**Jefferson County  
Department of Public Works**

623 Sheridan St.  
Port Townsend, WA 98368  
(360) 385-9160

*Frank Gifford, Public Works Director  
Monte Reinders, P.E., County Engineer*

**MEMORANDUM OF UNDERSTANDING**

The purpose of this document is to formalize the cost sharing arrangement by and between Jefferson County (County) and the City of Port Townsend (City), both municipal corporations of the State of Washington, concerning those costs associated with County-owned facilities and improvements used in the operation of the City of Port Townsend Biosolid Composting Facility.

1. The City wishes to continue operation of a Biosolids Composting Facility on lands owned by the County. As a function of the Biosolids Composting Facility, the City accepts yard debris from county residents as well as septage from county residents delivered to the facility by private sector haulers; both items representing good and valuable consideration in support of this Memorandum of Understanding.
2. It is agreed that the County presently incurs, or shall incur, costs associated with the operation of the Biosolids Composting Facility. These costs include:
  - Maintenance of a customer access road to the area of yard debris off-loading
  - Capital replacement and maintenance of the Jefferson County Solid Waste Management Facility access gate located on County Landfill Road
3. It is agreed that an equitable share of the above costs shall be allocated to both parties.
4. It is agreed that costs for maintenance of the customer access road shall be allocated as a percentage of use between county and city residential self-haul customers. It is further agreed that the cost allocation for the year 2012 shall be as follows:

Party	Percentage of Costs
City	46%
County	54%

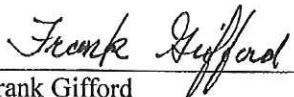
5. It is agreed that costs for capital replacement and maintenance of the Jefferson County Solid Waste Management Facility access gate shall be allocated as a percentage of use




between County and City staff and respective contractors outside of the normal operating hours of the Solid Waste Management Facility. It is further agreed that the cost allocation for the year 2012 shall be as follows:

Party	Percentage of Costs
City	47%
County	53%

6. It is agreed that the City and County shall meet annually to determine cost allocations for the above elements based on the prior year use by city/county customer or City/County function and that said allocations shall be made by mutual written agreement.
7. It is agreed that the City and County shall work jointly on the selection of a replacement access gate that meets the needs of both parties. It is further agreed that the County shall be the lead agency in contracting for the installation and on-going maintenance of the facility access gate.
8. It is agreed that the City and County shall determine the customer access road standard and shall jointly initiate any repairs by prior written agreement.
9. This Memorandum of Understanding shall be effective for the term of the Lands License Agreement to which this Memorandum of Understanding is attached and made part of or until such time as it is dissolved by mutual written agreement.

  
\_\_\_\_\_  
Frank Gifford  
Jefferson County  
Public Works Director

Date: May 23, 2012

  
\_\_\_\_\_  
Ken Clow  
City of Port Townsend  
Public Works Director

Date: 23 May 2012

# Washington Department of Ecology

## Electronic Submission Cover Letter



**WQWebDMR - Permit# ST0006127 - DMR Submission Id: 1856096 - 1/13/2023  
10:43:21 AM**

Company Name	Signer Name	System Name
City Of Port Townsend	Lawrence Morris	WQWebPortal

### Attachments:

Document Name Or Description	Document Name
Submitted Copy of Record for City Of Port Townsend	Copy of Record CityOfPortTownsend Friday January 13 2023

### Attestation Agreed to at Signing:

I certify I personally signed and submitted to the Department of Ecology an Electronic Signature Agreement. I understand that use of my electronic signature account/password to submit this information is equal to my written signature. I have read and followed all the rules of use in my Electronic Signature Agreement. I believe no one but me has had access to my password and other account information.

I further certify: I had the opportunity to review the content or meaning of the submittal before signing it; and to the best of my knowledge and belief, the information submitted is true, accurate, and complete. I intend to submit this information as part of the implementation, oversight, and enforcement of a federal environmental program. I am aware there are significant penalties for submitting false information, including possible fines and imprisonment.

