

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

This form is equivalent to EPA NPDES Form 3510-2A

FORM
2A
NPDES



NPDES FORM 2A APPLICATION OVERVIEW

APPLICATION OVERVIEW

Form 2A has been developed in a modular format and consists of a “Basic Application Information” packet and a “Supplemental Application Information” packet. The Basic Application Information packet is divided into two parts. All applicants must complete Parts A and C. Applicants with a design flow greater than or equal to 0.1 mgd must also complete Part B. Some applicants must also complete the Supplemental Application Information packet. The following items explain which parts of Form 2A you must complete.

BASIC APPLICATION INFORMATION:

- A. Basic Application Information for all Applicants.** All applicants must complete questions A.1 through A.8. A treatment works that discharges effluent to surface waters of the United States must also answer questions A.9 through A.12.
- B. Additional Application Information for Applicants with a Design Flow ≥ 0.1 mgd.** All treatment works that have design flows greater than or equal to 0.1 million gallons per day must complete questions B.1 through B.6.
- C. Certification.** All applicants must complete Part C (Certification).

SUPPLEMENTAL APPLICATION INFORMATION:

- D. Expanded Effluent Testing Data.** A treatment works that discharges effluent to surface waters of the United States and meets one or more of the following criteria must complete Part D (Expanded Effluent Testing Data):
 - 1. Has a design flow rate greater than or equal to 1mgd,
 - 2. Is required to have a pretreatment program (or has one in place), or
 - 3. Is otherwise required by the permitting authority to provide the information.
- E. Toxicity Testing Data.** A treatment works that meets one or more of the following criteria must complete Part E (Toxicity Testing Data):
 - 1. Has a design flow rate greater than or equal to 1 mgd,
 - 2. Is required to have a pretreatment program (or has one in place), or
 - 3. Is otherwise required by the permitting authority to submit results of toxicity testing.
- F. Industrial User Discharges and RCRA/CERCLA Wastes.** A treatment works that accepts process wastewater from any significant industrial users (SIUs) or receives RCRA or CERCLA wastes must complete Part F (Industrial User Discharges and RCRA/CERCLA Wastes). SIUs are defined as:
 - 1. All industrial users subject to Categorical Pretreatment Standards under 40 Code of Federal Regulations (CFR) 403.6 and 40 CFR Chapter I, Subchapter N (see instructions); and
 - 2. Any other industrial user that:
 - a. Discharges an average of 25,000 gallons per day or more of process wastewater to the treatment works (with certain exclusions); or
 - b. Contributes a process wastestream that makes up 5 percent or more of the average dry weather hydraulic or organic capacity of the treatment plant; or
 - c. Is designated as an SIU by the control authority.
- G. Combined Sewer Systems.** A treatment works that has a combined sewer system must complete Part G (Combined Sewer Systems).

ALL APPLICANTS MUST COMPLETE PART C (CERTIFICATION)

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A.1. Facility Information.

Facility Name City of Everett Water Pollution Control Facility (WPCF)
Mailing Address 3200 Cedar Street
Everett, WA 98201
Contact Person Jeff Wright
Title WPCF Process Analyst
Telephone Number (425) 257-8231
Facility Address 4027 4th Street SE
(not P.O. Box) Everett, WA 9820

UBI Number

A.2. Applicant Information. If the applicant is different from the above, provide the following:

Applicant Name _____
Mailing Address _____
Contact Person _____
Title _____
Telephone Number (_____) _____

Is the applicant the owner or operator (or both) of the treatment works?

owner operator

Indicate whether correspondence regarding this permit should be directed to the facility or the applicant.

facility applicant

A.3. Existing Environmental Permits. Provide the permit number of any existing environmental permits that have been issued to the treatment works (include state-issued permits).

NPDES WA-002449-0 PSD _____
UIC _____ Other Puget Sound Clean Air Agency #14559
RCRA WAD000800920 Other _____

A.4. Collection System Information. Provide information on municipalities and areas served by the facility. Provide the name and population of each entity and, if known, provide information on the type of collection system (combined vs. separate) and its ownership (municipal, private, etc.).

Name	Population Served	Type of Collection System	Ownership
<u>Everett</u>	<u>104,000</u>	<u>Separate and Combined</u>	<u>Municipal</u>
<u>Alderwood</u>	<u>8,000</u>	<u>Separate</u>	<u>Municipal</u>
<u>Mukilteo</u>	<u>23,000</u>	<u>Separate</u>	<u>Municipal</u>
<u>Silver Lake</u>	<u>30,000</u>	<u>Separate</u>	<u>Municipal</u>
Total population served	<u>Approximately 165,000</u>		

Please see attachment "Part A.4 – Collection System Information" for narrative

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A.5. Indian Country.

a. Is the treatment works located in Indian Country?

Yes No

b. Does the treatment works discharge to a receiving water that is either in Indian Country or that is upstream from (and eventually flows through) Indian Country?

Yes No

A.6. **Flow.** Indicate the design flow rate of the treatment plant (i.e., the wastewater flow rate that the plant was built to handle). Also provide the average daily flow rate and maximum daily flow rate for each of the last three years. Each year's data must be based on a 12-month time period with the 12th month of "this year" occurring no more than three months prior to this application submittal.

a. Design flow rate 36.3 mgd

	Two Years Ago	Last Year	This Year
b. Annual average daily flow rate	<u>19.8</u>	<u>18.8</u>	<u>20.2</u>
c. Maximum daily flow rate	<u>75.6</u>	<u>104.9</u>	<u>96.7</u>

A.7. **Collection System.** Indicate the type(s) of collection system(s) used by the treatment plant. Check all that apply. Also estimate the percent contribution (by miles) of each.

- Separate sanitary sewer 57.4 %
- Combined storm and sanitary sewer 42.6 %

A.8. Discharges and Other Disposal Methods.

a. Does the treatment works discharge effluent to waters of the U.S.? Yes No

If yes, list how many of each of the following types of discharge points the treatment works uses:

- i. Discharges of treated effluent 3
- ii. Discharges of untreated or partially treated effluent 0
- iii. Combined sewer overflow points 13
- iv. Constructed emergency overflows (prior to the headworks) 0
- v. Other _____

b. Does the treatment works discharge effluent to basins, ponds, or other surface impoundments that do not have outlets for discharge to waters of the U.S.? Yes No

If yes, provide the following for each surface impoundment:

Location: _____

Annual average daily volume discharge to surface impoundment(s) _____ mgd

Is discharge continuous or intermittent?

c. Does the treatment works land-apply treated wastewater? Yes No

If yes, provide the following for each land application site:

Location: _____

Number of acres: _____

Annual average daily volume applied to site: _____ mgd

Is land application continuous or intermittent?

d. Does the treatment works discharge or transport treated or untreated wastewater to another treatment works? Yes No

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If yes, describe the mean(s) by which the wastewater from the treatment works is discharged or transported to the other treatment works (e.g., tank truck, pipe).

If transport is by a party other than the applicant, provide:

Transporter Name _____

Mailing Address _____

Contact Person _____

Title _____

Telephone Number (_____) _____

For each treatment works that receives this discharge, provide the following:

Name _____

Mailing Address _____

Contact Person _____

Title _____

Telephone Number (_____) _____

If known, provide the NPDES permit number of the treatment works that receives this discharge _____

Provide the average daily flow rate from the treatment works into the receiving facility. _____ mgd

- e. Does the treatment works discharge or dispose of its wastewater in a manner not included in A.8. through A.8.d above (e.g., underground percolation, well injection): Yes No

If yes, provide the following for each disposal method:

Description of method (including location and size of site(s) if applicable):

Annual daily volume disposed by this method: _____

Is disposal through this method continuous or intermittent?

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WASTEWATER DISCHARGES:

If you answered "yes" to question A.8.a, complete questions A.9 through A.12 **once for each outfall** (including bypass points) through which effluent is discharged. Do not include information on combined sewer overflows in this section. If you answered "no" to question A.8.a, go to Part B, "Additional Application Information for Applicants with a Design Flow Greater than or Equal to 0.1 mgd."

A.9. Description of Outfall.

- a. Outfall number 015 – Lagoon System
- b. Location Everett 98201
(City or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
48.004167 122.177222
(Latitude) Provide these as decimal degrees (NAD83/WGS84) (Longitude)
- c. Distance from shore (if applicable) N/A ft.
- d. Depth below surface (if applicable) 8 ft below mean lower low water ft.
- e. Average daily flow rate 12.2 mgd
- f. Does this outfall have either an intermittent or a periodic discharge?
 Yes No (go to A.9.g.)
If yes, provide the following information:
Number of times per year discharge occurs: _____
Average duration of each discharge: _____
Average flow per discharge: _____ mgd
Months in which discharge occurs: _____
- g. Is outfall equipped with a diffuser? Yes No

A.10. Description of Receiving Waters.

- a. Name of receiving water Snohomish River
- b. Name of watershed (if known) Snohomish River Basin
United States Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin (if known): WA-07-1010
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____
- d. Critical low flow of receiving stream (if applicable)
acute 1051 cfs chronic * cfs
- e. Total hardness of receiving stream at critical low flow (if applicable): _____ mg/l of CaCO₃

* The critical condition for the Snohomish River main stem is the reported 7Q20 "acute flow" at slack tide

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A.11. Description of Treatment

a. What level of treatment are provided? Check all that apply.

Primary Secondary

Advanced

Other. Describe: _____

b. Indicate the following removal rates (as applicable):

Design BOD5 removal or Design CBOD5 removal 83 %

Design SS removal 69 %

Design P removal N/A %

Design N removal N/A %

Other _____ %

c. What type of disinfection is used for the effluent from this outfall? If disinfection varies by season, please describe:

Sodium Hypochlorite

If disinfection is by chlorination is dechlorination used for this outfall? Yes No

d. Does the treatment plant have post aeration? Yes No

A.12 Effluent Testing Information. All Applicants that discharge to waters of the US must provide effluent testing data for the following parameters. Provide the indicated effluent testing required by the permitting authority for each outfall through which effluent is discharged. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analysis conducted using 40 CFR Part 136 methods. In addition, this data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. At a minimum, effluent testing data must be based on at least three samples and must be no more than one and one-half years apart.

Outfall number: 015

PARAMETER	MAXIMUM DAILY VALUE		AVERAGE DAILY VALUE		
	Value	Units	Value	Units	Number of Samples
pH (Minimum)	6.1	s.u.			
pH (Maximum)	8.6	s.u.			
Flow Rate	44.5	MGD	11.7	MGD	1074
Temperature (Winter)	25.5	°C	11.8	°C	720
Temperature (Summer)	27.3	°C	19.9	°C	356

* For pH please report a minimum and a maximum daily value

POLLUTANT	MAXIMUM DAILY DISCHARGE		AVERAGE DAILY DISCHARGE			ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Conc	Units	Number of Samples		

CONVENTIONAL AND NON CONVENTIONAL COMPOUNDS

BIOCHEMICAL OXYGEN DEMAND (Report one)	BOD5						
	CBOD5	46	mg/L	11.6	mg/L	765	SM 5210-B 3
FECAL COLIFORM	4100	cfu/100 mL	46	cfu/100 mL	766	SM 9221-E	N/A
TOTAL SUSPENDED SOLIDS (TSS)	89	mg/L	28	mg/L	920	SM 2540-D	3

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WASTEWATER DISCHARGES:

If you answered "yes" to question A.8.a, complete questions A.9 through A.12 **once for each outfall** (including bypass points) through which effluent is discharged. Do not include information on combined sewer overflows in this section. If you answered "no" to question A.8.a, go to Part B, "Additional Application Information for Applicants with a Design Flow Greater than or Equal to 0.1 mgd."

A.9. Description of Outfall.

- a. Outfall number 100 – TF/SC (Port Gardner Bay)
- b. Location Everett 98201
(City or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.969444 122.246667
(Latitude) Provide these as decimal degrees (NAD83/WGS84) (Longitude)
- c. Distance from shore (if applicable) 1300 ft.
- d. Depth below surface (if applicable) 350 ft.
- e. Average daily flow rate 10.5 mgd
- f. Does this outfall have either an intermittent or a periodic discharge? Yes No (go to A.9.g.)
If yes, provide the following information:
Number of times per year discharge occurs: _____
Average duration of each discharge: _____
Average flow per discharge: _____ mgd
Months in which discharge occurs: _____
- g. Is outfall equipped with a diffuser? Yes No

A.10. Description of Receiving Waters.

- a. Name of receiving water Port Gardner Bay (Puget Sound)
- b. Name of watershed (if known) Snohomish River Basin
United States Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin (if known): WA-PS-0030
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____
- d. Critical low flow of receiving stream (if applicable)
acute _____ cfs chronic _____ cfs
- e. Total hardness of receiving stream at critical low flow (if applicable): _____ mg/l of CaCO₃

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A.11. Description of Treatment

a. What level of treatment are provided? Check all that apply.

Primary Secondary

Advanced Other. Describe: _____

b. Indicate the following removal rates (as applicable):

Design BOD5 removal or Design CBOD5 removal 83 %

Design SS removal 84 %

Design P removal N/A %

Design N removal N/A %

Other _____ %

c. What type of disinfection is used for the effluent from this outfall? If disinfection varies by season, please describe:

Sodium Hypochlorite

If disinfection is by chlorination is dechlorination used for this outfall? Yes No

d. Does the treatment plant have post aeration? Yes No

A.12 Effluent Testing Information. All Applicants that discharge to waters of the US must provide effluent testing data for the following parameters. Provide the indicated effluent testing required by the permitting authority for each outfall through which effluent is discharged. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analysis conducted using 40 CFR Part 136 methods. In addition, this data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. At a minimum, effluent testing data must be based on at least three samples and must be no more than one and one-half years apart.

Outfall number: 100

PARAMETER	MAXIMUM DAILY VALUE		AVERAGE DAILY VALUE		
	Value	Units	Value	Units	Number of Samples
pH (Minimum)	6.1	s.u.			
pH (Maximum)	7.6	s.u.			
Flow Rate	20.9	MGD	10.2	MGD	950
Temperature (Winter)	22.9	°C	12.5	°C	594
Temperature (Summer)	24.5	°C	19.2	°C	368

* For pH please report a minimum and a maximum daily value

POLLUTANT	MAXIMUM DAILY DISCHARGE		AVERAGE DAILY DISCHARGE			ANALYTICAL METHOD	ML/MDL	
	Conc.	Units	Conc.	Units	Number of Samples			
BIOCHEMICAL OXYGEN DEMAND (Report one)								
	BOD5							
	CBOD5	39	mg/L	13	mg/L	674	SM 5210-B	3
FECAL COLIFORM		7900	cfu/100 mL	62	cfu/100mL	680	SM 9221-E	N/A
TOTAL SUSPENDED SOLIDS (TSS)		43	mg/L	16	mg/L	811	SM 2540-D	3

CONVENTIONAL AND NON CONVENTIONAL COMPOUNDS

BIOCHEMICAL OXYGEN DEMAND (Report one)	BOD5							
	CBOD5	39	mg/L	13	mg/L	674	SM 5210-B	3
FECAL COLIFORM		7900	cfu/100 mL	62	cfu/100mL	680	SM 9221-E	N/A
TOTAL SUSPENDED SOLIDS (TSS)		43	mg/L	16	mg/L	811	SM 2540-D	3

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WASTEWATER DISCHARGES:

If you answered "yes" to question A.8.a, complete questions A.9 through A.12 **once for each outfall** (including bypass points) through which effluent is discharged. Do not include information on combined sewer overflows in this section. **If you answered "no" to question A.8.a, go to Part B, "Additional Application Information for Applicants with a Design Flow Greater than or Equal to 0.1 mgd."**

A.9. Description of Outfall.

- a. Outfall number 025 – TF/SC (Snohomish River)
- b. Location Everett 98201
(City or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.991389 122.178889
(Latitude) Provide these as decimal degrees (NAD83/WGS84) (Longitude)
- c. Distance from shore (if applicable) 165 ft.
- d. Depth below surface (if applicable) 16 ft below mean lower low water ft.
- e. Average daily flow rate N/A mgd
- f. Does this outfall have either an intermittent or a periodic discharge?
 Yes No (go to A.9.g.)
If yes, provide the following information:
Number of times per year discharge occurs: _____
Average duration of each discharge: _____
Average flow per discharge: _____ mgd
Months in which discharge occurs: _____
- g. Is outfall equipped with a diffuser? Yes No

A.10. Description of Receiving Waters.

