Compliance Maintenance Annual Report

Waukesha City

Last Updated: 5/25/2018 Reporting For: 2017

Influent Flow and Loading

1. Monthly Average Flows and (C)BOD Loadings

1.1 Verify the following monthly flows and (C)BOD loadings to your facility.

Influent No. 702	Influent Monthly Average Flow, MGD	x	Influent Monthly Average (C)BOD Concentration mg/L	x	8.34	=	Influent Monthly Average (C)BOD Loading, lbs/day
January	9.5022	x	174	x	8.34	=	13,822
February	9.0939	x	192	x	8.34	=	14,567
March	10.0741	x	279	x	8.34	=	23,482
April	14.2151	x	199	x	8.34	=	23,549
May	13.1372	x	168	x	8.34	=	18,460
June	10.8259	x	187	x	8.34	=	16,851
July	12.3778	x	211	x	8.34	=	21,735
August	8.6187	x	338	x	8.34	=	24,275
September	6.6925	x	211	x	8.34	=	11,803
October	10.4275	x	316	x	8.34	=	27,481
November	8.6049	x	392	x	8.34	=	28,130
December	7.9951	x	223	x	8.34	=	14,869

2. Maximum Monthly Design Flow and Design (C)BOD Loading

2.1 Verify the design flow and loading for your facility.

Design	Design Factor	x	%	=	% of Design
Max Month Design Flow, MGD	18.5	x	90	=	16.65
		x	100	=	18.5
Design (C)BOD, lbs/day	29653	x	90	=	26687.7
		x	100	=	29653

2.2 Verify the number of times the flow and (C)BOD exceeded 90% or 100% of design, points earned, and score:

	Months of Influent	Number of times flow was greater than 90% of	Number of times flow was greater than 100% of	Number of times (C)BOD was greater than 90% of design	Number of times (C)BOD was greater than 100% of design
January	1	0	0	0	0
February	1	0	0	0	0
March	1	0	0	0	0
April	1	0	0	0	0
May	1	0	0	0	0
June	1	0	0	0	0
July	1	0	0	0	0
August	1	0	0	0	0
September	1	0	0	0	0
October	1	0	0	1	0
November	1	0	0	1	0
December	1	0	0	0	0
Points per each		2	1	3	2
Exceedances		0	0	2	0
Points		0	0	6	0
Total Number of Points					6

6

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3. Flow Meter

3.1 Was the influent flow meter calibrated in the last year?

● Yes Enter last calibration date (MM/DD/YYYY) 12/12/2017

○ No

If No, please explain:

4. Sewer Use Ordinance

4.1 Did your community have a sewer use ordinance that limited or prohibited the discharge of excessive conventional pollutants ((C)BOD, SS, or pH) or toxic substances to the sewer from industries, commercial users, hauled waste, or residences?

● Yes

○ No

If No, please explain:

4.2 Was it necessary to enforce the ordinance?

● Yes

○ No

If Yes, please explain:

Three N.O.V.s were issued.

5. Septage Receiving

5.1 Did you have requests to receive septage at your facility?

Septic Tanks	Holding Tanks	Grease Traps
● Yes	● Yes	● Yes
○ No	○ No	○ No

5.2 Did you receive septage at your faclity? If yes, indicate volume in gallons.

Septic Tanks

● Yes 6,396,061 gallons

○ No

Holding Tanks

● Yes 7,058,579 gallons

○ No

Grease Traps

○ Yes 0 gallons

● No

5.2.1 If yes to any of the above, please explain if plant performance is affected when receiving any of these wastes.

Plant performance was not affected.

6. Pretreatment

6.1 Did your facility experience operational problems, permit violations, biosolids quality concerns, or hazardous situations in the sewer system or treatment plant that were attributable to commercial or industrial discharges in the last year?

○ Yes

● No

If yes, describe the situation and your community's response.

6.2 Did your facility accept hauled industrial wastes, landfill leachate, etc.?

- [x] Yes
- [ ] No

If yes, describe the types of wastes received and any procedures or other restrictions that were in place to protect the facility from the discharge of hauled industrial wastes.

All hauled industrial waste(including leachate)is subject to our Pretreatment Program with permitting, site inspections, testing, and monitoring.

Total Points Generated	6
Score (100 - Total Points Generated)	94
Section Grade	A

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Effluent Quality and Plant Performance (BOD/CBOD)

1. Effluent (C)BOD Results

1.1 Verify the following monthly average effluent values, exceedances, and points for BOD or CBOD

Outfall No. 001	Monthly Average Limit (mg/L)	90% of Permit Limit > 10 (mg/L)	Effluent Monthly Average (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance	90% Permit Limit Exceedance
January	10	10	0	1	0	0
February	10	10	0	1	0	0
March	10	10	0	1	0	0
April	10	10	0	1	0	0
May	10	10	1	1	0	0
June	10	10	0	1	0	0
July	8.5	8.5	0	1	0	0
August	8.5	8.5	0	1	0	0
September	8.2	8.2	0	1	0	0
October	10	10	1	1	0	0
November	10	10	0	1	0	0
December	10	10	0	1	0	0
* Equals limit if limit is <= 10						
Months of discharge/yr				12		
Points per each exceedance with 12 months of discharge					7	3
Exceedances					0	0
Points					0	0
Total number of points						0

NOTE: For systems that discharge intermittently to state waters, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge. Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is 12/6 = 2.0

1.2 If any violations occurred, what action was taken to regain compliance?

0

2. Flow Meter Calibration

2.1 Was the effluent flow meter calibrated in the last year?

● Yes — Enter last calibration date (MM/DD/YYYY): 05/01/2017

○ No

If No, please explain:

3. Treatment Problems

3.1 What problems, if any, were experienced over the last year that threatened treatment?

None

4. Other Monitoring and Limits

4.1 At any time in the past year was there an exceedance of a permit limit for any other pollutants such as chlorides, pH, residual chlorine, fecal coliform, or metals?