For Ecology Use Only



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+QCrgxfD5Kr7Mu8p3QDMIx6NpC+qE=





Permit Number: ST0006127

Permittee: PORT TOWNSEND BIOSOLIDS FACILITY

Facility County: Jefferson

Receiving Waterbody:

Monitoring Period: 12/01/2022 - 12/31/2022

Outfall: 001 - SBR Effluent

Version: 1

Week	Monitoring Point	Total BOD5 Total Milligrams/L (mg/L) 2/Month Grab	Total BOD5 Total Lbs/Day 2/Month Calculated	Solids (Residue) Total suspended (TSS) Milligrams/L (mg/L) 2/Month Grab	Solids (Residue) Total suspended (TSS) Lbs/Day 2/Month Calculated	Flow Gallons/Day (gpd) Once per defined event Measurement	Total BOD5 Total Milligrams/L (mg/L) 2/Month Grab	Total BOD5 Total Lbs/Day 2/Month Calculated	BOD: Total, % Removal Total Percent Summary Only Calculated	Solids (Residue) Total suspended (TSS) Milligrams/L (mg/L) 2/Month Composite sample (24 hour)	Solids (Residue) Total suspended (TSS) Lbs/Day 2/Month Calculated	Solids (Residue) Total suspended (TSS) Lbs/Day 2/Month Calculated
		INF	INF	INF	INF	001	001	001	001	001	001	001
1-Th	12/1/22					C						
1-F	12/2/22					5734						
1-Sa	12/3/22					C						
2-Su	12/4/22					C						
2-M	12/5/22					5236						
2-T	12/6/22					C						
2-W	12/7/22	491	23.5	2457	117.5	4238	3.70	0.03	99.2	9.10	0.32	99.6
2-Th	12/8/22					5734						
2-F	12/9/22					4238						
2-Sa	12/10/22					C						
3-Su	12/11/22					C						
3-M	12/12/22					2742						
3-T	12/13/22					2742						
3-W	12/14/22	756	31.4	2000	83.2	5236	3.10	0.14	99.6	8.60	0.38	99.6
3-Th	12/15/22					4986						
3-F	12/16/22					C						
3-Sa	12/17/22					C						
4-Su	12/18/22					C						
4-M	12/19/22					3241						
4-T	12/20/22					C						
4-W	12/21/22					C						
4-Th	12/22/22					C						
4-F	12/23/22					C						
4-Sa	12/24/22					C						
5-Su	12/25/22					C						
5-M	12/26/22					C						
5-T	12/27/22					5984						
5-W	12/28/22					1496						
5-Th	12/29/22					5734						
5-F	12/30/22					C						
5-Sa	12/31/22					C						
Minimum												
Average		624	27.4	2229	100.3	1850	3.4	0.09	99.4	8.9	0.35	99.6
		Report Only	Report Only	Report Only	Report Only	DL: 4000	<= 30	<= 1	>= 85	<= 30	<= 1	>= 85
Weekly Average							3.7	0.15		9.1	0.38	
							<= 45	<= 1.5		<= 45	<= 1.5	
Maximum		756	31.4	2457	117.5	5984						
		Report Only	Report Only	Report Only	Report Only	<= 6200 (RO)						

Reporting Codes Used: B - Below Detection Limit/No Detection, C - No Discharge



Week	Monitoring Point	pH Standard Units 2/10/01 Grab
		001
1-Th	12/1/22	
1-F	12/2/22	
1-Sa	12/3/22	
2-Su	12/4/22	
2-M	12/5/22	
2-T	12/6/22	
2-W	12/7/22	7.6
2-Th	12/8/22	
2-F	12/9/22	
2-Sa	12/10/22	
3-Su	12/11/22	
3-M	12/12/22	
3-T	12/13/22	
3-W	12/14/22	7.6
3-Th	12/15/22	
3-F	12/16/22	
3-Sa	12/17/22	
4-Su	12/18/22	
4-M	12/19/22	
4-T	12/20/22	
4-W	12/21/22	
4-Th	12/22/22	
4-F	12/23/22	
4-Sa	12/24/22	
5-Su	12/25/22	
5-M	12/26/22	
5-T	12/27/22	
5-W	12/28/22	
5-Th	12/29/22	
5-F	12/30/22	
5-Sa	12/31/22	
Minimum		7.6
		>= 6.0 (RO)
Average		
Weekly Average		
Maximum		7.6
		<= 9.0 (RO)



Permit Number: ST0006127

Permittee: PORT TOWNSEND BIOSOLIDS FACILITY

Facility County: Jefferson

Receiving Waterbody:

Monitoring Period: 12/01/2022 - 12/31/2022

Outfall: WET - Wetland

Version: 1

Week	Monitoring Point	Total Residual Chlorine Total residual Bilirubins/L (mg/L) 2/10/22 Grab	Fecal Coliform #/100ml 2/10/22 Grab	Nitrate Total Bilirubins/L (mg/L) 2/10/22 Grab	pH Standard Units 2/10/22 Grab
		INFW	INFW	EFFW	EFFW
1-Th	12/1/22				
1-F	12/2/22				
1-Sa	12/3/22				
2-Su	12/4/22				
2-M	12/5/22				
2-T	12/6/22				
2-W	12/7/22	0.16	2000	0.15	6.3
2-Th	12/8/22	0.24	<1		
2-F	12/9/22	0.52	<1		
2-Sa	12/10/22				
3-Su	12/11/22				
3-M	12/12/22				
3-T	12/13/22				
3-W	12/14/22	0.29	<1	0.24	6.3
3-Th	12/15/22				
3-F	12/16/22				
3-Sa	12/17/22				
4-Su	12/18/22				
4-M	12/19/22				
4-T	12/20/22				
4-W	12/21/22				
4-Th	12/22/22				
4-F	12/23/22				
4-Sa	12/24/22				
5-Su	12/25/22				
5-M	12/26/22				
5-T	12/27/22				
5-W	12/28/22				
5-Th	12/29/22				
5-F	12/30/22				
5-Sa	12/31/22				
Minimum					6.3
					>= 6.0 (RO)
Average		0.30			
		<= 0.5			
Average Monthly				0.20	
				<= 10	
Weekly Average		0.52			
		<= 0.75			
Maximum					6.3
					<= 9.0 (RO)
Monthly geometric mean			7		
			<= 200		
Weekly Geometric Mean			13		
			<= 400		

Reporting Codes Used: B - Below Detection Limit/No Detection, C - No Discharge





*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 persons directly responsible for gathering 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 fine and imprisonment for knowing violations.*

Lawrence Bliss Morris

1/13/2023 10:43:19 AM

Signature

Date

# Washington Department of Ecology

## Electronic Submission Cover Letter



**WQWebDMR - Permit# ST0006127 - DMR Submission Id: 1856094 - 1/13/2023  
10:43:14 AM**

Company Name	Signer Name	System Name
City Of Port Townsend	Lawrence Morris	WQWebPortal

### Attachments:

Document Name Or Description	Document Name
Submitted Copy of Record for City Of Port Townsend	Copy of Record CityOfPortTownsend Friday January 13 2023

### Attestation Agreed to at Signing:

I certify I personally signed and submitted to the Department of Ecology an Electronic Signature Agreement. I understand that use of my electronic signature account/password to submit this information is equal to my written signature. I have read and followed all the rules of use in my Electronic Signature Agreement. I believe no one but me has had access to my password and other account information.

I further certify: I had the opportunity to review the content or meaning of the submittal before signing it; and to the best of my knowledge and belief, the information submitted is true, accurate, and complete. I intend to submit this information as part of the implementation, oversight, and enforcement of a federal environmental program. I am aware there are significant penalties for submitting false information, including possible fines and imprisonment.

For Ecology Use Only



GXfKYnpmCSZrHnusYSSn4Cji2ZWIRMmjeWREEpmh3TywsMNIaTU3MQjvVgOvyDyNJYJXdSuIbM5TQLvZv9wl21nSjLh  
IkAAjLlFLPMvdFc=



Permit Number: ST0006127

Permittee: PORT TOWNSEND BIOSOLIDS FACILITY

Facility County: Jefferson

Receiving Waterbody:

Monitoring Period: 01/01/2022 - 12/31/2022

Outfall: 001 - SBR Effluent

Version: 1

Week	Monitoring Point	Chloride Total Milligrams/L (mg/L) Annual Grab	Sulfate Total Milligrams/L (mg/L) Annual Grab	Solids (Residue) Total Dissolved Solids (TDS) Milligrams/L (mg/L) Annual Grab	Iron Total Milligrams/L (mg/L) Annual Grab	Manganese Total Milligrams/L (mg/L) Annual Grab	Lead Total Milligrams/L (mg/L) Annual Grab	Chromium Total Milligrams/L (mg/L) Annual Grab	Arsenic Total Milligrams/L (mg/L) Annual Grab
24-W	6/8/22	20.3	31.4	688	<0*	0.0029	0.0004	0.0009	0.0045
Average		20.3	31.4	688	<0*	0.0029	0.0004	0.0009	0.0045
		Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only	Report Only

Reporting Codes Used: B - Below Detection Limit/No Detection

## Outfall: 001 - SBR Effluent

Monitoring Point	Parameter	Sample Date/ Statistical Base	Value	Notes/Comment
M193	Iron Total Milligrams/L (mg/L)	Average	B <0	The report from the lab has this as N/D.
M193	Iron Total Milligrams/L (mg/L)	6/8/2022	B <0	The report from the lab has this as N/D.