- a. Name of receiving water Snohomish River
- b. Name of watershed (if known) Snohomish River Basin
United States Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin (if known): WA-07-1010
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____
- d. Critical low flow of receiving stream (if applicable)
acute 1051 cfs chronic _____ cfs
- e. Total hardness of receiving stream at critical low flow (if applicable): _____ mg/l of CaCO₃

Outfall 025 is the TF/SC "emergency outfall" and is currently inoperable due to River siltation

Please see attachment "Part D – expanded testing" for narrative.

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A.11. Description of Treatment

d. What level of treatment are provided? Check all that apply.

Primary Secondary

Advanced Other. Describe: _____

e. Indicate the following removal rates (as applicable):

Design BOD5 removal or Design CBOD5 removal 83 %

Design SS removal 84 %

Design P removal N/A %

Design N removal N/A %

Other _____ %

f. What type of disinfection is used for the effluent from this outfall? If disinfection varies by season, please describe:

Sodium Hypochlorite

If disinfection is by chlorination is dechlorination used for this outfall? Yes No

d. Does the treatment plant have post aeration? Yes No

A.12 Effluent Testing Information. All Applicants that discharge to waters of the US must provide effluent testing data for the following parameters. Provide the indicated effluent testing required by the permitting authority for each outfall through which effluent is discharged. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analysis conducted using 40 CFR Part 136 methods. In addition, this data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. At a minimum, effluent testing data must be based on at least three samples and must be no more than one and one-half years apart.

Outfall number: 025 (Emergency Outfall) Please see attachment "Part D – expanded testing" for narrative

PARAMETER	MAXIMUM DAILY VALUE		AVERAGE DAILY VALUE		
	Value	Units	Value	Units	Number of Samples
pH (Minimum)		s.u.			
pH (Maximum)		s.u.			
Flow Rate					
Temperature (Winter)					
Temperature (Summer)					

* For pH please report a minimum and a maximum daily value

POLLUTANT	MAXIMUM DAILY DISCHARGE		AVERAGE DAILY DISCHARGE			ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Conc.	Units	Number of Samples		

CONVENTIONAL AND NON CONVENTIONAL COMPOUNDS

BIOCHEMICAL OXYGEN DEMAND (Report one)	BOD5						
	CBOD5						
FECAL COLIFORM							
TOTAL SUSPENDED SOLIDS (TSS)							

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BASIC APPLICATION INFORMATION

PART B. ADDITIONAL APPLICATION INFORMATION FOR APPLICANTS WITH A DESIGN FLOW GREATER THAN OR EQUAL TO 0.1 MGD (100,000 gallons per day).

All applicants with a design flow rate ≥ 0.1 mgd must answer questions B.1 through B.6. All others go to Part C (Certification).

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B.1. Inflow and Infiltration. Estimate the average number of gallons per day that flow into the treatment works from inflow and/or infiltration.

The north end of the City is a combined system that deliberately directs inflow to the collection system. The south end sanitary sewage system is designed to prevent I/I. An I/I memorandum was developed as part of the 2013 Comprehensive Sewer Plan (CSP Draft, June 2013). No capacity issues were identified in the sanitary collection system and based on the analysis additional I/I reduction was not recommended.

Briefly explain any steps underway or planned to minimize inflow and infiltration.

An infiltration and inflow evaluation was also performed by Carollo Engineers in 2008 (Revised 2010 WPCF Engineering Report, Appendix A) and infiltration was found to be not excessive (< 120 gpcd).

A CSO Reduction Plan Amendment due to Ecology October 1, 2013, will contain more information on collection system monitoring and potential for system improvements.

B.2. Topographic Map. Attach to this application a topographic map of the area extending at least one mile beyond facility property boundaries. This map must show the outline of the facility and the following information. (You may submit more than one map if one map does not show the entire area.)

- a. The area surrounding the treatment plant, including all unit processes.
- b. The major pipes or other structures through which wastewater enters the treatment works and the pipes or other structures through which treated wastewater is discharged from the treatment plant. Include outfalls from bypass piping, if applicable.
- c. Each well where wastewater from the treatment plant is injected underground.
- d. Wells, springs, other surface water bodies, and drinking water wells that are: 1) within ¼ mile of the property boundaries of the treatment works, and 2) listed in public record or otherwise known to the applicant.
- e. Any areas where the sewage sludge produced by the treatment works is stored, treated, or disposed.
- f. If the treatment works receives waste that is classified as hazardous under the Resource Conservation and Recovery Act (RCRA) by truck, rail, or special pipe, show on the map where the hazardous waste enters the treatment works and where it is treated, stored, and/or disposed.

B.3. Process Flow Diagram or Schematic. Provide a diagram showing the processes of the treatment plant, including all bypass piping and all backup power sources or redundancy in the system. Also provide a water balance showing all treatment units, including disinfection (e.g., chlorination and dechlorination). The water balance must show daily average flow rates at influent and discharge points and approximate daily flow rates between treatment units. Include a brief narrative description of the diagram.

B.4. Operation/Maintenance Performed by Contractor(s).

Are any operational or maintenance aspects (related to wastewater treatment and effluent quality) of the treatment works the responsibility of a contractor? Yes No

If yes, list the name, address, telephone number, and status of each contractor and describe the contractor's responsibilities (attach additional pages if necessary).

Name: _____

Mailing Address: _____

Telephone Number: (____) _____

Responsibilities of Contractor: _____

B.5. Scheduled improvements and Schedules of Implementation. Provide information on any uncompleted implementation schedule or uncompleted plans for improvements that will affect the wastewater treatment, effluent quality, or design capacity of the treatment works. If the treatment works has several different implementation schedules or is planning several improvements, submit separate responses to question B.5 for each. (If none, go to question B.6.)

- a. List the outfall number (assigned in question A.9) for each outfall that is covered by this implementation schedule.

Outfalls 015, 100, 025. "Phase C" improvements to add 50% more TF/SC plant capacity.

- b. Indicate whether the planned improvements or implementation schedule are required by local, State, or Federal agencies.

Yes No

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c. If the answer to B.5.b is "Yes," briefly describe, including new maximum daily inflow rate (if applicable).

"Phase C" expansion 60% design documents have been submitted to Ecology. Influent flow rating post-expansion is expected to be approximately 45 MGD.

d. Provide dates imposed by any compliance schedule or any actual dates of completion for the implementation steps listed below, as applicable. For improvements planned independently of local, State, or Federal agencies, indicate planned or actual completion dates, as applicable. Indicate dates as accurately as possible.

Implementation Stage	Schedule MM/DD/YYYY	Actual Completion MM/DD/YYYY
- Begin Construction	<u>April/2014</u>	<u> / / </u>
- End Construction	<u>October/2015</u>	<u> / / </u>
- Begin Discharge	<u>November/2015</u>	<u> / / </u>
- Attain Operational Level	<u>November/2015</u>	<u> / / </u>

e. Have appropriate permits/clearances concerning other Federal/State requirements been obtained? **Partially** Yes No

Describe briefly:

Completed Permits: SEPA Determination, Army Corps of Engineering 404 Permit, Ecology 401 Permit, and will meet stipulations of the City's Special Use and Shoreline Substantial Development Permits.
Permits Needed: NPDES Construction Permit and City Building Permits

B.6. EFFLUENT TESTING DATA (GREATER THAN 0.1 MGD ONLY).

Applicants that discharge to waters of the US must provide effluent testing data for the following parameters. Provide the indicated effluent testing required by the permitting authority for each outfall through which effluent is discharged. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analysis conducted using 40 CFR Part 136 methods (See attachment A). In addition, this data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. At a minimum effluent testing data must be based on at least three pollutant scans and must be no more than four and on-half years old.

Outfall Number: **015**

POLLUTANT	MAXIMUM DAILY DISCHARGE		AVERAGE DAILY DISCHARGE			ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Conc.	Units	Number of Samples		
CONVENTIONAL AND NON CONVENTIONAL COMPOUNDS							
AMMONIA (as N)	<u>43.0</u>	<u>mg/L</u>	<u>28.9</u>	<u>mg/L</u>	<u>276</u>	<u>SM 4500-NH3-G</u>	<u>0.002</u>
CHLORINE (TOTAL RESIDUAL, TRC)	<u>0.074</u>	<u>mg/L</u>	<u>0.003</u>	<u>mg/L</u>	<u>1202</u>	<u>SM 4500-Cl2-G</u>	<u>0.008</u>
DISSOLVED OXYGEN	<u>18.2</u>	<u>mg/L</u>	<u>5.7</u>	<u>mg/L</u>	<u>1075</u>	<u>Hach 10360 (LDO)</u>	<u>0.05</u>
TOTAL KJELDAHL NITROGEN (TKN)	<u>45.1</u>	<u>mg/L</u>	<u>30.7</u>	<u>mg/L</u>	<u>39</u>	<u>SM 4500-N-C</u> <u>SM 4500-N-D</u>	<u>0.050</u> <u>0.070</u>
NITRATE PLUS NITRITE NITROGEN	<u>2.8</u>	<u>mg/L</u>	<u>0.39</u>	<u>mg/L</u>	<u>72</u>	<u>SM 4500-NH3-F</u>	<u>0.001</u>
OIL and GREASE	<u><5.5</u>	<u>mg/L</u>	<u><5.1</u>	<u>mg/L</u>	<u>11</u>	<u>EPA 1664A</u>	<u><5.1 *</u>
PHOSPHORUS (Total)	<u>7.4</u>	<u>mg/L</u>	<u>4.7</u>	<u>mg/L</u>	<u>39</u>	<u>SM 4500-P-F</u>	<u>0.002</u>
TOTAL DISSOLVED SOLIDS (TDS)	<u>330</u>	<u>mg/L</u>	<u>280</u>	<u>mg/L</u>	<u>3</u>	<u>SM 2540 C</u>	<u>10</u>
OTHER							

* Detection limit varies with sample volume. The reported value is the average detection limit.

B.6. EFFLUENT TESTING DATA (GREATER THAN 0.1 MGD ONLY).

Applicants that discharge to waters of the US must provide effluent testing data for the following parameters. Provide the indicated effluent testing required by the permitting authority for each outfall through which effluent is discharged. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analysis conducted using 40 CFR Part 136 methods (See attachment A). In addition, this data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. At a minimum effluent testing data must be based on at least three pollutant scans and must be no more than four and on-half years old.

Outfall Number: 100

POLLUTANT	MAXIMUM DAILY DISCHARGE		AVERAGE DAILY DISCHARGE			ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Conc.	Units	Number of Samples		
CONVENTIONAL AND NON CONVENTIONAL COMPOUNDS							
AMMONIA (as N)	33.7	mg/L	18.3	mg/L	76	SM 4500-NH3-G	0.002
CHLORINE (TOTAL RESIDUAL, TRC)	0.75	mg/L	0.46	mg/L	1114	SM 4500-Cl2-G	0.008
DISSOLVED OXYGEN	10.2	mg/L	6.7	mg/L	949	Hach 10360 (LDO)	0.05
TOTAL KJELDAHL NITROGEN (TKN)	36.4	mg/L	22.4	mg/L	38	SM 4500-N-C SM 4500-N-D	0.050 0.070
NITRATE PLUS NITRITE NITROGEN	17.6	mg/L	7.1	mg/L	73	SM 4500-NH3-F	0.001
OIL and GREASE	<6.4	mg/L	<5.3	mg/L	12	EPA 1664A	<5.3 *
PHOSPHORUS (Total)	5.2	mg/L	3.2	mg/L	38	SM 4500-P-F	0.002
TOTAL DISSOLVED SOLIDS (TDS)	280	mg/L	217	mg/L	3	SM 2540 C	10
OTHER							

* Detection limit varies with sample volume. The reported value is the average detection limit.

**END OF PART B.
REFER TO THE APPLICATION OVERVIEW TO DETERMINE WHICH OTHER PARTS OF FORM
2A YOU MUST COMPLETE**

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

BASIC APPLICATION INFORMATION

PART C. CERTIFICATION

All applicants must complete the Certification Section. Refer to instructions to determine who is an officer for the purposes of this certification. All applicants must complete all applicable sections of Form 2A, as explained in the Application Overview. Indicate below which parts of Form 2A you have completed and are submitting. By signing this certification statement, applicants confirm that they have reviewed Form 2A and have completed all sections that apply to the facility for which this application is submitted.

Indicate which parts of Form 2A you have completed and are submitting:

Basic Application Information packet

Supplemental Application Information packet:

Part D (Expanded Effluent Testing Data)

Part E (Toxicity Testing: Biomonitoring Data)

Part F (Industrial User Discharges and RCRA/CERCLA Wastes)

Part G (Combined Sewer Systems)

ALL APPLICANTS MUST COMPLETE THE FOLLOWING CERTIFICATION.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information 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.

Name and official title	<u>Ray Stephanson, Mayor</u>
Signature	_____
Telephone number	<u>(425) 257-7115</u>
Date signed	_____

Upon request of the permitting authority, you must submit any other information necessary to assure wastewater treatment practices at the treatment works or identify appropriate permitting requirements.

SEND COMPLETED FORMS TO:

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

SUPPLEMENTAL APPLICATION INFORMATION

PART D. EXPANDED EFFLUENT TESTING DATA

Refer to the directions on the cover page to determine whether this section applies to the treatment works.

Effluent Testing: 1.0 mgd and Pretreatment Works. If the treatment works has a design flow greater than or equal to 1.0 mgd or it has (or is required to have) a pretreatment program, or is otherwise required by the permitting authority to provide the data, then provide effluent testing data for the following pollutants. Provide the indicated effluent testing information and any other information required by the permitting authority for each outfall through which effluent is discharged. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analyses conducted using 40 CFR Part 136 methods. In addition, these data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. Indicate in the blank rows provided below any data you may have on pollutants not specifically listed in this form. At a minimum, effluent testing data must be based on at least three pollutant scans and must be no more than four and one-half years old. The applicant should also review Attachment A.

Outfall number: 015 (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
METALS (TOTAL RECOVERABLE), CYANIDE, PHENOLS, AND HARDNESS.											
ANTIMONY	1.3	µg/L	0.209	lbs	0.7	µg/L	0.081	lbs	12	200.8	0.5
ARSENIC	3.6	µg/L	0.940	lbs	1.7	µg/L	0.169	lbs	36	200.8	0.5
BERYLLIUM	0	µg/L	0	lbs	0	µg/L	0	lbs	12	200.8	0.5
CADMIUM	0.4	µg/L	0.104	lbs	0.117	µg/L	0.014	lbs	36	200.8	0.2
CHROMIUM	4.4	µg/L	1.149	lbs	1.3	µg/L	0.160	lbs	36	200.8	0.5
COPPER	24.6	µg/L	6.422	lbs	7.6	µg/L	0.969	lbs	36	200.8	0.5
LEAD	9.8	µg/L	2.558	lbs	3.1	µg/L	0.360	lbs	36	200.8	0.5
MERCURY	36.3	ng/L	0.008	lbs	15.4	ng/L	0.002	lbs	12	1631E	0.5
NICKEL	5.2	µg/L	1.357	lbs	3.0	µg/L	0.297	lbs	36	200.8	0.5
SELENIUM	0	µg/L	0	lbs	0	µg/L	0	lbs	12	200.8	0.5
SILVER	1.4	µg/L	0.365	lbs	0.4	µg/L	0.046	lbs	32	200.8	0.5
THALLIUM	0	µg/L	0	lbs	0	µg/L	0	lbs	12	200.8	0.5
ZINC	52	µg/L	13.57	lbs	17.2	µg/L	2.140	lbs	36	200.8	5
CYANIDE	0.005	mg/L	1.013	lbs	0.003	mg/L	0.314	lbs	12	335.4	0.005
TOTAL PHENOLIC COMPOUNDS	0	mg/L	0	lbs	0	mg/L	0	lbs	12	420.1	0.04
HARDNESS (AS CaCO3)	84.6	mg/L	14984	lbs	69.0	mg/L	7043	lbs	12	200.8	0.2

Use this space (or a separate sheet) to provide information on other metals requested by the permit writer

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

Outfall number: **015** (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
VOLATILE ORGANIC COMPOUNDS											
ACROLEIN	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	10
ACRYLONITRILE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	5
BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
BROMOFORM	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
CARBON TETRACHLORIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
CHLOROBENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
CHLOROBIDBROMO-METHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
CHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
2-CHLORO-ETHYL VINYL ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	5
CHOLOROFORM	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
DICHLOROBROMO-METHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,1-DICHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,2-DICHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,2-DICHLOROETHYLENE (CIS??)	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
TRANS-1,2-DICHLOROETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,1-DICHLOROETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,2-DICHLOROPROPANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,3-DICHLOROPROPYLENE (CIS??)	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
ETHYLBENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
METHYL BROMIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
METHYL CHLORIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
METHYLENE CHLORIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	2
1,1,2,2-TETRACHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Outfall number: **015** (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
TETRACHLORO-ETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
TOLUENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,1,1-TRICHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,1,2-TRICHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
TRICHLORETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
VINYL CHLORIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1

