VPDES Sewage Sludge Permit Application for Permit Reissuance

Instructions

WHO MUST SUBMIT THE APPLICATION - All facilities with a current VPDES Permit that authorizes the discharge of treated sewage wastewater that are applying for reissuance must complete and submit this application.

Part 1 is general information to be provided by all facilities.

Part 2 must be completed by all facilities that generate Class A or Class B biosolids that are land applied.

| | Part 3 must be completed by all facilities that land apply Class B biosolids. Part 1 – Sludge Disposal Management (To be completed by all facilities) | | | | | |
|------------------------------------|--|--|----------------|--|--|--|
| Fa | cility Name: VPDES Permit No: | | | | | |
| 1. | Shipment Off Site for Treatment or Blending Is sewage sludge from your facility sent to another facility that provides treatment or blending? If you send sewage sludge to more than one facility, attach additional sheets as necessary. Shipment off site is: The primary method of sludge disposal A back up method of sludge disposal a. Receiving Facility Name b. Receiving Facility VPDES Permit No. c. Include an acceptance letter from the Receiving Facility. d. Receiving Facility's ultimate disposal method for sewage sludge | Yes | □ No | | | |
| 2. | Disposal in a Municipal Solid Waste Landfill Is sewage sludge from your facility placed in a municipal solid waste landfill? If sewage sludge is placed on more than one municipal solid waste landfill, attach additional pages as necessary. Landfilling is: The primary method of sludge disposal A back up method of sludge disposal a. Landfill Name b. Landfill Permit No. c. Include an acceptance letter from the landfill. | Yes | □ No | | | |
| 3. | Incineration Is sewage sludge from your facility fired in a sewage sludge incinerator? Incineration is: The primary method of sludge disposal A back up method of sludge disposal a. Do you own or operate all sewage sludge incinerators in which sewage sludge from your facility is fired? If yes, provide the Air Registration No. If no, complete items b - d for each incinerator that you do not own or operate. b. Facility Name c. Air Registration No. d. Include an acceptance letter from the Incinerator. | ☐ Yes | □ No | | | |
| 4. 5. | Class A Biosolids Do you produce Class A biosolids for land application or distribution and marketing? If yes, complete Part 2. Are Class A biosolids from your facility land applied in bulk? Do you sell or give away Class A biosolids in a bag or other container for application to the land? If yes, provide the VDACS certification number? Class B Biosolids Do you produce Class B biosolids? If yes, complete Part 2. | ☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes☐ Yes | □ No □ No □ No | | | |
| 6. | Are Class B biosolids from your facility land applied under the authorization of this VPDES Permit? If yes, complete Part 3. Land Application Under a Separate Permit Are biosolids from your facility land applied under the authorization of a permit other than your VPDES Permit? Biosolids are land applied under the authorization of a DVPA permit Another VPDES Permit Out of State Complete items a - c for each VPA permit authorized to land apply biosolids from your facility. a. Permittee Name b. Permit No. | ☐ Yes☐ Yes☐ Yes | □ No □ No | | | |
| | c. Include copy of any information you provide to the Receiving VPDES or VPA Permittee to comply with the "notice information" requirement of VAC 25-31-530.F. | e and necessa | ry | | | |

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| Part 2 – Biosolids Characterization (To be completed by all facilities that generate biosolids that are land applied.) | | | | | | |
| 1. | . Have there been changes to sludge treatment processes or storage facilities since the previous permit issuance/reissuance? | Yes | ☐ No | | | |
| 2. | Do the biosolids generated under this permit that will be land applied meet one of the Class A pathogen requirements in 9 VAC25-31-710.A.3. through A.8 or Class B pathogen requirements in 9VAC25-31-710.B.1. through B.4.? | Yes | □No | | | |
| | Identify the pathogen reduction option utilized to demonstrate compliance with the pathogen reductions requirements and provide demonstrate compliance with the applicable alternative. | the data | a that | | | |
| 3. | . Do the biosolids generated under this permit that will be land applied meet one of the vector attraction reduction | Yes | □No | | | |
| | Identify the vector attraction reduction option utilized to demonstrate compliance with the vector attraction reductions requirement the data that demonstrate compliance with the applicable alternative. | ıts and p | provide | | | |
| 4. | Do the biosolids to be land applied meet the ceiling/pollutant concentrations in 9VAC25-31-540.B? | Yes | ☐ No | | | |
| 5. | (mg/kg), Total Kjeldahl Nitrogen (mg/kg), Total Phosphorus (mg/kg), Total Potassium (mg/kg), Alkalinity as CaCO ₃ (mg/kg), Arsenic (mg/kg), Cadmium (mg/kg), Copper (mg/kg), Lead (mg/kg), Mercury (mg/kg), Nickel (mg/kg), Selenium (mg/kg), Zinc (mg/kg) been submitted to DEQ? The samples shall be no more than 4½ years old and each sampling date shall be at least 1 month apart. | Yes | □ No | | | |
| Th. | If no, provide the data with this application. | | | | | |
| | Part 3 – Land Application of Class B Biosolids (To be completed by all facilities that land apply Class B biosolids | | | | | |
| | Provide to DEQ and to each locality in which biosolids are to be land applied, written evidence of financial responsibility. Evider responsibility shall be provided in accordance with 9VAC25-31-100.P.9. | | | | | |
| 2. | For each site, provide a properly completed landowner agreement for each landowner, using the most current Land Application A Biosolids Form (VPDES Sewage Sludge Permit Application Form – Attachment to Section C). | greeme | nt - | | | |
| 3. | Are any new land application fields proposed at this reissuance? | Yes | ☐ No | | | |
| | If yes, contact the DEQ Regional Office for additional submittal requirements. | | | | | |
| 4. | For the currently permitted land application fields, are the previously submitted site booklets, maps and acreage accurate. | Yes | ☐ No | | | |
| | If no, contact the DEQ Regional Office for additional submittal requirements. | | | | | |
| 5. | . Does the facility's Biosolids Management Plan on file with DEQ include the following minimum information? | Yes | ☐ No | | | |
| | a. An odor control plan that addresses the abatement of odors resulting from the storage and/or land application of biosolids. | | | | | |
| | b. A description of the transport vehicles to be used. | | | | | |
| | c. Procedures for biosolids offloading at the land application site including spill prevention, cleanup (including vehicle cleaning), field reclamation, and emergency notification and cleanup measures. | | | | | |
| | d. A description of the land application equipment including procedures for calibrating equipment to ensure uniform distribution and appropriate loading rates. | | | | | |
| | e. Procedures used to ensure that land application activities address notification requirements, signage requirements, slope restrictions, operation limitations during periods of inclement weather, soil pH requirements, buffer zone requirements, and site restrictions. | | | | | |
| | Any other information necessary to ensure compliance with the requirements of the Biosolids Program of the VPDES Peri (9VAC25-31-420 through 720). | mit Regi | ulation | | | |
| Ce | 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 | | | | | |
| | Signature | | | | | |
| | Telephone number / Email () | | | | | |
| | Date signed | | | | | |
| (Ba | Based on a review of this information, it may be necessary to submit additional information to meet other legal or technical review requirements.) | | | | | |