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 persons directly responsible for gathering 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 fine and imprisonment for knowing violations.

Lawrence Bliss Morris

1/13/2023 10:43:13 AM

Signature

Date



# Washington Department of Ecology

## Electronic Submission Cover Letter



**WQWebDMR - Permit# ST0006127 - DMR Submission Id: 1856095 - 1/13/2023  
10:43:17 AM**

Company Name	Signer Name	System Name
City Of Port Townsend	Lawrence Morris	WQWebPortal

### Attachments:

Document Name Or Description	Document Name
Submitted Copy of Record for City Of Port Townsend	Copy of Record CityOfPortTownsend Friday January 13 2023

### Attestation Agreed to at Signing:

I certify I personally signed and submitted to the Department of Ecology an Electronic Signature Agreement. I understand that use of my electronic signature account/password to submit this information is equal to my written signature. I have read and followed all the rules of use in my Electronic Signature Agreement. I believe no one but me has had access to my password and other account information.

I further certify: I had the opportunity to review the content or meaning of the submittal before signing it; and to the best of my knowledge and belief, the information submitted is true, accurate, and complete. I intend to submit this information as part of the implementation, oversight, and enforcement of a federal environmental program. I am aware there are significant penalties for submitting false information, including possible fines and imprisonment.

For Ecology Use Only



ITf2RIq0pg3RAqUxrqy2sfdxIqYZBoSawVIQRpUqsBXqHMHXU8zgqCzM5Q8Di8j7bxunAvI4f23TZOWLpPxIKMC6GC7IOO  
N65veWOPvnLBg=



Permit Number: ST0006127

Permittee: PORT TOWNSEND BIOSOLIDS FACILITY

Facility County: Jefferson

Receiving Waterbody:

Monitoring Period: 10/01/2022 - 12/31/2022

Outfall: 001 - SBR Effluent

Version: 1

Week	Monitoring Point	Depth to GW (0.01ft)	pH	Conductivity (Specific Conductance)	Total Coliforms	Temperature	Nitrate
		Feet Quarterly Grab	Standard Units Quarterly Grab	Microhm/cm Quarterly Grab	/100ml Quarterly Grab	Measured Degrees C Quarterly Grab	Total Milligrams/L (mg/L) Quarterly Grab
		M193	M193	M193	M193	M193	M193
11-T	12/6/22	123.7	6.6			9.6	
11-W	12/7/22			1070	4.1		9.1
Minimum			6.6				
			Report Only				
Average		123.7		1070	4.1	9.6	9.1
		Report Only		Report Only	Report Only	Report Only	Report Only
Maximum			6.6				
			Report Only				

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 persons directly responsible for gathering 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 fine and imprisonment for knowing violations.

Lawrence Bliss Morris

1/13/2023 10:43:16 AM

Signature

Date



# Application for a State Waste Discharge Permit to Discharge Domestic Wastewater to Ground Water by Land Treatment or Application

This application is for a state waste discharge permit as required by Chapter 90.48 RCW and Chapter 173-216 WAC. Permit applications provide Ecology with information on pollutants in the waste stream, materials that may enter the waste stream, the flow characteristics of the discharge, and site characteristics at the point of discharge.

Ecology may request additional information to clarify the conditions of this discharge. The applicant should reference information previously submitted to Ecology that applies to this application in the appropriate section.

## SECTION A. GENERAL INFORMATION

1. Applicant Name: City of Port Townsend
2. Facility Name:  
(if different from applicant)
3. Applicant Address: 250 Madison  
Street  
Port Townsend 98368  
City/State Zip
4. Facility Location Address: 603 County Landfill Rd  
(if different from above) Street  
Port Townsend 9836834  
City/State Zip
5. Latitude/longitude of the processing facility as decimal degrees (NAD83/WGS84):  
48.0989 / 122.8340
6. Latitude/longitude of sprayfield/infiltration site discharge location (approximate center) as decimal degrees (NAD83/WGS84):  
48.0989 / 122.8340
7. Person to contact who is familiar with the information contained in this application:

Bliss Morris  
Name

Operations Manager  
Title

360-301-1485  
Telephone Number

Fax Number

bmorris@cityofpt.us  
Email

### FOR ECOLOGY USE ONLY

#### Check One

New/Renewal ☐ Modification ☐

Date Application Received \_\_\_\_\_

Application/Permit No. \_\_\_\_\_

Date Application Accepted \_\_\_\_\_

Date Fee Paid \_\_\_\_\_



8. Check One:

☒ **Permit Renewal** (including renewal of temporary permits)

Does this application request a greater amount of wastewater discharge, a greater amount of pollutant discharge, or a discharge of different pollutants than specified in the last permit application for this facility? ☐ YES ☒ NO

For permit renewals, the current permit is an attachment, by reference, to this application.