Use this space (or a separate sheet) to provide information on other metals requested by the permit writer

ACID-EXTRACTABLE COMPOUNDS

P-CHLORO-M-CRESOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
2-CHLOROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
2,4-DICHLOROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
2,4-DIMETHYLPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
4,6-DINITRO-O-CRESOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	10
2,4-DINITROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	20
2-NITROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
4-NITROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
PENTA CHLOROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	10
PHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
2,4,6-TRICHLORO PHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3

BASE-NEUTRAL COMPOUNDS

ACENAPHTHENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
ACENAPHTYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
ANTHRACENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BENZIDINE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	10
BENZO(A) ANTHRACENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Outfall number: **015** (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
BENZO(J)FLUORANTHENE											
BENZO(r,s,t)PENTAPHENE											
BENZO(A)PYRENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
3,4 BENZO-FLUORANTHENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	2
BENZO(GHI)PERYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BENZO(K)FLOURANTHENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	2
BIS (2-CHLOROETHOXY) METHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BIS (2-CHLOROETHYL)-ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BIS (2-CHLOROISOPROPYL) ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BIS (2-ETHYLHEXYL) PHTHALATE	25.0	µg/L	2.29	lbs	14.6	µg/L	1.514	lbs	3	625	1
4-BROMOPHENYL PHENYL ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BUTYL BENZYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
2-CHLORO NAPHTHALENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
4-CHLORPHENYL PHENYL ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
CHRYSENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
DIBENZO(a,j)ACRIDINE											
DIBENZO(a,h)ACRIDINE											
DI-N-BUTYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
DI-N-OCTYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
DIBENZO(A,H) ANTHRACENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
1,2-DICHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
1,3-DICHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Outfall number: **015** (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
1,4-DICHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
3,3-DICHLORO BENZIDINE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	5
DIETHYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
DIMETHYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
2,4-DINITROTOLUENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
2,6-DINITROTOLUENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
1,2-DIPHENYLHYDRAZINE											
FLUORANTHENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
FLUORENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
HEXACHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
HEXACHLOROBUT ADIENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
HEXACHLOROCYCLO-PENTADIENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	5
HEXA CHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	2
INDENO(1,2,3-CD) PYRENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
ISOPHORONE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
3-METHYL CHOLANTHRENE											
NAPHTHALENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
NITROBENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
N-NITROSODI-N-PROPYLAMINE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
N-NITROSODI-METHYLAMINE											
N-NITROSODI-PHENYLAMINE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
PERYLENE											
PHENANTHRENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
PYRENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
1,2,4-TRICHLOROBENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1

Use this space (or a separate sheet) to provide information on other metals requested by the permit writer

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

SUPPLEMENTAL APPLICATION INFORMATION

PART D. EXPANDED EFFLUENT TESTING DATA

Refer to the directions on the cover page to determine whether this section applies to the treatment works.

Effluent Testing: 1.0 mgd and Pretreatment Works. If the treatment works has a design flow greater than or equal to 1.0 mgd or it has (or is required to have) a pretreatment program, or is otherwise required by the permitting authority to provide the data, then provide effluent testing data for the following pollutants. Provide the indicated effluent testing information and any other information required by the permitting authority for each outfall through which effluent is discharged. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analyses conducted using 40 CFR Part 136 methods. In addition, these data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136. Indicate in the blank rows provided below any data you may have on pollutants not specifically listed in this form. At a minimum, effluent testing data must be based on at least three pollutant scans and must be no more than four and one-half years old. The applicant should also review Attachment A.

Outfall number: 100 (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
METALS (TOTAL RECOVERABLE), CYANIDE, PHENOLS, AND HARDNESS.											
ANTIMONY	0.8	µg/L	0.105	lbs	0.6	µg/L	0.062	lbs	12	200.8	0.5
ARSENIC	1.4	µg/L	0.209	lbs	1.0	µg/L	0.091	lbs	35	200.8	0.5
BERYLLIUM	0	µg/L	0	lbs	0	µg/L	0	lbs	12	200.8	0.5
CADMIUM	0	µg/L	0	lbs	0	µg/L	0	lbs	35	200.8	0.5
CHROMIUM	1.2	µg/L	0.164	lbs	0.7	µg/L	0.059	lbs	35	200.8	0.5
COPPER	14	µg/L	1.582	lbs	7.1	µg/L	0.592	lbs	35	200.8	0.5
LEAD	1.3	µg/L	0.181	lbs	0.8	µg/L	0.070	lbs	35	200.8	0.5
MERCURY	47.9	ng/L	0.003	lbs	15.2	ng/L	0.001	lbs	12	1631E	0.5
NICKEL	3.3	µg/L	0.392	lbs	2.5	µg/L	0.210	lbs	35	200.8	0.5
SELENIUM	0	µg/L	0	lbs	0	µg/L	0	lbs	12	200.8	0.5
SILVER	0	µg/L	0	lbs	0	µg/L	0	lbs	35	200.8	0.5
THALLIUM	0	µg/L	0	lbs	0	µg/L	0	lbs	12	200.8	0.5
ZINC	50	µg/L	7.464	lbs	30	µg/L	2.64	lbs	35	200.8	5
CYANIDE	0.007	mg/L	0.746	lbs	0.003	mg/L	0.302	lbs	12	335.4	0.005
TOTAL PHENOLIC COMPOUNDS	0.05	mg/L	7.464	lbs	0.02	mg/L	2.297	lbs	12	420.1	0.04
HARDNESS (AS CaCO3)	84.3	mg/L	11585	lbs	65.4	mg/L	6234	lbs	12	200.8	0.2

Use this space (or a separate sheet) to provide information on other metals requested by the permit writer

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

Outfall number: **100** (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
VOLATILE ORGANIC COMPOUNDS											
ACROLEIN	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	10
ACRYLONITRILE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	5
BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
BROMOFORM	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
CARBON TETRACHLORIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
CHLOROBENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
CHLOROBIDBROMO-METHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
CHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
2-CHLORO-ETHYL VINYL ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	5
CHOLOROFORM	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
DICHLOROBROMO-METHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,1-DICHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,2-DICHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,2-DICHLOROETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
TRANS-1,2-DICHLORO-ETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,1-DICHLOROETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,2-DICHLOROPROPANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,3-DICHLOROPROPYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
ETHYLBENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
METHYL BROMIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
METHYL CHLORIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
METHYLENE CHLORIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	2
1,1,2,2-TETRACHLORO-ETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1

FACILITY NAME AND PERMIT NUMBER:

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Outfall number: 100 (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
TETRACHLORO-ETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
TOLUENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,1,1-TRICHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
1,1,2-TRICHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
TRICHLORETHYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
VINYL CHLORIDE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	624	1
ACID-EXTRACTABLE COMPOUNDS											
P-CHLORO-M-CRESOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
2-CHLOROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
2,4-DICHLOROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
2,4-DIMETHYLPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
4,6-DINITRO-O-CRESOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	10
2,4-DINITROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	20
2-NITROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
4-NITROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	10
PENTA CHLOROPHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	10
PHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
2,4,6-TRICHLORO PHENOL	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
BASE-NEUTRAL COMPOUNDS											
ACENAPHTHENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
ACENAPHTYLENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
ANTHRACENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BENZIDINE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	10
BENZO(A) ANTHRACENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BENZO(J)FLUORANTHENE											

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Outfall number: 100 (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
BENZO(r,s,t)PENTA PHENE											
BENZO(A)PYRENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
3,4 BENZO-FLUORANTHENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BENZO(GHI)PERYL ENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BENZO(K)FLOURA NTHENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BIS (2-CHLORO ETHOXY) METHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BIS (2-CHLOROETHYL)- ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BIS (2-CHLOROISO- PROPYL) ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BIS (2-ETHYLHEXYL) PHTHALATE	38	µg/L	2.630	lbs	16.7	µg/L	1.447	lbs	3	625	1
4-BROMOPHENYL PHENYL ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
BUTYL BENZYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
2-CHLORO NAPHTHALENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
4-CHLORPHENYL PHENYL ETHER	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
CHRYSENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
DIBENZO(a,j)ACRIDI NE											
DIBENZO(a,h)ACRIDI NE											
DI-N-BUTYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
DI-N-OCTYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
DIBENZO(A,H) ANTHRACENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
1,2-DICHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
1,3-DICHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
1,4-DICHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
3,3-DICHLORO BENZIDINE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	5

FACILITY NAME AND PERMIT NUMBER:

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Outfall number: 100 (Complete once for each outfall discharging effluent to waters of the United States.)

POLLUTANT	MAXIMUM DAILY DISCHARGE				AVERAGE DAILY DISCHARGE					ANALYTICAL METHOD	ML/MDL
	Conc.	Units	Mass	Units	Conc.	Units	Mass	Units	Number of Samples		
DIETHYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
DIMETHYL PHTHALATE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
2,4-DINITROTOLUENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
2,6-DINITROTOLUENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
1,2-DIPHENYLHYDRAZINE											
FLUORANTHENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
FLUORENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
HEXACHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
HEXACHLOROBUT ADIENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	3
HEXACHLOROCYCLO-PENTADIENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	5
HEXA CHLOROETHANE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	2
INDENO(1,2,3-CD) PYRENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
ISOPHORONE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
3-METHYL CHOLANTHRENE											
NAPHTHALENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
NITROBENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
N-NITROSODI-N-PROPYLAMINE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
N-NITROSODI-METHYLAMINE											
N-NITROSODI-PHENYLAMINE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
PERYLENE											
PHENANTHRENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
PYRENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
1,2,4-TRICHLORO BENZENE	0	µg/L	0	lbs	0	µg/L	0	lbs	3	625	1
Use this space (or a separate sheet) to provide information on other metals requested by the permit writer											

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
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SUPPLEMENTAL APPLICATION INFORMATION

PART E. TOXICITY TESTING DATA

Please see list of previously submitted WET results in the attachment “Part E – WET Test Submittal Dates”

POTWs meeting one or more of the following criteria must provide the results of whole effluent toxicity tests for acute or chronic toxicity for each of the facility’s discharge points: 1) POTWs with a design flow rate greater than or equal to 1.0 mgd; 2) POTWs with a pretreatment program (or those that are required to have one under 40 CFR Part 403); or 3) POTWs required by the permitting authority to submit data for these parameters.

- At a minimum, these results must include quarterly testing for a 12-month period within the past 1 year using multiple species (minimum of two species), or the results from four tests performed at least annually in the four and one-half years prior to the application, provided the results show no appreciable toxicity, and testing for acute and/or chronic toxicity, depending on the range of receiving water dilution. Do not include information on combined sewer overflows in this section. All information reported must be based on data collected through analysis conducted using 40 CFR Part 136 methods. In addition, this data must comply with QA/QC requirements of 40 CFR Part 136 and other appropriate QA/QC requirements for standard methods for analytes not addressed by 40 CFR Part 136.
- In addition, submit the results of any other whole effluent toxicity tests from the past four and one-half years. If a whole effluent toxicity test conducted during the past four and one-half years revealed toxicity, provide any information on the cause of the toxicity or any results of a toxicity reduction evaluation, if one was conducted.
- If you have already submitted any of the information requested in Part E, you need not submit it again. Rather, provide the information requested in question E.4 for previously submitted information. If EPA methods were not used, report the reasons for using alternate methods. If test summaries are available that contain all of the information requested below, they may be submitted in place of Part E.

If no biomonitoring data is required, do not complete Part E. Refer to the Application Overview for directions on which other sections of the form to complete.

E.1. Required Tests.

Indicate the number of whole effluent toxicity tests conducted in the past four and one-half years.

chronic acute

E.2. Individual Test Data. Complete the following chart for each whole effluent toxicity test conducted in the last four and one-half years. Allow one column per test (where each species constitutes a test). Copy this page if more than three tests are being reported.

Test number: _____ Test number: _____ Test number: _____

a. Test information.

Test Species & test method number			
Age at initiation of test			
Outfall number			
Dates sample collected			
Date test started			
Duration			

b. Give toxicity test methods followed.

Manual title			
Edition number and year of publication			
Page number(s)			

c. Give the sample collection method(s) used. For multiple grab samples, indicate the number of grab samples used.

24-Hour composite			
Grab			

d. Indicate where the sample was taken in relation to disinfection. (Check all that apply for each.)

Before disinfection			
After disinfection			
After dechlorination			

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Test number: _____

Test number: _____

Test number: _____

e. Describe the point in the treatment process at which the sample was collected.

Sample was collected:

f. For each test, include whether the test was intended to assess chronic toxicity, acute toxicity, or both

Chronic toxicity

Acute toxicity

g. Provide the type of test performed.

Static

Static-renewal

Flow-through

h. Source of dilution water. If laboratory water, specify type; if receiving water, specify source.

Laboratory water

Receiving water

i. Type of dilution water. If salt water, specify "natural" or type of artificial sea salts or brine used.

Fresh water

Salt water

j. Give the percentage effluent used for all concentrations in the test series.

k. Parameters measured during the test. (State whether parameter meets test method specifications)

pH

Salinity

Temperature

Ammonia

Dissolved oxygen

l. Test Results.

Acute:

Percent survival in 100% effluent

%

%

%

LC₅₀

95% C.I.

%

%

%

Control percent survival

%

%

%

Other (describe)

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Chronic:

NOEC	%	%	%
IC ₂₅	%	%	%
Control percent survival	%	%	%
Other (describe)			

m. Quality Control/Quality Assurance.

Is reference toxicant data available?			
Was reference toxicant test within acceptable bounds?			
What date was reference toxicant test run (MM/DD/YYYY)?	/ /	/ /	/ /
Other (describe)			

E.3. Toxicity Reduction Evaluation. Is the treatment works involved in a Toxicity Reduction Evaluation?

Yes No

If yes, describe: _____

E.4. Summary of Submitted Biomonitoring Test Information. If you have submitted biomonitoring test information, or information regarding the cause of toxicity, within the past four and one-half years, provide the dates the information was submitted to the permitting authority and a summary of the results.

Date submitted: ____/____/____ (MM/DD/YYYY)

Summary of results: (see instructions)

Please see list of previously submitted WET results in attachment "Part E – WET Test Submittal Dates"

**END OF PART E.
REFER TO THE APPLICATION OVERVIEW TO DETERMINE WHICH OTHER PARTS OF FORM
2A YOU MUST COMPLETE.**

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
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SUPPLEMENTAL APPLICATION INFORMATION

PART F. INDUSTRIAL USER DISCHARGES AND RCRA/CERCLA WASTES

All treatment works receiving discharges from significant industrial users or which receive RCRA, CERCLA, or other remedial wastes must complete part F.

GENERAL INFORMATION:

F.1. Pretreatment program. Does the treatment works have, or is subject to an approved pretreatment program?

Yes No

F.2. Number of Significant Industrial Users (SIUs) and Categorical Industrial Users (CIUs). Provide the number of each of the following types of industrial users that discharge to the treatment works.

a. Number of non-categorical SIUs. 11

b. Number of CIUs. 10

SIGNIFICANT INDUSTRIAL USER INFORMATION::

Supply the following information for each SIU. If more than one SIU discharges to the treatment works, copy questions F.3 through F.8 and provide the information requested for each SIU.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Ametech
Mailing Address: 7720 Hardeson Road, Suite B
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Metal finishing of sheet metal parts and enclosures

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Enclosures and parts for electronics industry
Raw material(s): Sheet metal

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

400 gpd (_____ continuous or X intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

140 gpd (X continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

Metal Finishing, CFR 40 433.17

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

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F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Umbra Cuscinetti, Inc.

Mailing Address: 2916 100th Street S.W.

Everett, WA 98204

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Metalfinishing of airplane parts and dye testing

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Manufacture of airplane parts

Raw material(s): Metal bars

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

1000 gpd (_____ continuous or X _____ intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

_____ gpd (_____ continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

Metal finishing, CFR 40 433.17

note: discharge permit issued 8-1-2013

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

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F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Achilles USA
Mailing Address: 1407 80th Street SW
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Extrusion, calendaring, and lamination of PVC films

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): PVC film
Raw material(s): PVC granules

F.6. Flow Rate.

- a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
16000 gpd (continuous or intermittent)
- b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
7000 gpd (continuous or intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

- a. Local limits Yes No
b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

Plastics molding and forming, CFR 40 463.25

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

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F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Bluestreak Finishers, Ltd.
Mailing Address: 1520 80th Street SW
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Anodizing, plating, and NDT penetrant testing of aluminum parts

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Painted and/or anodized aluminum parts and assemblies
Raw material(s): Aluminum parts and assemblies

F.6. Flow Rate.

- a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
2800 gpd (_____ continuous or X _____ intermittent)
- b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
600 gpd (X _____ continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

- a. Local limits Yes No
b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

Metal finishing, CFR 40 433.17

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
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F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Boeing Commercial Airplanes, Everett Site

Mailing Address: PO Box 3707, MC OP-88
Seattle, WA 98124

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

See Boeing "Attachment 5 – Process Water Sources" following this sheet

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Commercial Aircraft

Raw material(s): Metals, composite materials, engines, assemblies

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

50,000 gpd (continuous or intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

600,000 gpd (continuous or intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

Metal Finishing, CFR 40 433.17

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Dura Coatings
Mailing Address: 6700 Hardeson Road, Suite 101
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Powder Coating – “Zero Discharge Permit”

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Powder Coated Materials
Raw material(s): _____

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

0 gpd (_____ continuous or _____ intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

700 gpd (_____ continuous or X intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

Metal Finishing, CFR 40 433.17

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Jamco America Inc.
Mailing Address: 1018 80th Street SW
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Anodizing and water jet cutting

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Aircraft interior assemblies
Raw material(s): Aluminum, steel, and composite panels

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

150 gpd (_____ continuous or X intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

700 gpd (_____ continuous or X intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

- a. Local limits Yes No
b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

Metal Finishing, CFR 40 433.17

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: The Railmakers NW
Mailing Address: 2944 Cedar Street
Everett, WA 98201

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Electropolishing

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Metal products, primarily boat handrails
Raw material(s): Steel and stainless steel

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

40 gpd (_____ continuous or X intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

500 gpd (_____ continuous or X intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

Metal Finishing, CFR 40 433.17

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
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F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Stockpot Incorporated
Mailing Address: 1200 Merrill Creek Parkway
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Thawing and cooking food products

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Fresh soups and side dishes
Raw material(s): Meats, vegetables, dairy, oils

F.6. Flow Rate.

- a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
180,000 gpd (continuous or intermittent)
- b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
150,000 gpd (continuous or intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

- a. Local limits Yes No
- b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: SNBL USA

Mailing Address: 6605 Merrill Creek Parkway
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Animal cage cleaning, habitat cleaning, necropsy, analytical lab

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): None (research facility)

Raw material(s): Animal food

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

8000 gpd (continuous or intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

30000 gpd (continuous or intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Port Chatham - Trident Everett
Mailing Address: 5303 Shilshole Ave NW
Seattle, WA 98107

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Fish thawing, skinning, boning, curing, smoking, canning, and packaging

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Fish; canned, cured and smoked
Raw material(s): Fish

F.6. Flow Rate.

- a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
35,000 gpd (continuous or intermittent)
- b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
130,000 gpd (continuous or intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

- a. Local limits Yes No
- b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Airport Road Transfer Station (Snohomish County)
Mailing Address: 2930 Wetmore Ave, Suite 101
Everett, WA 98201

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Rubbish collection, compaction, and washdown

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Rubbish collection and recycling

Raw material(s): _____

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

5000 gpd (continuous or _____ intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

_____ gpd (_____ continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
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F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Naval Station Everett
Mailing Address: 2000 West Marine View Drive
Everett, WA 98207

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Naval ship bilge water, compensatory/ballast water and support activities

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): N/A

Raw material(s): _____

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

12,000 gpd (_____ continuous or intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

_____ gpd (_____ continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

On July 13, 2011, Naval Station Everett discharged approximately 7000 gallons of fuel oil to the City of Everett's Sewer System. This discharge interfered with Water Pollution Control Facility treatment processes and required a cleanup response with vector trucks, absorbent booms and spill pads to remove as much oil as possible from the primary clarifier facility and the aerated lagoon cells.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Merrill Creek Operations Base – Community Transit

Mailing Address: 7100 Hardeson Road
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Steam bay, bus wash, fuel island, parts cleaner

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): N/A – Transit Bus Operations Base

Raw material(s):

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

5800 gpd (X) continuous or intermittent

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

gpd () continuous or intermittent

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits (X) Yes () No

b. Categorical pretreatment standards () Yes (X) No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

() Yes (X) No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Kasch Park Operations Base – Community Transit
Mailing Address: 7100 Hardeson Road
Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Steam bay, bus wash, fuel island, parts cleaner

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): N/A – Transit Bus Operations Base

Raw material(s): _____

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

1000 gpd (continuous or _____ intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

_____ gpd (_____ continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Overall Laundry Services (Aramark)
Mailing Address: PO Box 9040
Everett, WA 98206-9040

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Industrial Laundry

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Laundry

Raw material(s): Soiled uniforms and other laundry items

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

90,000 gpd (continuous* or _____ intermittent) *during work hours

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

_____ gpd (_____ continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
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F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Everett Landfill and Tire Fire Site (City of Everett)

Mailing Address: 3200 Cedar Street
Everett, WA 98201

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Leachate from closed municipal landfill site

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): N/A

Raw material(s): _____

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

20,000 gpd (continuous or _____ intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

_____ gpd (_____ continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Cathcart Sanitary Landfill
Mailing Address: 8915 Cathcart Way
Snohomish, WA 98296

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Leachate from closed landfill. Vector decant leachate

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Leachate and drainage
Raw material(s): _____

F.6. Flow Rate.

- a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
87,000 gpd (continuous or intermittent)* *Seasonal - may be intermittent in Summer
- b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.
400 gpd (_____ continuous or _____ intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

- a. Local limits Yes No
- b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

F.3. Significant Industrial User Information. Provide the name and address of each SIU discharging to the treatment works. Submit additional pages as necessary.

Name: Cintas Corporation

Mailing Address: 6400 Merrill Creek Parkway

Everett, WA 98203

F.4. Industrial Processes. Describe all the industrial processes that affect or contribute to the SIU's discharge.

Industrial Laundry

F.5. Principal Product(s) and Raw Material(s). Describe all of the principal processes and raw materials that affect or contribute to the SIU's discharge.

Principal product(s): Laundry

Raw material(s): Soiled uniforms, mats, towels, and other laundry items

F.6. Flow Rate.

a. Process wastewater flow rate. Indicate the average daily volume of process wastewater discharge into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

55,000 gpd (_____ continuous or X intermittent)

b. Non-process wastewater flow rate. Indicate the average daily volume of non-process wastewater flow discharged into the collection system in gallons per day (gpd) and whether the discharge is continuous or intermittent.

6,500 gpd (_____ continuous or X intermittent)

F.7. Pretreatment Standards. Indicate whether the SIU is subject to the following:

a. Local limits Yes No

b. Categorical pretreatment standards Yes No

If subject to categorical pretreatment standards, which category and subcategory?

F.8. Problems at the Treatment Works Attributed to Waste Discharge by the SIU. Has the SIU caused or contributed to any problems (e.g., upsets, interference) at the treatment works in the past three years?

Yes No If yes, describe each episode.

FACILITY NAME AND PERMIT NUMBER:

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RCRA HAZARDOUS WASTE RECEIVED BY TRUCK, RAIL, OR DEDICATED PIPELINE:

F.9. RCRA Waste. Does the treatment works receive or has it in the past three years received RCRA hazardous waste by truck, rail or dedicated pipe?

Yes No (go to F.12)

F.10 Waste transport. Method by which RCRA waste is received (check all that apply):

Truck Rail Dedicated Pipe

F.11 Waste Description. Give EPA hazardous waste number and amount (volume or mass, specify units).

<u>EPA Hazardous Waste Number</u>	<u>Amount</u>	<u>Units</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

CERCLA (SUPERFUND) WASTEWATER, RCRA REMEDIATION/CORRECTIVE ACTION WASTEWATER, AND OTHER REMEDIAL ACTIVITY WASTEWATER:

F.12 Remediation Waste. Does the treatment works currently (or has it been notified that it will) receive waste from remedial activities?

Yes (complete F.13 through F.15.) No

F.13 Waste Origin. Describe the site and type of facility at which the CERCLA/RCRA/or other remedial waste originates (or is excepted to originate in the next five years).

F.14 Pollutants. List the hazardous constituents that are received (or are expected to be received). Include data on volume and concentration, if known. (Attach additional sheets if necessary.)

F.15 Waste Treatment.

a. Is this waste treated (or will be treated) prior to entering the treatment works?

Yes No

If yes, describe the treatment (provide information about the removal efficiency):

b. Is the discharge (or will the discharge be) continuous or intermittent?

Continuous Intermittent If intermittent, describe discharge schedule.

**END OF PART F.
REFER TO THE APPLICATION OVERVIEW TO DETERMINE WHICH OTHER PARTS OF FORM
2A YOU MUST COMPLETE**

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

SUPPLEMENTAL APPLICATION INFORMATION

PART G. COMBINED SEWER SYSTEMS

If the treatment works has a combined sewer system, complete Part G.

G.1. System Map. Provide a map indicating the following: (may be included with Basic Application Information)

- a. All CSO discharge points.
- b. Sensitive use areas potentially affected by CSOs (e.g., beaches, drinking water supplies, shellfish beds, sensitive aquatic ecosystems, and outstanding natural resource waters).
- c. Waters that support threatened and endangered species potentially affected by CSOs.

G.2. System Diagram. Provide a diagram, either in the map provided in G.1 or on a separate drawing, of the combined sewer collection system that includes the following information.

- a. Location of major sewer trunk lines, both combined and separate sanitary.
- b. Locations of points where separate sanitary sewers feed into the combined sewer system.
- c. Locations of in-line and off-line storage structures.
- d. Locations of flow-regulating devices.
- e. Locations of pump stations.

CSO OUTFALLS:

Complete questions G.3 through G.6 once for each CSO discharge point.

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
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Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Puget Sound Outfall No. 1
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
48.000415 -122.223469
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 26 ft.
- d. Depth below surface (if applicable) 5.7 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 30.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
6 events (actual or approx.)
- b. Give the average duration per CSO event.
0.6 hours (actual or approx.)
- c. Give the average volume per CSO event.
0.04 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
0.13 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Port Gardner Bay
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-PS-0030
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
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Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Puget Sound Outfall No. 2
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.998904 -122.216061
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 180 ft.
- d. Depth below surface (if applicable) 9.1 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 30.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
0 events (actual or approx.)
- b. Give the average duration per CSO event.
0 hours (actual or approx.)
- c. Give the average volume per CSO event.
0 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
NA Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Port Gardner Bay
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-PS-0030
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Puget Sound Outfall No. 3
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.997053 -122.214166
(Latitude) (Longitude)
- c. Distance from shore (if applicable) Unknown ft.
- d. Depth below surface (if applicable) Unknown ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 30.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
0 events (actual or approx.)
- b. Give the average duration per CSO event.
0 hours (actual or approx.)
- c. Give the average volume per CSO event.
0 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
NA Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Port Gardner Bay
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-PS-0030
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Puget Sound Outfall No. 4
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.984358 -122.219653
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 0 ft.
- d. Depth below surface (if applicable) 0 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 48.3 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
4 events (actual or approx.)
- b. Give the average duration per CSO event.
0.1 hours (actual or approx.)
- c. Give the average volume per CSO event.
0.005 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
0.27 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Port Gardner Bay
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-PS-0030
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Puget Sound Outfall No. 5
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.982584 -122.218904
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 0 ft.
- d. Depth below surface (if applicable) 4 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 48.3 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
23 events (actual or approx.)
- b. Give the average duration per CSO event.
4.1 hours (actual or approx.)
- c. Give the average volume per CSO event.
0.13 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
0.40 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Port Gardner Bay
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-PS-0030
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Puget Sound Outfall No. 6
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.989464 -122.221072
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 1 ft.
- d. Depth below surface (if applicable) Unknown ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 48.3 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
64 events (actual or approx.)
- b. Give the average duration per CSO event.
16.6 hours (actual or approx.)
- c. Give the average volume per CSO event.
0.4 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
0.1 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Port Gardner Bay
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-PS-0030
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Puget Sound Outfall No. 7
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.978237 -122.222371
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 0 ft.
- d. Depth below surface (if applicable) -0.3 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 48.3 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
24 events (actual or approx.)
- b. Give the average duration per CSO event.
4.3 hours (actual or approx.)
- c. Give the average volume per CSO event.
.08 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
0.9 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Port Gardner Bay
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-PS-0030
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Snohomish River Outfall No. 1
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.995277 -122.181430
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 0 ft.
- d. Depth below surface (if applicable) 3 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 51.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
0 events (actual or approx.)
- b. Give the average duration per CSO event.
0 hours (actual or approx.)
- c. Give the average volume per CSO event.
0 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
NA Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Snohomish River
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-07-1010
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Snohomish River Outfall No. 2
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.995254 -122.181432
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 0 ft.
- d. Depth below surface (if applicable) 3 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 51.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
27 events (actual or approx.)
- b. Give the average duration per CSO event.
5.1 hours (actual or approx.)
- c. Give the average volume per CSO event.
0.2 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
0.5 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Snohomish River
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-07-1010
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Snohomish River Outfall No. 3
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.994794 -122.181279
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 5 ft.
- d. Depth below surface (if applicable) 3.4 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 51.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
0 events (actual or approx.)
- b. Give the average duration per CSO event.
0 hours (actual or approx.)
- c. Give the average volume per CSO event.
0 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
NA Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Snohomish River
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-07-1010
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Snohomish River Outfall No. 4
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.979755 -122.181949
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 8 ft.
- d. Depth below surface (if applicable) 1.5 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 51.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
30 events (actual or approx.)
- b. Give the average duration per CSO event.
7.0 hours (actual or approx.)
- c. Give the average volume per CSO event.
0.6 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
0.3 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Snohomish River
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-07-1010
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

**City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0**

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Snohomish River Outfall No. 7
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.976652 -122.187303
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 40 ft.
- d. Depth below surface (if applicable) 8.5 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 51.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
3 events (actual or approx.)
- b. Give the average duration per CSO event.
0.8 hours (actual or approx.)
- c. Give the average volume per CSO event.
0.4 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
1.0 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Snohomish River
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-07-1010
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

Complete questions G.3 through G.6 once for each CSO discharge point.

G.3 Description of Outfall.

- a. Outfall number Snohomish River Outfall No. 8
- b. Location Everett 98201
(city or town, if applicable) (Zip Code)
Snohomish WA
(County) (State)
47.970098 -122.188762
(Latitude) (Longitude)
- c. Distance from shore (if applicable) 0 ft.
- d. Depth below surface (if applicable) 9 ft.
- e. Which of the following were monitored during the last year for this CSO?
 Rainfall CSO pollutant concentrations CSO frequency
 CSO flow volume Receiving water quality
- f. How many storm events were monitored during the last year? 51.7 inches of rain in 2012

G.4. CSO Events.

- a. Give the number of CSO events in the last year.
2 events (actual or approx.)
- b. Give the average duration per CSO event.
1.6 hours (actual or approx.)
- c. Give the average volume per CSO event.
1.2 million gallons (actual or approx.)
- d. Give the minimum rainfall that caused a CSO event in the last year
1.3 Inches of rainfall

G.5. Description of Receiving Waters.

- a. Name of receiving water: Snohomish River
- b. Name of watershed/river/stream system: Snohomish River Basin
United State Soil Conservation Service 14-digit watershed code (if known): _____
- c. Name of State Management/River Basin: WA-07-1010
United States Geological Survey 8-digit hydrologic cataloging unit code (if known): _____

G.6. CSO Operations.

Describe any known water quality impacts on the receiving water caused by this CSO (e.g., permanent or intermittent beach closings, permanent or intermittent shell fish bed closings, fish kills, fish advisories, other recreational loss, or violation of any applicable State water quality standard).

Please see attachments "Part G – CSO narrative"

**END OF PART G.
REFER TO THE APPLICATION OVERVIEW TO DETERMINE WHICH OTHER PARTS OF FORM
2A YOU MUST COMPLETE.**

Attachment A

EFFLUENT CHARACTERIZATION FOR POLLUTANTS

THIS LIST INCLUDES USEPA REQUIRED POLLUTANTS (PRIORITY POLLUTANTS) AND SOME ECOLOGY PRIORITY TOXIC CHEMICALS (PBTs)

Permittees should use the following table with analytical methods and levels for effluent characterization in permit applications, and applications for permit renewal. This attachment is used in conjunction with Section V, Parts A, B, and C of EPA Application Form 2C, Parts A.12, B.6, and D of EPA application form 2A. Washington State permit applications for state permits include methods on the specific form. This attachment specifies effluent characterization requirements of the Department of Ecology. For a new application, analyze your wastewater for all parameters required by the application and any additional pollutants or groups of pollutants with an X in the left column. Existing Permittees should compile the data from last year's data for parameters routinely measured. If you are a primary industry category with effluent guidelines you may have mandatory testing requirements (see Table 2C-2 of Form 2C). If you are a municipal POTW, EPA has identified mandatory testing requirements, which depend upon the design flow (see EPA form 2A).