☐ **Permit Modification**

☐ **Existing Unpermitted Discharge**

☐ **Proposed Discharge**

Anticipated date of discharge:

*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 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 a fine and/or imprisonment for knowing violations.*

\_\_\_\_\_  
Signature\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

Bliss Morris

Printed Name

\*Applications must be signed by either a principal executive officer or a ranking elected official. If these titles do not apply to your organization, the person who makes budget decisions for this facility must sign the application. For state facilities, this is typically a program manager.

The application signatory may delegate signature authority for submittals required by the permit, such as monthly reports, to a suitable employee. You can delegate this authority to a qualified individual or to a position, which you expect to fill with a qualified individual. If you wish to delegate signature authority, please complete the following:

\_\_\_\_\_  
Signature of delegated employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title or function at the facility

\_\_\_\_\_  
Printed name

## SECTION B. TREATMENT PLANT INFORMATION

1. Identify all industries, commercial facilities or communities discharging to this publicly owned treatment works (POTW) by name, type of industry, address, telephone number and contact name. Attach extra sheet(s) if needed and label as attachment B1.

	INDUSTRY #1	INDUSTRY #2
NAME:	Goodman Sanitation	Enviro Check LLC
INDUSTRY:	Septic Pumper	Septic Pumper
ADDRESS:	2495 Cape George Rd Port Townsend	1612 Hastings Ave. Port townsend
TELEPHONE:	360-385-7155	360-379-9400
CONTACT NAME:	Amanda Grace	Dale Wurtsmith
INDUSTRIAL PRODUCT(S):		

2. POTW design and operation manuals available for this treatment facility:

Type of Manual	Date	Is there a copy at the POTW?
<input checked="" type="checkbox"/> Engineering Report		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<input checked="" type="checkbox"/> Operation and Maintenance Manual		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Crop Management Plan		<input type="checkbox"/> YES <input type="checkbox"/> NO
<input type="checkbox"/> Sprayfield Management Plan		<input type="checkbox"/> YES <input type="checkbox"/> NO

3. POTW Design Data:

a. Average Influent Flow for Maximum Month (MGD):	0.0021
b. Influent BOD Load (lbs/day):	3
c. Influent SS Load (lbs/day):	7
d. Began Operation (year):	1993
e. Last Major Upgrade (year):	1993
f. Planned Upgrades (year):	NA
g. Design Population:	NA
h. Actual Population:	NA
i. Sprayfield loading - attach copy of the irrigation schedule if schedule if available	NA

4. Are there plans to modify this facility within the next five years? If so, briefly describe what and when.

We are planning on replacing our 2 10,000 gallon steel holding tanks with one bigger concrete tank. We are planning on starting design for that in 2024 and planning construction in '25 or '26 as funding becomes available.

5. Attach a simple schematic drawing of the POTW. (*Label as attachment B.5. Attachments should be 11 x 17" or smaller*). The schematic should show all treatment processes (from B.6 below), flow direction and flow quantities in million gallons per day (MGD) or gallons per day (GPD).
6. Identify the type and number of unit processes at this facility.

Treatment	Unit Process	Number of Units
Lift stations	In collection system	
	At head of plant	1
Preliminary treatment	Manually operated bar screens	1
	Mechanically operated bar screens	
	Grit removal	1
	Pre-aeration	1
	Comminutors/grinders	
	Other ( <i>specify</i> )	
Primary Treatment	Primary Sedimentation Tank/Clarifiers	
	Septic tanks	
	Other ( <i>specify</i> ) RDT Dewatering unit	1
Secondary Treatment	Oxidation Ditch	
	Package Plant - Activated Sludge	1
	Package Plant - Physical/Chemical	
	Aerated Lagoon	
	Non-aerated Lagoon/Facultative Lagoon	
	Rotating Biological Contact	
	Secondary Clarifiers	
	Trickling Filter	
	Polishing Ponds	
	Other ( <i>specify</i> ) SBR process	1
Additional Treatment	Coagulation	
	Filtration	
	Storage (Lined Lagoon)	1
	Storage (Unlined Lagoon)	
	Other ( <i>specify</i> )	
Land Treatment or Application	Drainfield	
	Rapid Infiltration/Infiltration Lagoon	2
	Constructed Wetland	2
	Sprinkler Irrigation	
	Flood Irrigation	
	Ridge and Furrow Irrigation	
	Subsurface Irrigation	
	Other ( <i>specify</i> )	
Disinfection	Chlorination	1
	Ultraviolet	
	Other	