The objectives are to reduce the number of analytical "non-detects" in applications and to measure effluent concentrations near or below criteria values where possible at a reasonable cost. If an applicant or Permittee knows that an alternate method from 40 CFR Part 136 is sufficient to produce measurable results in its effluent, then it may use that method for analysis. If the applicant uses an alternative method, as allowed above, it must report the test method, DL, and QL with the application.

Ecology PBTs are noted in bold font.

	Pollutant & CAS No. (if available)	Recommended Analytical Protocol	Detection (DL)² µg/L unless specified	Quantitation Level (QL)³ µg/L unless specified
	CONVENTIONALS			
	Biochemical Oxygen Demand	SM5210-B		2 mg/L
	Chemical Oxygen Demand	SM5220-D		10 mg/L
	Total Organic Carbon	SM5310-B/C/D		1 mg/L
	Total Suspended Solids	SM2540-D		5 mg/L
	Total Ammonia (as N)	SM4500-NH3- GH		0.3 mg/L
	Flow	Calibrated device		
	Dissolved oxygen	4500-OC/OG		0.2 mg/L
	Temperature (max. 7-day avg.)	Analog recorder or Use micro-recording devices known as thermistors		0.2° C
	pH	SM4500-H ⁺ B	N/A	N/A
	NONCONVENTIONALS			
	Total Alkalinity	SM2320-B		5 mg/L as CaCo3
	Chlorine, Total Residual	4500 Cl G		50.0
	Color	SM2120 B/C/E		10 color unit
	Fecal Coliform	SM 9221D/E, 9222	N/A	N/A
	Fluoride (16984-48-8)	SM4500-F E	25	100
	Nitrate-Nitrite (as N)	4500-NO3- E/F/H		100
	Nitrogen, Total Kjeldahl (as N)	4500-NH3-C/E/FG		300
	Ortho-Phosphate (PO ₄ as P)	4500- PE/PF	3	10
	Phosphorus, Total (as P)	4500-PE/PF	3	10
	Oil and Grease (HEM)	1664A	1,400	5,000
	Salinity	SM2520-B		3 PSS
	Settleable Solids	SM2540 -F		100
	Sulfate (as mg/L SO ₄)	SM4110-B		200
	Sulfide (as mg/L S)	4500-S ² F/D/E/G		200

	Pollutant & CAS No. (if available)	Recommended Analytical Protocol	Detection (DL)² µg/L unless specified	Quantitation Level (QL)³ µg/L unless specified
	Sulfite (as mg/L SO ₃)	SM4500-SO3B		2000
	Total dissolved solids	SM2540 C		20 mg/L
	Total Hardness	2340B		200 as CaCO ₃
	Aluminum, Total (7429-90-5)	200.8	2.0	10
	Barium Total (7440-39-3)	200.8	0.5	2.0
	BTEX (benzene +toluene + ethylbenzene + m,o,p xylenes)	EPA SW 846 8021/8260	1	2
	Boron Total (7440-42-8)	200.8	2.0	10.0
	Cobalt, Total (7440-48-4)	200.8	0.05	0.25
	Iron, Total (7439-89-6)	200.7	12.5	50
	Magnesium, Total (7439-95-4)	200.7	10	50
	Molybdenum, Total (7439-98-7)	200.8	0.1	0.5
	Manganese, Total (7439-96-5)	200.8	0.1	0.5
	NWTPH Dx ⁴	Ecology NWTPH Dx	250	250
	NWTPH Gx ⁵	Ecology NWTPH Gx	250	250
	Tin, Total (7440-31-5)	200.8	0.3	1.5
	Titanium, Total (7440-32-6)	200.8	0.5	2.5
	METALS, CYANIDE & TOTAL PHENOLS			
	Antimony, Total (7440-36-0)	200.8	0.3	1.0
	Arsenic, Total (7440-38-2)	200.8	0.1	0.5
	Beryllium, Total (7440-41-7)	200.8	0.1	0.5
	Cadmium, Total (7440-43-9)	200.8	0.05	0.25
	Chromium (hex) dissolved (18540-29-9)	SM3500-Cr EC	0.3	1.2
	Chromium, Total (7440-47-3)	200.8	0.2	1.0
	Copper, Total (7440-50-8)	200.8	0.4	2.0
	Lead, Total (7439-92-1)	200.8	0.1	0.5
	Mercury, Total (7439-97-6)	1631E	0.0002	0.0005
	Nickel, Total (7440-02-0)	200.8	0.1	0.5
	Selenium, Total (7782-49-2)	200.8	1.0	1.0
	Silver, Total (7440-22-4)	200.8	0.04	0.2
	Thallium, Total (7440-28-0)	200.8	0.09	0.36
	Zinc, Total (7440-66-6)	200.8	0.5	2.5
	Cyanide, Total (57-12-5)	335.4	2	10
	Cyanide, Weak Acid Dissociable	SM4500-CN I	2	10
	Cyanide, Free Amenable to Chlorination (Available Cyanide)	SM4500-CN G	5	10
	Phenols, Total	EPA 420.1		50
	DIOXIN			
	2,3,7,8-Tetra-Chlorodibenzo-P-Dioxin (176-40-16)	1613B	1.3 pg/L	5 pg/L
	VOLATILE COMPOUNDS			
	Acrolein (107-02-8)	624	5	10
	Acrylonitrile (107-13-1)	624	1.0	2.0
	Benzene (71-43-2)	624	1.0	2.0
	Bromoform (75-25-2)	624	1.0	2.0
	Carbon tetrachloride (56-23-5)	624/601 or SM6230B	1.0	2.0
	Chlorobenzene (108-90-7)	624	1.0	2.0

	Pollutant & CAS No. (if available)	Recommended Analytical Protocol	Detection (DL) ² µg/L unless specified	Quantitation Level (QL) ³ µg/L unless specified
	Chloroethane (75-00-3)	624/601	1.0	2.0
	2-Chloroethylvinyl Ether (110-75-8)	624	1.0	2.0
	Chloroform (67-66-3)	624 or SM6210B	1.0	2.0
	Dibromochloromethane (124-48-1)	624	1.0	2.0
	1,2-Dichlorobenzene (95-50-1)	624	1.9	7.6
	1,3-Dichlorobenzene (541-73-1)	624	1.9	7.6
	1,4-Dichlorobenzene (106-46-7)	624	4.4	17.6
	Dichlorobromomethane (75-27-4)	624	1.0	2.0
	1,1-Dichloroethane (75-34-3)	624	1.0	2.0
	1,2-Dichloroethane (107-06-2)	624	1.0	2.0
	1,1-Dichloroethylene (75-35-4)	624	1.0	2.0
	1,2-Dichloropropane (78-87-5)	624	1.0	2.0
	1,3-dichloropropylene (mixed isomers) (542-75-6) ⁶	624	1.0	2.0
	Ethylbenzene (100-41-4)	624	1.0	2.0
	Methyl bromide (74-83-9) (Bromomethane)	624/601	5.0	10.0
	Methyl chloride (74-87-3) (Chloromethane)	624	1.0	2.0
	Methylene chloride (75-09-2)	624	5.0	10.0
	1,1,2,2-Tetrachloroethane (79-34-5)	624	1.9	2.0
	Tetrachloroethylene (127-18-4)	624	1.0	2.0
	Toulene (108-88-3)	624	1.0	2.0
	1,2-Trans-Dichloroethylene (156-60-5) (Ethylene dichloride)	624	1.0	2.0
	1,1,1-Trichloroethane (71-55-6)	624	1.0	2.0
	1,1,2-Trichloroethane (79-00-5)	624	1.0	2.0
	Trichloroethylene (79-01-6)	624	1.0	2.0
	Vinyl chloride (75-01-4)	624/SM6200B	1.0	2.0
†	ACID COMPOUNDS			
	2-Chlorophenol (95-57-8)	625	1.0	2.0
	2,4-Dichlorophenol (120-83-2)	625	0.5	1.0
	2,4-Dimethylphenol (105-67-9)	625	0.5	1.0
	4,6-dinitro-o-cresol (534-52-1) (2-methyl-4,6,-dinitrophenol)	625/1625B	1.0	2.0
	2,4 dinitrophenol (51-28-5)	625	1.0	2.0
	2-Nitrophenol (88-75-5)	625	0.5	1.0
	4-nitrophenol (100-02-7)	625	0.5	1.0
	Parachlorometa cresol (59-50-7) (4-chloro-3-methylphenol)	625	1.0	2.0
	Pentachlorophenol (87-86-5)	625	0.5	1.0
	Phenol (108-95-2)	625	2.0	4.0
	2,4,6-Trichlorophenol (88-06-2)	625	2.0	4.0
†	BASE/NEUTRAL COMPOUNDS (compounds in bold are Ecology PBTs)			
	Acenaphthene (83-32-9)	625	0.2	0.4
	Acenaphthylene (208-96-8)	625	0.3	0.6
	Anthracene (120-12-7)	625	0.3	0.6
	Benzidine (92-87-5)	625	12	24
	Benzyl butyl phthalate (85-68-7)	625	0.3	0.6
	Benzo(a)anthracene (56-55-3)	625	0.3	0.6
	Benzo(b)fluoranthene (3,4-benzofluoranthene) (205-99-2) ⁷	610/625	0.8	1.6
	Benzo(j)fluoranthene (205-82-3)⁷	625	0.5	1.0

	Pollutant & CAS No. (if available)	Recommended Analytical Protocol	Detection (DL) ² µg/L unless specified	Quantitation Level (QL) ³ µg/L unless specified
	Benzo(k)fluoranthene (11,12-benzofluoranthene) (207-08-9) ⁷	610/625	0.8	1.6
	Benzo(r,s,t)pentaphene (189-55-9)	625	0.5	1.0
	Benzo(a)pyrene (50-32-8)	610/625	0.5	1.0
	Benzo(ghi)Perylene (191-24-2)	610/625	0.5	1.0
	Bis(2-chloroethoxy)methane (111-91-1)	625	5.3	21.2
	Bis(2-chloroethyl)ether (111-44-4)	611/625	0.3	1.0
	Bis(2-chloroisopropyl)ether (39638-32-9)	625	0.3	0.6
	Bis(2-ethylhexyl)phthalate (117-81-7)	625	0.1	0.5
	4-Bromophenyl phenyl ether (101-55-3)	625	0.2	0.4
	2-Chloronaphthalene (91-58-7)	625	0.3	0.6
	4-Chlorophenyl phenyl ether (7005-72-3)	625	0.3	0.5
	Chrysene (218-01-9)	610/625	0.3	0.6
	Dibenzo (a,j)acridine (224-42-0)	610M/625M	2.5	10.0
	Dibenzo (a,h)acridine (226-36-8)	610M/625M	2.5	10.0
	Dibenzo(a-h)anthracene (53-70-3)(1,2,5,6-dibenzanthracene)	625	0.8	1.6
	Dibenzo(a,e)pyrene (192-65-4)	610M/625M	2.5	10.0
	Dibenzo(a,h)pyrene (189-64-0)	625M	2.5	10.0
	3,3-Dichlorobenzidine (91-94-1)	605/625	0.5	1.0
	Diethyl phthalate (84-66-2)	625	1.9	7.6
	Dimethyl phthalate (131-11-3)	625	1.6	6.4
	Di-n-butyl phthalate (84-74-2)	625	0.5	1.0
	2,4-dinitrotoluene (121-14-2)	609/625	0.2	0.4
	2,6-dinitrotoluene (606-20-2)	609/625	0.2	0.4
	Di-n-octyl phthalate (117-84-0)	625	0.3	0.6
	1,2-Diphenylhydrazine (as Azobenzene) (103-33-3)	1625B	5.0	20
	Fluoranthene (206-44-0)	625	0.3	0.6
	Fluorene (86-73-7)	625	0.3	0.6
	Hexachlorobenzene (118-74-1)	612/625	0.3	0.6
	Hexachlorobutadiene (87-68-3)	625	0.5	1.0
	Hexachlorocyclopentadiene (77-47-4)	1625B/625	0.5	1.0
	Hexachloroethane (67-72-1)	625	0.5	1.0
	Indeno(1,2,3-cd)Pyrene (193-39-5)	610/625	0.5	1.0
	Isophorone (78-59-1)	625	0.5	1.0
	3-Methyl cholanthrene (56-49-5)	625	2.0	8.0
	Naphthalene (91-20-3)	625	0.3	0.6
	Nitrobenzene (98-95-3)	625	0.5	1.0
	N-Nitrosodimethylamine (62-75-9)	607/625	2.0	4.0
	N-Nitrosodi-n-propylamine (621-64-7)	607/625	0.5	1.0
	N-Nitrosodiphenylamine (86-30-6)	625	0.5	1.0
	Perylene (198-55-0)	625	1.9	7.6
	Phenanthrene (85-01-8)	625	0.3	0.6
	Pyrene (129-00-0)	625	0.3	0.6
	1,2,4-Trichlorobenzene (120-82-1)	625	0.3	0.6
1	PESTICIDES/PCBs			
	Aldrin (309-00-2)	608	0.025	0.05
	alpha-BHC (319-84-6)	608	0.025	0.05

	Pollutant & CAS No. (if available)	Recommended Analytical Protocol	Detection (DL)² µg/L unless specified	Quantitation Level (QL)³ µg/L unless specified
	beta-BHC (319-85-7)	608	0.025	0.05
	gamma-BHC (58-89-9)	608	0.025	0.05
	delta-BHC (319-86-8)	608	0.025	0.05
	Chlordane (57-74-9) ⁸	608	0.025	0.05
	4,4'-DDT (50-29-3)	608	0.025	0.05
	4,4'-DDE (72-55-9)	608	0.025	0.05
	4,4' DDD (72-54-8)	608	0.025	0.05
	Dieldrin (60-57-1)	608	0.025	0.05
	alpha-Endosulfan (959-98-8)	608	0.025	0.05
	beta-Endosulfan (33213-65-9)	608	0.025	0.05
	Endosulfan Sulfate (1031-07-8)	608	0.025	0.05
	Endrin (72-20-8)	608	0.025	0.05
	Endrin Aldehyde (7421-93-4)	608	0.025	0.05
	Heptachlor (76-44-8)	608	0.025	0.05
	Heptachlor Epoxide (1024-57-3)	608	0.025	0.05
	PCB-1242 (53469-21-9) ⁹	608	0.25	0.5
	PCB-1254 (11097-69-1)	608	0.25	0.5
	PCB-1221 (11104-28-2)	608	0.25	0.5
	PCB-1232 (11141-16-5)	608	0.25	0.5
	PCB-1248 (12672-29-6)	608	0.25	0.5
	PCB-1260 (11096-82-5)	608	0.13	0.5
	PCB-1016 (12674-11-2) ⁹	608	0.13	0.5
	Toxaphene (8001-35-2)	608	0.24	0.5

1. An X placed in this box means you must analyze for all pollutants in the group. This may be in addition to NPDES application requirements.
2. 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.
3. 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 all method-specified sample weights, volumes, and cleanup procedures have been employed. 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).
4. NWTPH Dx - Northwest Total Petroleum Hydrocarbons Diesel Extended Range – see <http://aww.ecology/programs/eap/Documents/labmanual.pdf>
5. NWTPH Gx - Northwest Total Petroleum Hydrocarbons Gasoline Extended Range – see <http://aww.ecology/programs/eap/Documents/labmanual.pdf>
6. 1, 3-dichloroproylene (mixed isomers) You may report this parameter as two separate parameters: cis-1, 3-dichloropropane (10061-01-5) and trans-1, 3-dichloropropane (10061-02-6).
7. Total Benzofluoranthenes - Because Benzo(b)fluoranthene, Benzo(j)fluoranthene and Benzo(k)fluoranthene co-elute you may report these three isomers as total benzofluoranthenes.
8. Chlordane – You may report alpha-chlordane (5103-71-9) and gamma-chlordane (5103-74-2) in place of chlordane (57-74-9). If you report alpha and gamma-chlordane, the DL/PQLs that apply are 0.025/0.050.
9. PCB 1016 & PCB 1242 – You may report these two PCB compounds as one parameter called PCB 1016/1242.