## SECTION C. WASTEWATER INFORMATION

1. The average influent flow to the plant for the maximum month for at least the last 12 months: 3208 gallons/day
2. The maximum daily flow applied to the land treatment/application site for the last 12 months: 5984 gallons/day inches/acre/month
3. Describe how the influent and effluent flow are measured? Manual measurement
4. Attach flow records for at least the last 12 months. (*Label as attachment C.4.*)
5. Describe the collection method for the samples analyzed below (*i.e.*, grab, 24-hour composite). Applicants must collect grab samples (not composites) for analysis of pH, temperature, cyanide, total phenols, residual chlorine, oil and grease, fecal coliform (including *E. coli*), and Enterococci (previously known as fecal streptococcus at § 122.26 (d)(2)(iii)(A)(3)), or volatile organics.

### Grab

6. Provide measurement values or range of measurements for treated wastewater prior to land treatment/application for the parameters with an “X” in the left column of the table below. If you obtain the application from the Internet, contact Ecology’s regional office to see if testing for a subset of these parameters is permissible. All analyses (except pH) must be conducted by a laboratory registered or accredited by Ecology (WAC 173-216-125). If this is an application for permit renewal, provide data for the last year for parameters that are routinely measured. For parameters measured only for this application, place the values under “Maximum.” Report the values with units as specified in the parameter name or in the detection level.

The Permittee must use the specified analytical methods, detection limits (DLs) and quantitation levels (QLs) in the following table unless Ecology approves an alternate method **or the method used produces measurable results in the sample and EPA has listed it as an EPA approved method in 40 CFR Part 136. If the Permittee uses an alternative method as allowed above, it must report the test method, DL, and QL on the discharge monitoring report or in the required report.**

X	Parameter	Measurement Values			Number of Analyses	Analytical Method Std. Methods 19 <sup>th</sup> , 20 <sup>th</sup> edition or EPA	Detection Limit/Quantitation Level
		Minimum	Maximum	Average			
	BOD (5 day)	1.7	7.5	3	34	SM 5210 B	/2 mg/l
	COD					SM 5220 D	/10 mg/l
	Total suspended solids	3.2	24.05	7	34	SM 2540 D	/5 mg/l
	Total dissolved solids	166	416	291	2	SM 2540 C	
	Conductivity (micromhos/cm)	703	1100	948	11	SM 2510 B	
	Ammonia-N as N					SM 4500-NH <sub>3</sub> C	/0.3 mg/L
	pH	7.3	7.8	7.5	34	SM 4500-H	0.1 standard units
	Total Residual Chlorine	0.15	0.5	0.36	34	SM4500-Cl G	50/ µg/L L
	Fecal coliform (organisms/100 mL)	<1E	13	<1E	34	SM 9221 E or 9222 D	
	Total coliform (organisms/100 mL)					SM 9221 B or 9222 B	
	Dissolved oxygen					SM 4500-O C/G	
	Nitrate + nitrite-N as N					SM 4500-NO <sub>3</sub> E	100 µg/L
	Total kjeldahl N as N					SM 4500-N <sub>org</sub> C/E/FG	300 µg/l
	Ortho-phosphate-P as P					SM 4500-P E/F	10 µg/l
	Total-phosphorous-P as P					SM 4500-P E/P/F	10 µg/l
	Total Oil & grease					EPA 1664A	1.4/5 mg/l
	NWTPH - Dx					Ecology NWTPH Dx	250/250 µg/l
	NWTPH - Gx					Ecology NWTPH Gx	250/250 µg/l
	Calcium					EPA 200.7	10 µg/l
	Chloride					SM 4500-Cl C	0.15 µg/l
	Fluoride					SM 4500-F E	.025/0.1 mg/l
	Magnesium					EPA 200.7	10/50 µg/l
	Potassium					EPA 200.7	700/ µg/l
	Sodium					EPA 200.7	29/ µg/l
	Sulfate					SM 4500-SO <sub>4</sub> C/D	/200 µg/l
	Alkalinity mg/L as CaCO <sub>3</sub>					SM 2320 B	/5 mg/L as CaCO <sub>3</sub>