FACILITY NAME AND PERMIT NUMBER:

City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

5

BASIC APPLICATION INFORMATION

PART C. CERTIFICATION

All applicants must complete the Certification Section. Refer to instructions to determine who is an officer for the purposes of this certification. All applicants must complete all applicable sections of Form 2A, as explained in the Application Overview. Indicate below which parts of Form 2A you have completed and are submitting. By signing this certification statement, applicants confirm that they have reviewed Form 2A and have completed all sections that apply to the facility for which this application is submitted.

Indicate which parts of Form 2A you have completed and are submitting:

Basic Application Information packet

Supplemental Application Information packet:

Part D (Expanded Effluent Testing Data)

Part E (Toxicity Testing: Biomonitoring Data)

Part F (Industrial User Discharges and RCRA/CERCLA Wastes)

Part G (Combined Sewer Systems)

ALL APPLICANTS MUST COMPLETE THE FOLLOWING CERTIFICATION.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information 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.

Name and official title	<u>Ray Stephanson, Mayor</u>
Signature	<u><i>Ray Stephanson</i></u>
Telephone number	<u>(425) 257-7115</u>
Date signed	<u>9-30-2013</u>

Upon request of the permitting authority, you must submit any other information necessary to assure wastewater treatment practices at the treatment works or identify appropriate permitting requirements.

SEND COMPLETED FORMS TO:

ATTEST:
Sharon Jelle
City Clerk

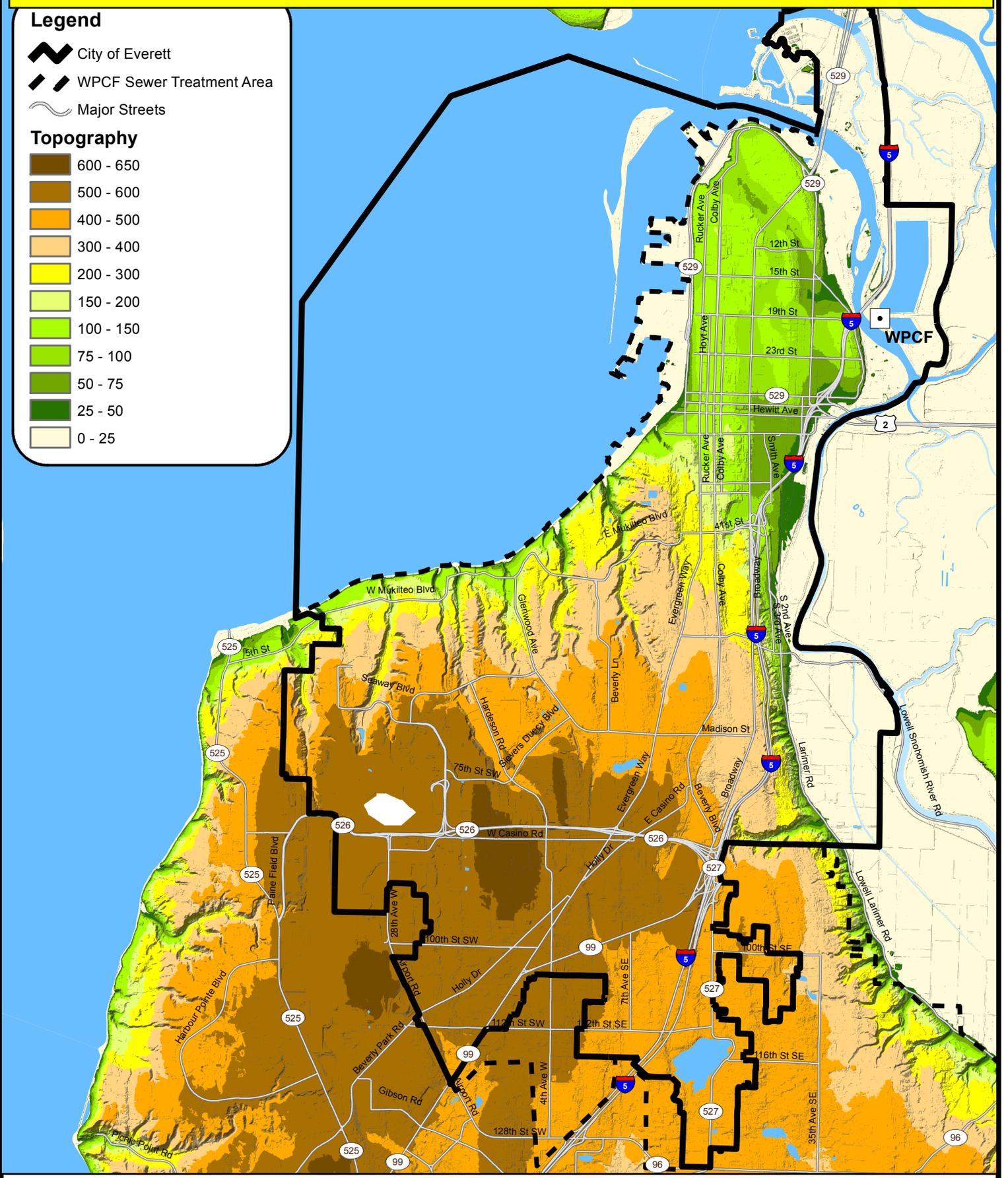
APPROVED AS TO FORM
James D. Iles
JAMES D. ILES, City Attorney

Legend

-  City of Everett
-  WPCF Sewer Treatment Area
-  Major Streets

Topography

-  600 - 650
-  500 - 600
-  400 - 500
-  300 - 400
-  200 - 300
-  150 - 200
-  100 - 150
-  75 - 100
-  50 - 75
-  25 - 50
-  0 - 25



Topography

1 in = 1 miles



Date: 9/20/2013

City of Everett Public Works Utility Mapping
 Document Path: G:\Basemaps\Vicinity\Sewer\Topography.mxd



WPCF Vicinity Map

1 inch = 250 feet

Legend

- WPCF Structure
- Sewer, Force Main
- Sewer, Gravity Main
- Storm Drain Line
- Drainage Manhole
- Drainage Catch Basin / Inlet



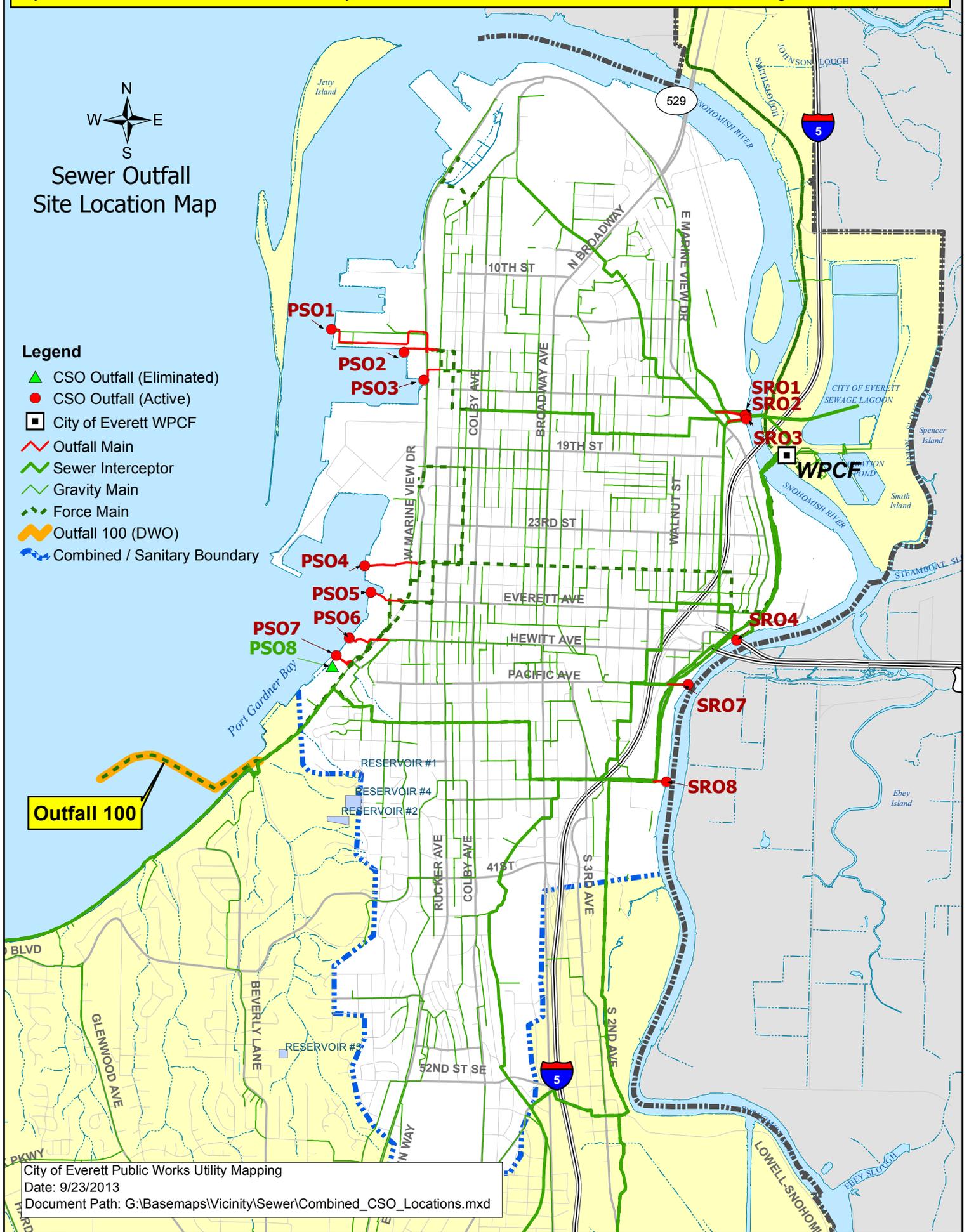
City of Everett Water Pollution Facility, NPDES Permit No. 002449-0, Part B.2.a - Unit Processes



Sewer Outfall Site Location Map

Legend

- ▲ CSO Outfall (Eliminated)
- CSO Outfall (Active)
- City of Everett WPCF
- Outfall Main
- Sewer Interceptor
- Gravity Main
- Force Main
- Outfall 100 (DWO)
- Combined / Sanitary Boundary



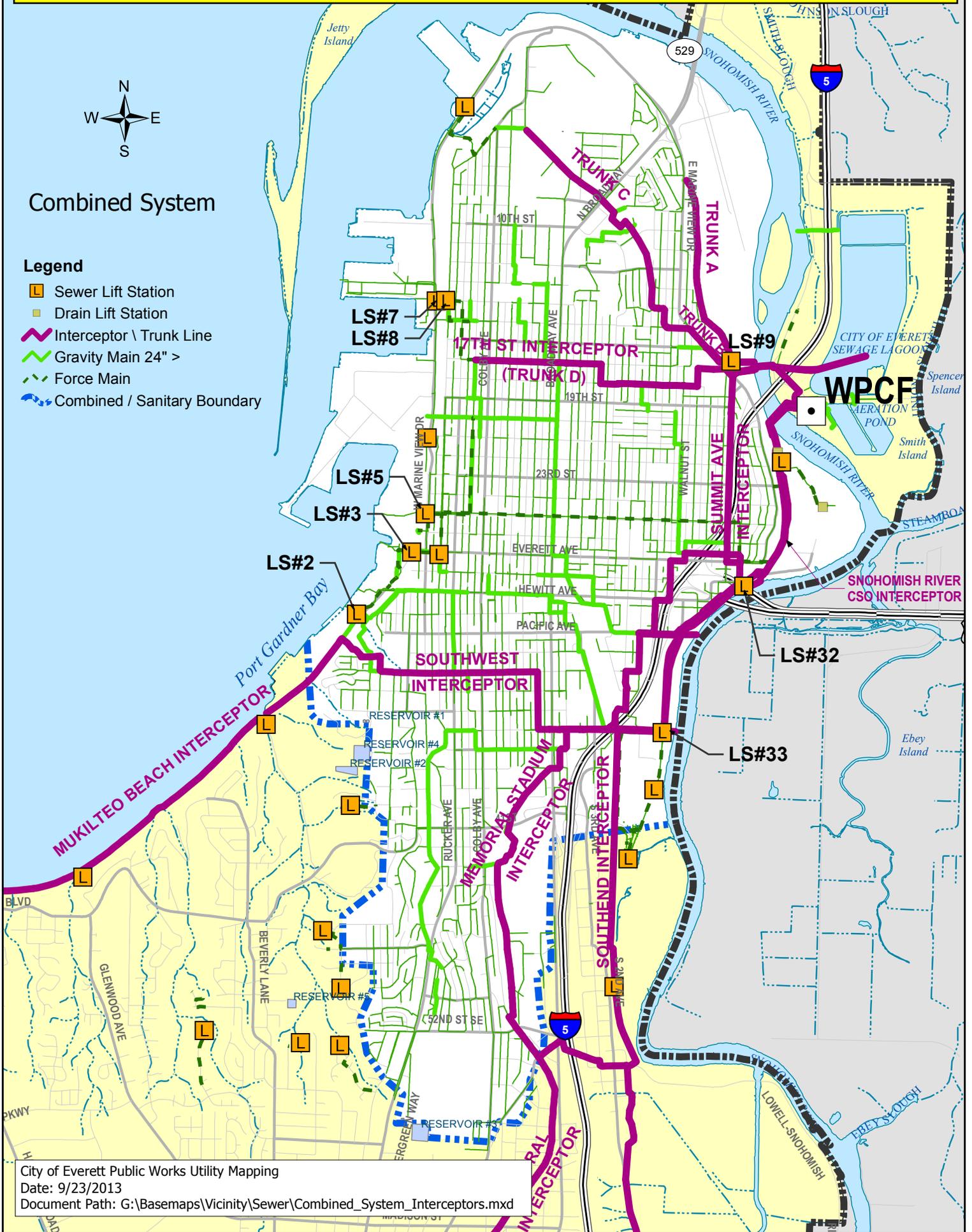
Outfall 100



Combined System

Legend

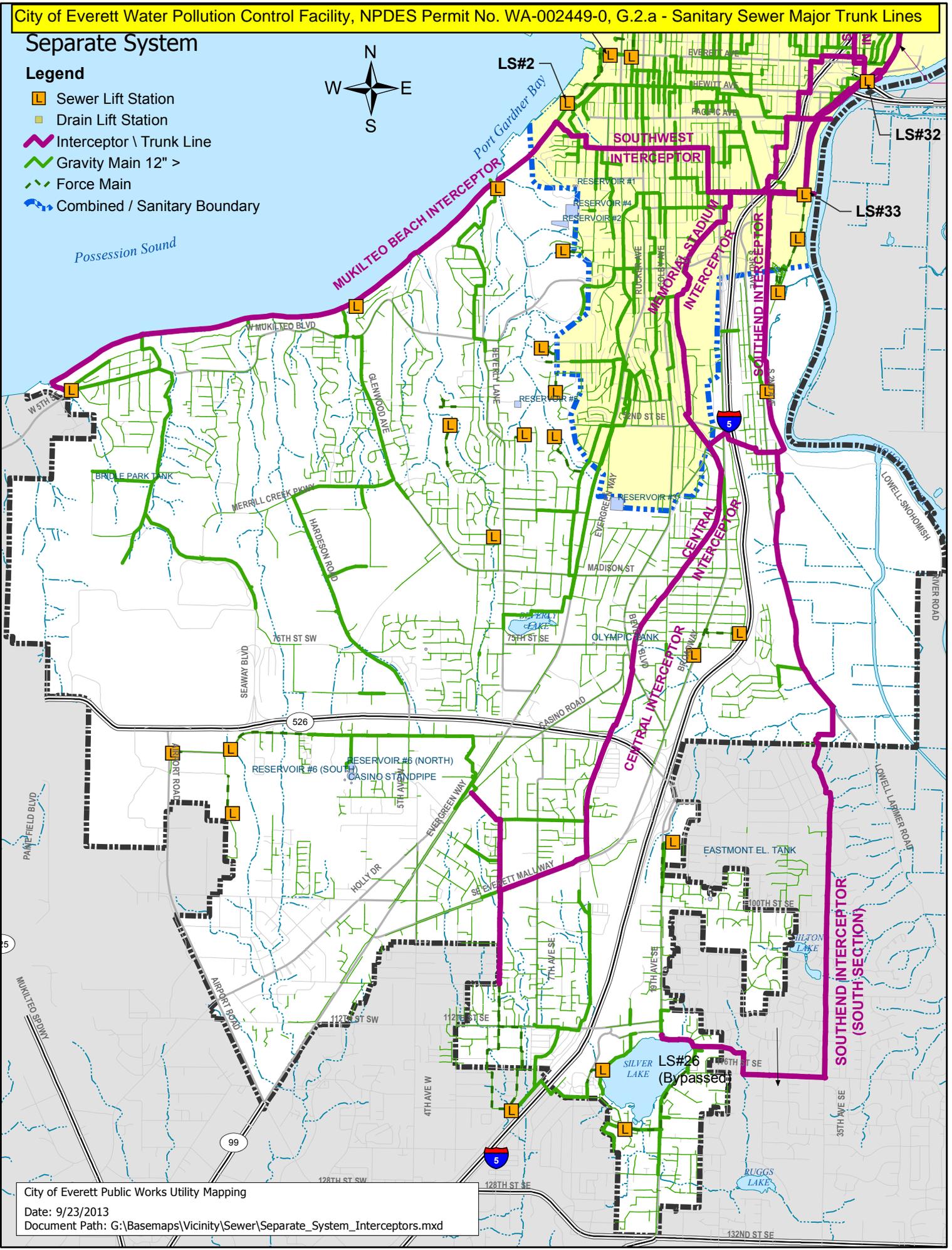
- Sewer Lift Station
- Drain Lift Station
- Interceptor \ Trunk Line
- Gravity Main 24" >
- Force Main
- Combined / Sanitary Boundary