X	Parameter	Measurement Values			Number of Analyses	Analytical Method Std. Methods 19 <sup>th</sup> , 20 <sup>th</sup> edition or EPA	Detection Limit/Quantitation Level
		Minimum	Maximum	Average			
	Arsenic(total)					EPA 200.8	0.1/0.5 µg/l
	Barium (total)					EPA 200.8	0.5/2 µg/l
	Cadmium (total)					EPA 200.8	.05/.25 µg/l
	Chromium (total)					EPA 200.8	0.2/1 µg/l
	Copper (total)					EPA 200.8	0.4/2 µg/l
	Iron (total)					EPA 200.7	12.5/50 µg/l
	Lead (total)					EPA 200.8	0.1/0.5 µg/l
	Manganese (total)					EPA 200.8	0.1/0.5 µg/l
	Mercury (total) pg/L					EPA 1631E	0.2/.5 pg/l
	Molybdenum(total)					EPA 200.8	0.1/0.5 µg/l
	Nickel(total)					EPA 200.8	0.1/0.5 µg/l
	Selenium (total)					EPA 200.8	1/1 µg/l
	Silver (total)					EPA 200.8	.04/.2 µg/l
	Zinc (total)					EPA 200.8	0.5/2.5 µg/l

Detection level (DL) or detection limit means the minimum concentration of an analyte (substance) that can be measured and reported with a 99% confidence that the analyte concentration is greater than zero as determined by the procedure given in 40 CFR part 136, Appendix B.

Quantitation Level (QL) also known as Minimum Level of Quantitation (ML) – The lowest level at which the entire analytical system must give a recognizable signal and acceptable calibration point for the analyte. It is equivalent to the concentration of the lowest calibration standard, assuming that the lab has used all method-specified sample weights, volumes, and cleanup procedures. The QL is calculated by multiplying the MDL by 3.18 and rounding the result to the number nearest to  $(1, 2, \text{ or } 5) \times 10^n$ , where n is an integer. (64 FR 30417).

ALSO GIVEN AS:

The smallest detectable concentration of analyte greater than the Detection Limit (DL) where the accuracy (precision & bias) achieves the objectives of the intended purpose. (Report of the Federal Advisory Committee on Detection and Quantitation Approaches and Uses in Clean Water Act Programs Submitted to the US Environmental Protection Agency December 2007).



7. Has the effluent been analyzed for any other parameters than those identified in question C.6, or are there other pollutants that you know of or believe to be present?  
☐ YES ☒ NO

If yes, specify the pollutants and their concentration if known (*attach laboratory analyses if available and label as Attachment C.6*). (*Note: Ecology may require additional testing.*)

## SECTION D. GROUNDWATER INFORMATION

Provide available data measurements or range of measurements from monitoring wells or supply wells in the area of discharge. Provide the analytical method and detection limit, if known. Provide the location of each well on the map required in E.3 below. Attach well logs when available (*label as Attachment D*). Copy this page as necessary for each well (*label as Attachment D*). Provide the latitude and longitude in decimal format.

Ecology Well Tag ID # M 1-93  
(*example AAB123*)

Well ID # \_\_\_\_\_ (*example MW-1*)

Latitude: \_\_\_\_\_

Longitude: \_\_\_\_\_

Well Elevation (to the nearest 0.01 feet) \_\_\_\_\_ Check the appropriate box; the elevation measurement is relative to: the NAVD88 standard ☐ mean sea level ☐

Parameter	Units	Range of Measurements	Number of Analyses	Analytical Method	Detection Limit
BOD (5 day)	mg/L				
COD	mg/L				
Total organic carbon	mg/L				
Dissolved Fixed Solids	mg/L				
Total dissolved solids	mg/L	166 to 416	2	SM2540 C	mg/L
pH	Standard units	6.6 to 7.2	11		
Conductivity	(micromhos/cm)	703 to 1100	11	SM 2510 B	mg/L
Alkalinity	mg/L as CaCO <sub>3</sub>				
Total hardness	mg/L				
Fecal coliform	organisms/100mL				
Total coliform	organisms/100mL	<2 to 280	11	SM 9223 B	MPN/100ml
Dissolved oxygen	mg/L				
Ammonia-N as N	mg/L				
Nitrate + nitrite-N, as N	mg/L	1.36 to 9.1	11	SM 4500 NO3 F	mg/l
Total kjeldahl N as N	mg/L				
Ortho-phosphate-P as P	mg/L				
Total-phosphorus-P as P	mg/L				
Total Oil & Grease	mg/L				
Total petroleum hydrocarbon	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Calcium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Chloride	<input checked="" type="checkbox"/> mg/L <input type="checkbox"/> µg/l	5.16 to 9.8	2	EPA 300.0	mg/l
Fluoride	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Magnesium	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	12.2 to 15.6	2	EPA 3005 A/610 D	ug/L
Potassium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Sodium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Sulfate	<input checked="" type="checkbox"/> mg/L <input type="checkbox"/> µg/l	16.8 to 19.4	2	EPA 300.0	mg/L
Barium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Cadmium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Chromium	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	6.32 to <9.0	2	EPA 3005 A/610 D	ug/L
Copper	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Iron	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	103 to <50	2	EPA 3005 A/610 D	ug/l
Lead	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	<0.004 to <0.007	2	EPA 3005 A/610 D	ug/L
Manganese	<input type="checkbox"/> mg/L <input checked="" type="checkbox"/> µg/l	12.2 to 15.6	2	EPA 3005 A/610 D	ug/L
Mercury	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Selenium	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				