Separate System

Legend

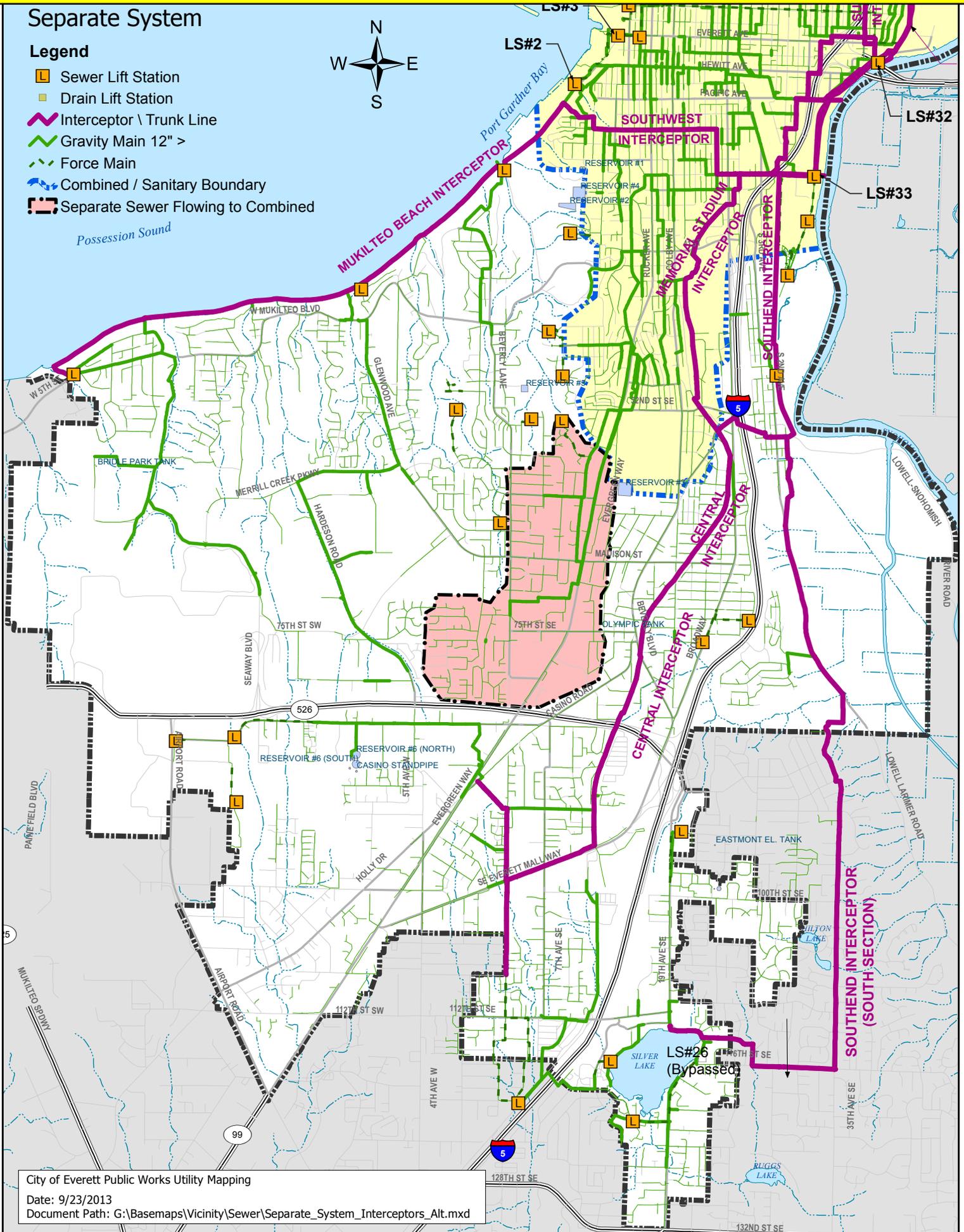
-  Sewer Lift Station
-  Drain Lift Station
-  Interceptor \ Trunk Line
-  Gravity Main 12" >
-  Force Main
-  Combined / Sanitary Boundary



Separate System

Legend

-  Sewer Lift Station
-  Drain Lift Station
-  Interceptor \ Trunk Line
-  Gravity Main 12" >
-  Force Main
-  Combined / Sanitary Boundary
-  Separate Sewer Flowing to Combined





CSO Overflow Regulators

Legend

- Overflow Regulators
- City of Everett WPCF
- Sewer Interceptor
- Gravity Main
- Force Main
- Combined / Sanitary Boundary



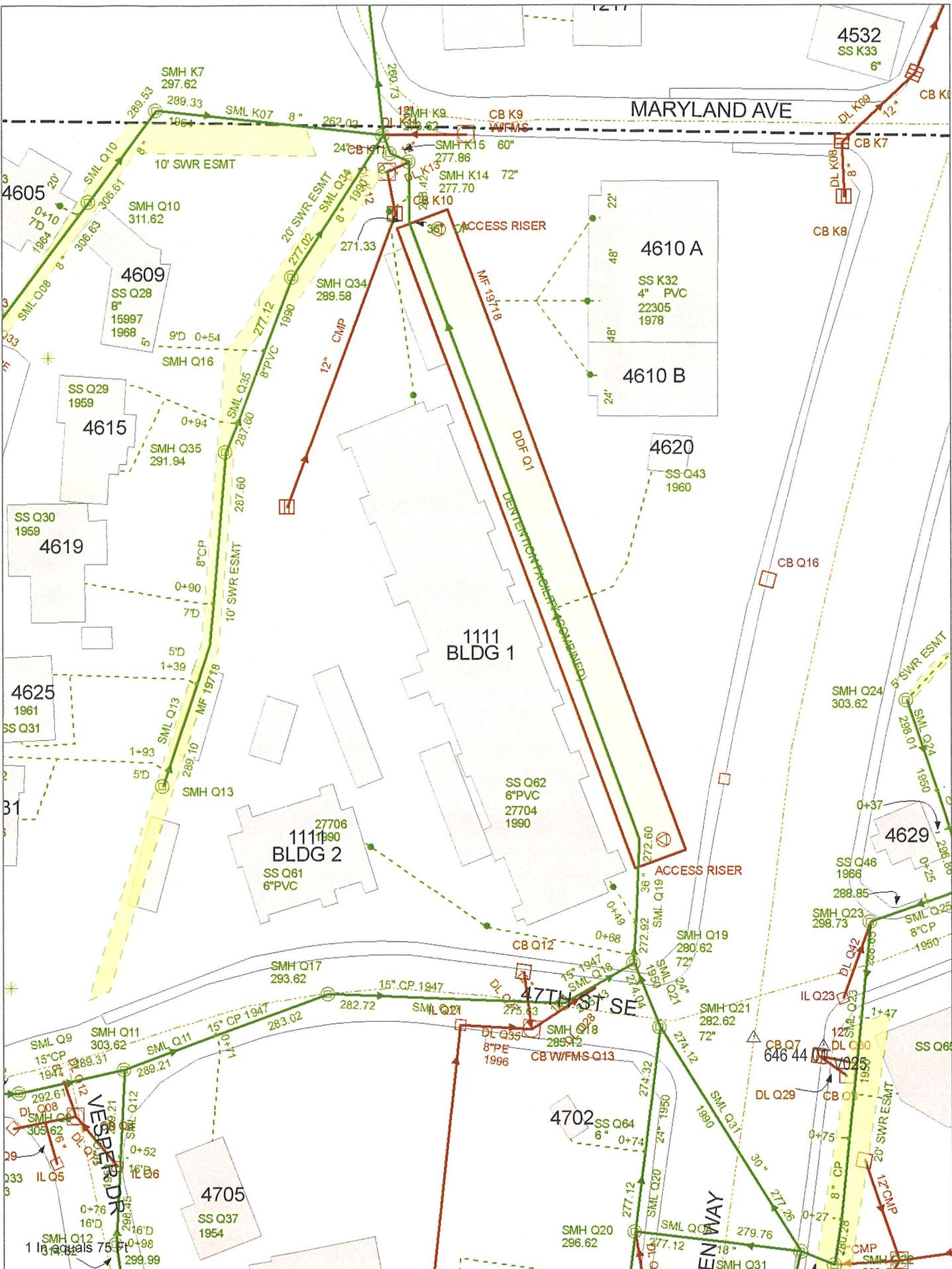


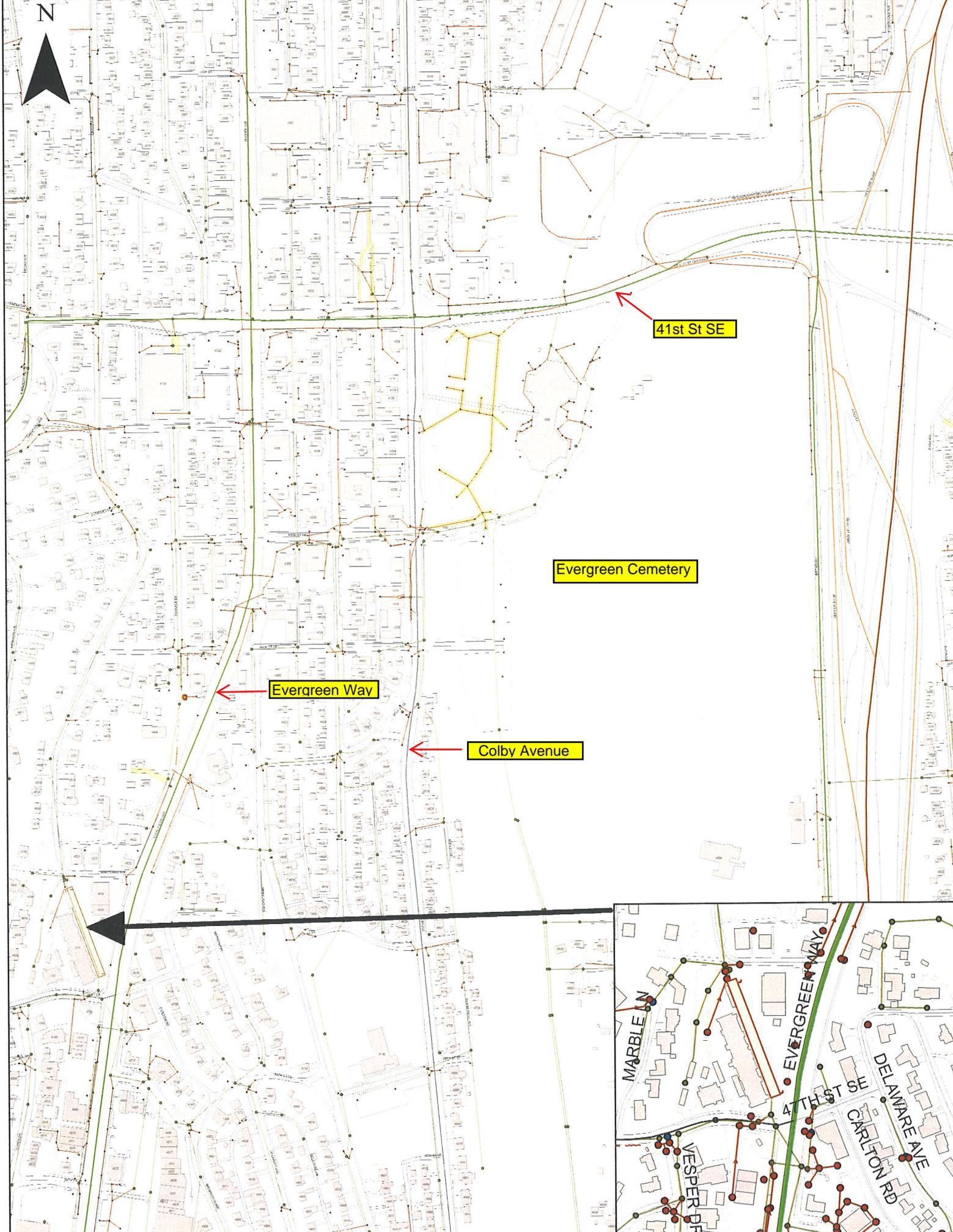
Combined Sewer Lift Stations

Legend

- Sewer Lift Station
- Drain Lift Station
- Interceptor \ Trunk Line
- Gravity Main
- Force Main
- Combined / Sanitary Boundary





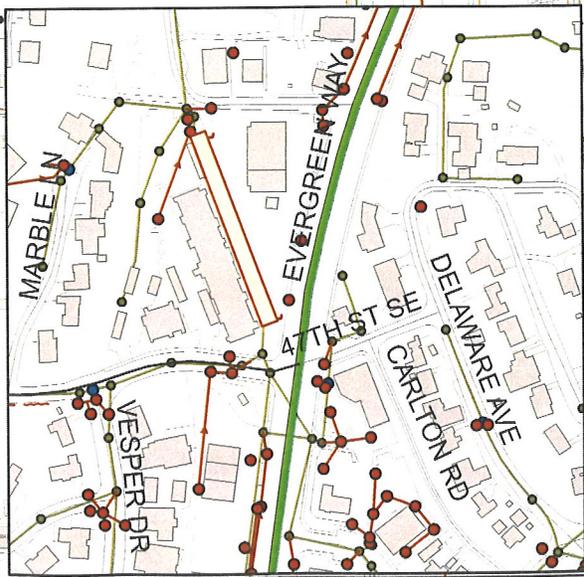


41st St SE

Evergreen Cemetery

Evergreen Way

Colby Avenue



Boeing Commercial Airplanes, Everett Site
Wastewater Discharge Permit Application

Attachment 5
Process Water Sources

Building No.	Description of Process	Average Volume (gpd)	Maximum Volume (gpd)
40-02	Jack Test Slab Washing	400	440
40-04	CS&P Booths	10	11
40-10	Paint Booth	60	66
40-11	Steam Cleaning Auto Parts	100	110
40-15	Drum Decanting	5	6
40-21	Alodine Rinse	2	2
40-22	CS&P Booth (Wing Stub Oven)	250	275
40-23	Alodine Rinse (2)	4	4
40-24	Hydraulic Mount Press Cooling	50	55
40-25	CS&P Booth (Wing Stub Oven)	350	385
40-31	Hydraulic Mount Press Cooling	50	55
40-31	Zygo Test Area	75	83
40-31	Paint Booth	30	33
40-31	Carpet Cutters	800	880
40-31	Pressure Test Bench	50	55
40-32	Alodine Rinse	2	2
40-33	CS&P Booth (Wing Stub Oven)	150	165
40-33	CS&P Booths (Wing Panel Booth)	150	165
40-33	CS&P Gun Cleaning Booth	400	440
40-34	CS&P Booths (Wing Panel Booth)	50	55
40-34	Alodine Rinse	2	2
40-37	Washing A/P Parts	2,000	2,200
40-51	Washing A/P Parts	3,000	3,300
40-56	Silkscreen Wash Booths (S) (2)	50	55
40-56	Silkscreen Wash Booths (N) (3)	100	110
40-56	Water Jet Cutter (2)	20	22
40-56	Carpet Cutter (2)	800	880
45-01	A/P Washing Prior to Painting	3,000	3,300
45-03	A/P Washing Prior to Painting	3,000	3,300
45-04	A/P Washing Prior to Painting	3,000	3,300
Flightline	A/P Washing Prior to Delivery	465	6000
Flightline	A/P Potable Water Disinfection	90	180

All processes are in the metal finishing sub-category 40 CFR 433
Production rates: 2008 = 85 airplanes/year, Current = 90 airplanes/year

Boeing Commercial Airplanes, Everett Site
Wastewater Discharge Permit Application

Attachment 5 (continued)
Non-Process Water Sources

Building No.	Description of Process	Average Volume	Maximum Volume
40-11	Auto Shop Groundwater Recovery	100	500
40-15	Contaminated Trench Water	10	250
40-56	Groundwater Extraction	10	50
40-56	Silkscreen Area Groundwater Recovery (2)	80	1,000
45-04 Yard	PCB Wastewater Treatment	275	20,000
Flightline	A/P De-icing	200	16,000
Flightline	AFFF Foam System Testing	2	400
Various	Groundwater Monitoring Purge Well	10	50
Various	Utility Vault Dewatering	100	5,000
Various	Fire Suppression System Maintenance	20	1,000
Various	Construction Excavation Dewatering	100	10,000
Various	Building and Pavement Pressure Washing	30	3,000
Various	Air Conditioning Condensate	50	100
Various	Quench Water	1	20

City of Everett Water Pollution Control Facility
 NPDES Permit No. WA-002449-0

Part B.3 – EWPCF Process Flow Schematic; Water Balance and Narrative

All flows are annual average for the year 7/1/12 through 6/30/13

Process Description	WPCF label	Flow, MGD
Primary Influent	PI	20.2
Primary Clarifier to TFI	PCT	6.4
Aerated Lagoon to TFI	ALE-1, ALE-2	9.4
Trickling Filter Influent	TFI	15.8
TF/SC recirculation to AC-1	BP	5.2
Aeration Cell 1 to AC-2	AC-1	Unknown *
Aeration Cell 2 to Oxidation pond	AC-2	12.2
Outfall 100 effluent	SCE	10.6
Outfall 015 effluent	FEN	12.2
Outfall 025 effluent	FES	No discharge**

* Aerated lagoon flow to TFI may be from port ALE-1, ALE-2, or both ports. There is no ALE flow measurement and it is not possible to calculate the amount of water entering AC-1 that is not pulled into ALE-1 that then passes to AC-2.