Silver	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Zinc	<input type="checkbox"/> mg/L <input type="checkbox"/> µg/l				
Depth to water level (to the nearest .01 feet)					

## SECTION E. SITE ASSESSMENT

**Note: The Department of Ecology Water Resources Section can be consulted for identifying wells within one mile of your site. The local library and local city or county planning offices may be helpful in providing the information required in this section.**

1. Give the legal description of the land treatment/application site(s) by section/township/range and latitude/longitude (approximate center of the site; NAD83/WGS84 reference datum). Indicate the owner for each site. Give the acreage of each land treatment/application site(s). Attach a copy of the contract(s) authorizing use of(s) used land for treatment/application. *(Label as attachment E.1)*

SE 1/4 SW 1/4 Section 8, Range 1W, Township, 30N. Latitude: 48° 06' 08" N Longitude: 122° 50' 05" W

2. If this is a new discharge, list all environmental control permits or approvals needed for this project; for example, SEPA review, engineering reports, hydrogeologic reports, , biosolids permits, or air emissions permits.

NA

3. Attach an original United States Geological Survey (USGS) 7.5 minute topographic map or aerial photograph that shows the POTW and the land treatment/application site(s).  
**USGS topographical maps are available from the Department of Natural Resources (360-902-1234), Metsker Maps (206-588-5222), and some local bookstores and internet sites.**  
Show the following on this map: *(Label as attachment E.3.)*
  - a. Location and name of internal and adjacent streets.
  - b. Surface water drainage systems within ¼ mile of the site.
  - c. All wells within 1 mile of the site.
  - d. Wastewater discharge points.
  - e. Land uses and zoning adjacent to the wastewater application site.
  - f. Ground water gradient.
4. Describe the soils on the site using information from local soil survey reports. **Soils information is available from your county conservation district or from information contained in the sites hydrogeologic report..**  
*(Label as attachment E.4.)*
5. Describe the local geology and hydrogeology within one mile of the site. Include any ground water quality data. **The local library, the sites hydrogeologic report, or soil conservation service may have this information.**  
*(Label as attachment E.5.)*
6. List the names and addresses of contractors or consultants who provided information, and cite sources of information by title and author.



## SECTION F. SLUDGE/BIOSOLIDS MANAGEMENT AND DISPOSAL

1. If your wastewater treatment is by lagoon:

Has the depth of the sludge been measured in the last five years?

☐ YES ☐ NO (If yes, include the measurements and a map that shows the approximate measurement sites)

Will sludge be removed from the lagoon(s) in the next five years? If so, describe the sludge, stabilization, utilization, and disposal methods. Attach extra sheets as necessary.

2. If your wastewater treatment is by methods other than lagoon:

Do you have a Sludge Management Plan? ☒ YES ☐ NO

Is the Plan approved by:

☒ Local health district? Date approved: 1994

☒ Department of Ecology? Date approved: 1994

3. Does your facility have a biosolids permit issued by Ecology? If so, please provide the permit's number and expiration date.

Biosolids Permit number BA0037052 Permit expiration Date 6/30/2024

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### Summary of Attachments That May be Required for This Application:

(Please check attachments that are included)

- ☒ B.5 Schematic drawing of POTW
- ☒ C.4 Flow records
- ☒ C.6 Additional effluent analysis
- ☒ D. Additional ground water data
- ☒ E.1 Copies of contracts authorizing use of land for treatment
- ☐ E.3 USGS topographic map
- ☐ E.4 Soil information
- ☐ E.5 Local geology and hydrogeology

*If you need this document in a format for the visually impaired, call the Water Quality Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.*