** Outfall O25 has been inoperable since December 2009 due to silt over the diffusers. Prior to that time, when the FES diffuser was flushed a maximum of 2.25 MG per week could be discharged. (flushing is allowed once per week at maximum flow of 18 MGD for no more than 3 hours)

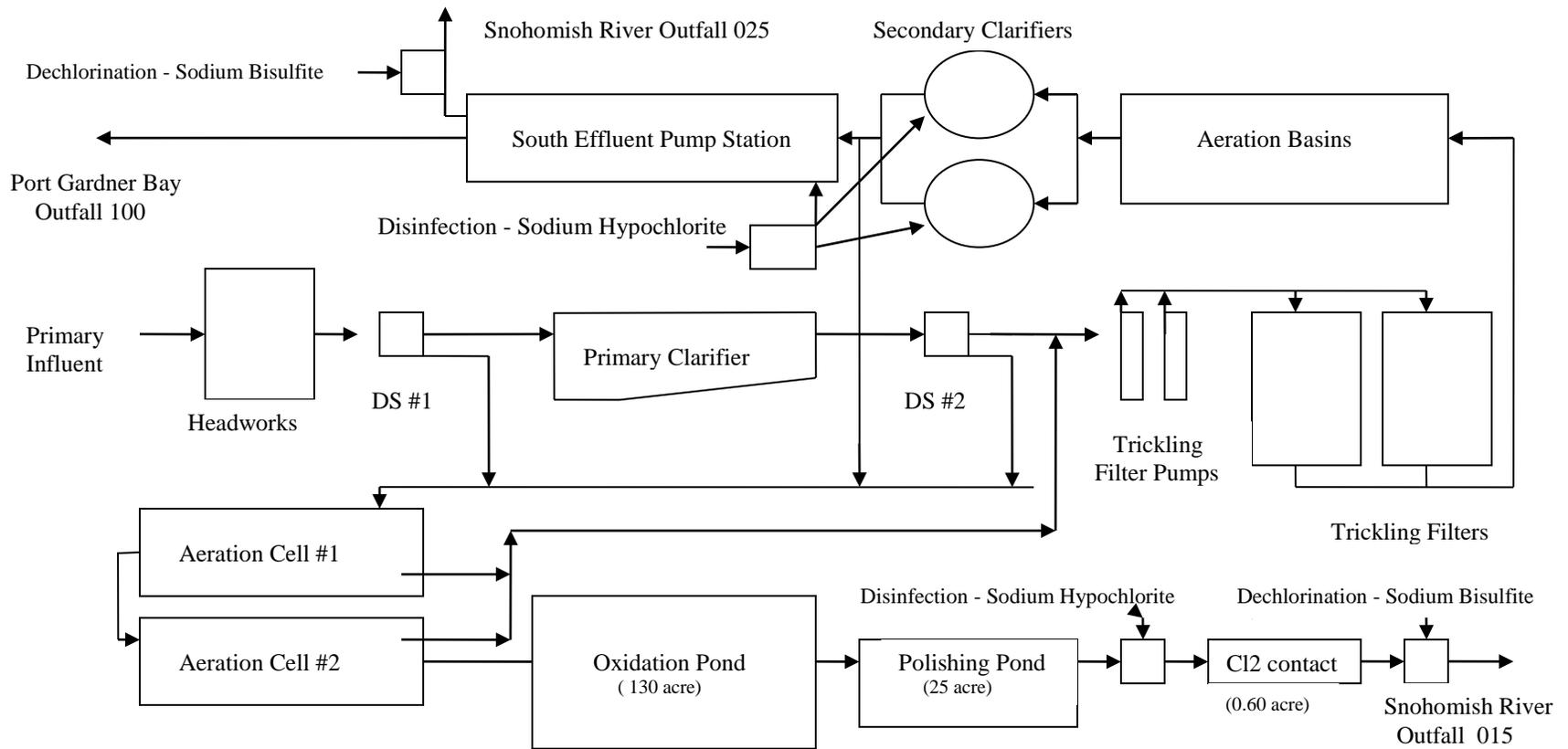
Primary Influent (PI) enters the plant through archimedes screw pumps (4) at the headworks, passes through parshall flumes (4) for flow measurement, bar screens (4) and grit tanks (2). Influent flows are highly variable from the combined collection system and the screw pumps and bar screens are set up to automatically increase the number of units in operation as PI flow increases.

DS-1 is a distribution structure containing gates that regulate flow to the primary clarifier tanks (2) and Aeration Cell 1 (AC-1).

The Primary Clarifier (PC) tanks have a nominal capacity of 50 MGD. All flow in excess of 50 MGD is routed to AC-1. Some portion of the PC effluent typically 3-6 MGD, is fed directly to the trickling filters (PCT), with the remainder of the trickling filter influent (TFI) flow fed from AC-1 and/or AC-2. The feeds from AC-1 and AC-2 to the trickling filters are known as Aerated Lagoon Effluent #1 (ALE-1) and Aerated Lagoon Effluent #2 (ALE-2).

City of Everett Water Pollution Control Facility
 NPDES Permit No. WA-002449-0

Part B.3 – EWPCF Process Flow Diagram



City of Everett Water Pollution Control Facility
NPDES Permit No. WA-002449-0

Part B.3 – EWPCF Process Flow Diagram; Water Balance and Narrative (pg 2)
continued...

The Trickling Filter/Solids Contact (TF/SC) system is rated at 21.0 MGD, 10.5 MGD per trickling filter (TF). With hydraulic capacity increased from 16 MGD to 21 MGD in the 2005 Phase A expansion, organic loading has become the limiting factor in TF/SC capacity. PCT, ALE-1, and ALE-2 are blended in varying proportions depending on the season and pond conditions to limit the organic strength. TFI flow is controlled by the number of pumps running and a "recirculation" system that sends up to 4 MGD per pump back to its wet well.

Trickling filter effluent (TFE) flows to four passes of aeration basin (AB) fitted with fine-bubble diffusers. The AB's configuration may be changed from series to parallel, and various modes such as step feed, re-aeration, or plug flow depending on desired operating conditions and influent strength. The AB's solids contact detention time is much shorter than in an activated sludge system and the main objective is enhancing flocculation to promote settling in the clarifiers.

Secondary clarifier effluent (SCE) is the NPDES permit compliance point for all EWPCF permit parameters except fecal coliform and chlorine residual because during the low-flow period the South Effluent Pump Station (SEPS) flow is a combination of WPCF and City of Marysville pumped effluent to Outfall 100. Each city is responsible to meet discharge permit requirements for flow leaving their respective facilities, but the SEPS is needed for WPCF chlorine contact time.

SCE that is not discharged is "bypassed" (BP) back to AC-1. This is not a bypass in the sense of bypassing treatment units, as this is fully treated secondary effluent, but is a recirculation within the WPCF and a way to provide additional flow through the lagoon system during dry weather.

Sodium Hypochlorite is added for disinfection in the secondary clarifiers, at the entrance to the SEPS, or both. Dechlorination with sodium bisulfite is not required for Outfall 100 discharge, but is provided when Snohomish River Outfall 025, the TF/SC emergency outfall, is flushed. Outfall 025 has not been routinely flushed since December 2009 due to silt over the diffusers. We continue to study options to restore its operation and this will be a future capital improvement.

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Part B.3 – EWPCF Process Flow Diagram; Water Balance and Narrative (pg 3)
continued...

All PI flow that is not treated and discharged to Outfall 100 passes through AC-2 into the 130 acre oxidation pond. The oxidation pond was originally 135 acres, but 5 acres at the SE corner has been filled in to create a biosolids processing and storage pad. Lagoon system flow travels from the oxidation pond to the 25 acre polishing pond, then the 0.60 acre FEN chlorine contact channel.

Sodium hypochlorite is added at the point water enters the FEN chlorine contact channel. Sodium bisulfite is added at the other end of the channel prior to Outfall 015 discharge to the Snohomish River.

Power at FEN is from the Marysville power transmission grid to the north. There is an emergency generator at Outfall 015 that provides power to close the gravity valve in a power outage to prevent discharge of unchlorinated effluent.

The TF/SC plant is fed by power transmission grids from Everett to the south and Marysville to the north. In the event one grid goes down, Snohomish PUD #1 is called to manually switch the power over to the other grid. Portable generators are also available for emergency operations at the WPCF and the Public Works Service Center in downtown Everett (3200 Cedar Street).

Part B.5 – Scheduled Improvements and Schedules of Implementation Narrative

The EWPCF influent BOD wasteload exceeded both 85% design capacity for three consecutive months and 100% design for one month in 2007. Carollo Engineers completed an engineering report for the WPCF (Revised April 2010) per WAC 173-240-060 and NPDES permit section S4.B to make plans for maintaining adequate capacity.

Interim measures to deal with the increased PI BOD concentration and loadings included adding additional aeration to both aerated lagoon cells (AC-1 and AC-2) and adding a second pipe from the primary clarifier effluent (PCE) box to AC-1. This PCE line makes it possible to send all PCE to AC-1 while simultaneously feeding the trickling filters from AC-1 and/or AC-2, or to blend any amount of PCE flow with AC-1 and/or AC-2 flow to feed the trickling filters.

The trickling filters were fitted with mechanical drives to allow a slower speed of rotation. We now scour the filter media at a slow speed every night in order to keep the biological growth fresh and prevent excessive sloughing of solids.

Sheet piling was added to AC-2 to improve the ability to retain solids and a weir gate was added at the AC-2 outlet to allow an AC-2 pond level higher than the Oxidation Pond and also to get water out of AC-2 faster during storm events.

The City has contracted with a General Contractor/Construction Manager and is currently in design to add 50% more capacity to the TF/SC plant. 60% drawings for this "Phase C" liquid stream capacity expansion have been submitted to Ecology. Construction is scheduled to begin in April 2014.

Part D – Expanded Effluent Testing Data, Narrative

Outfall 100 and Outfall 025 discharge effluent from a common source. There is no difference in the treatment provided except Outfall 025 discharge to the Snohomish River is dechlorinated with sodium bisulfite while effluent pumped to Outfall 100, a deep water marine discharge, does not require dechlorination.

Outfall 025 is maintained strictly as an emergency outfall and has not undergone routine maintenance flushing since 2009 due to silt over the diffuser risers. There was therefore no opportunity to sample for expanded effluent testing and receive data prior to preparing the NPDES permit renewal application. Per discussion with Ecology prior to the 2009 NPDES permit renewal (e-mail from Laura Fricke 10-15-08), the data reported for Outfall 100 in Parts A, B and D of Form 2a may also be considered representative for Outfall 025.

There are seven compounds that we have no data for under Method 625 base-neutral compounds in Part D that are in bold type on Form 2a, Part D, indicating they are Ecology PBT compounds. We assumed, since they are asked for in Part D, that we need to add these compounds to our testing schedule and we did this for samples collected in July, 2013.

There is also one other compound, 1,2-diphenylhydrazine, that is not reported in Part D. We do have a result for N-Nitrosodiphenylamine which according to the laboratory is spectrally identical and was not detected at the DL of 1.0 ug/L. We used a different laboratory for organics testing in July, 2013, and they will include 1,2-diphenylhydrazine in their testing.

The July samples were collected outside of the data collection window for the permit renewal application and results were not available in time to include them with the application. The results will be submitted to Ecology as soon as possible.

For many of the analyses in Part D the results from the July sampling will also be to lower detection limits than reported in the permit renewal application. We discovered our previous contract laboratory was not meeting many of the detection limits of "Attachment A" and the lab we used in July is able to meet the "Attachment A" detection limits for organics.

FACILITY NAME AND PERMIT NUMBER:

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Attachment: Part E – WET Testing Submittal Dates

Quarterly Acute Whole Effluent Toxicity (WET) testing was added to the WPCF monitoring schedule in the October, 2009, discharge permit renewal. The first required sampling was in January 2010. All test results were submitted to Ecology within 60 days of the sampling date.

Chronic testing was performed in July 2012 and January 2013 and these results have also been submitted to Ecology per Section S13.B.9 of the NPDES permit.

Outfall 100 and Outfall 015 were both sampled on each sampling date. For chronic testing, which requires multiple sampling days, the sampling date shown in the table is the last day samples were composited.

WET Sampling and Report Submittal Dates

Sampling Date	Report Submitted	Testing Performed
1-5-10	3-3-10	Acute – Fathead Minnow
4-6-10	5-18-10	Acute – Daphnid
7-7-10	8-31-10	Acute – Fathead Minnow
10-13-10	11-29-10	Acute – Daphnid
1-11-11	2-22-11	Acute – Fathead Minnow
4-5-11	5-31-11	Acute – Daphnid
7-12-11	8-1-11	Acute – Fathead Minnow
10-26-11	12-19-11	Acute – Daphnid
1-10-12	2-28-12	Acute – Fathead Minnow
4-3-12	5-29-12	Acute - Daphnid
7-12-12	9-6-12	Acute – Fathead Minnow Chronic - Topsmelt Chronic – Mysid Shrimp
10-2-12	11-26-12	Acute - Daphnid
1-18-13	3-7-13	Acute – Fathead Minnow Chronic - Topsmelt Chronic – Mysid Shrimp
4-2-13	5-23-13	Acute - Daphnid
7-10-13	8-13-13	Acute – Fathead Minnow

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Part G – Combined Sewer Overflow Narrative

G.1.b, G.1.c

Jetty Island, just to the west of PS01, PS02 and PS03 is a popular recreation beach and nature preserve served by a ferry in the summer months and accessed by private vessels year round.

The nearest areas approved by the Washington Department of Health for commercial or recreational shellfish harvest that could be potentially affected by a CSO are Gedney (Hat) Island and the Tulalip Indian Reservation north of Marysville on Possession Sound. There are other approved commercial and recreational sites on Port Susan Bay, Camano Island and Whidbey Island. The east side of Puget Sound, where the impacts of any Snohomish River or Puget Sound CSO discharges would be most immediate, is closed for all shellfish harvest south of the Tulalip Reservation.

All City of Everett CSO outfalls discharge into sensitive use areas because the Snohomish River, which discharges to Puget Sound, and Puget Sound itself as the receiving waters both contain threatened and endangered species. Listed species that could potentially be affected by a CSO include Chinook Salmon, Steelhead, Bull Trout and Orca Whale.

In addition to the NPDES application for permit renewal, other submittals due to Ecology by October 1, 2013, include a "Combined Sewer Overflow Reduction Plan Amendment" and "Combined Sewer Overflow Reduction monitoring improvements and proposed corrections". More detailed information on CSO program activities and potential collection system improvements will be included in these documents.