○ Yes

● No

If Yes, please explain:

4.2 At any time in the past year was there a failure of an effluent acute or chronic whole effluent toxicity (WET) test?

- ○ Yes
- ● No

If Yes, please explain:

4.3 If the biomonitoring (WET) test did not pass, were steps taken to identify and/or reduce source(s) of toxicity?

- ○ Yes
- ○ No
- ● N/A

Please explain unless not applicable:

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Effluent Quality and Plant Performance (Total Suspended Solids)

1. Effluent Total Suspended Solids Results

1.1 Verify the following monthly average effluent values, exceedances, and points for TSS:

Outfall No. 001	Monthly Average Limit (mg/L)	90% of Permit Limit >10 (mg/L)	Effluent Monthly Average (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance	90% Permit Limit Exceedance
January	10	10	0	1	0	0
February	10	10	1	1	0	0
March	10	10	0	1	0	0
April	10	10	1	1	0	0
May	10	10	2	1	0	0
June	10	10	0	1	0	0
July	10	10	0	1	0	0
August	10	10	0	1	0	0
September	10	10	0	1	0	0
October	10	10	1	1	0	0
November	10	10	0	1	0	0
December	10	10	1	1	0	0
* Equals limit if limit is <= 10						
Months of Discharge/yr				12		
Points per each exceedance with 12 months of discharge:					7	3
Exceedances					0	0
Points					0	0
Total Number of Points						0

0

NOTE: For systems that discharge intermittently to state waters, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge.

Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is 12/6 = 2.0

1.2 If any violations occurred, what action was taken to regain compliance?

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Effluent Quality and Plant Performance (Ammonia - NH3)

1. Effluent Ammonia Results

1.1 Verify the following monthly and weekly average effluent values, exceedances and points for ammonia

Outfall No. 001	Monthly Average NH3 Limit (mg/L)	Weekly Average NH3 Limit (mg/L)	Effluent Monthly Average NH3 (mg/L)	Monthly Permit Limit Exceedance	Effluent Weekly Average for Week 1	Effluent Weekly Average for Week 2	Effluent Weekly Average for Week 3	Effluent Weekly Average for Week 4	Weekly Permit Limit Exceedance
January	5		.00354838	7 0					
February	5.2		.025	0					
March	6		.01935483	9 0					
April	5.6		.01433333	3 0					
May	4.9		.02580645	2 0					
June	3.1		.029	0					
July	2		.04225806	5 0					
August	2.1		.05193548	4 0					
September	2.9		.01766666	7 0					
October	4.5		.01193548	4 0					
November	5.4		.214	0					
December	5.1		.02645161	3 0					

Points per each exceedance of Monthly average:	10
Exceedances, Monthly:	0
Points:	0
Points per each exceedance of weekly average (when there is no monthly averge):	2.5
Exceedances, Weekly:	0
Points:	0
Total Number of Points	0

NOTE: Limit exceedances are considered for mothly OR weekly averages but not both. When a monthly average limit exists it will be used to determine exceedances and generate points. This will be true even if a weekly limit also exists. When a weekly average limit exists and a monthly limit does not exist, the weekly limit will be used to determine exceedances and generate points.

1.2 If any violations occurred, what action was taken to regain compliance?

0

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Effluent Quality and Plant Performance (Phosphorus)

1. Effluent Phosphorus Results

1.1 Verify the following monthly average effluent values, exceedances, and points for Phosphorus

Outfall No. 001	Monthly Average phosphorus Limit (mg/L)	Effluent Monthly Average phosphorus (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance
January	.7	0.054	1	0
February	.7	0.054	1	0
March	.7	0.035	1	0
April	.7	0.050	1	0
May	.7	0.076	1	0
June	.7	0.053	1	0
July	.7	0.050	1	0
August	.7	0.043	1	0
September	.7	0.095	1	0
October	.7	0.139	1	0
November	.7	0.180	1	0
December	.7	0.270	1	0
Months of Discharge/yr			12	
Points per each exceedance with 12 months of discharge:				10
Exceedances				0
Total Number of Points				0

0

NOTE: For systems that discharge intermittently to waters of the state, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge.

Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is 12/6 = 2.0

1.2 If any violations occurred, what action was taken to regain compliance?

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Biosolids Quality and Management

1. Biosolids Use/Disposal

1.1 How did you use or dispose of your biosolids? (Check all that apply)

- ☒ Land applied under your permit
- ☐ Publicly Distributed Exceptional Quality Biosolids
- ☐ Hauled to another permitted facility
- ☐ Landfilled
- ☐ Incinerated
- ☐ Other

NOTE: If you did not remove biosolids from your system, please describe your system type such as lagoons, reed beds, recirculating sand filters, etc.

1.1.1 If you checked Other, please describe:

2. Land Application Site

2.1 Last Year's Approved and Active Land Application Sites

2.1.1 How many acres did you have?

3013.50 acres

2.1.2 How many acres did you use?

328 acres

2.2 If you did not have enough acres for your land application needs, what action was taken?

2.3 Did you overapply nitrogen on any of your approved land application sites you used last year?

- ○ Yes (30 points)
- ● No

2.4 Have all the sites you used last year for land application been soil tested in the previous 4 years?

- ● Yes
- ○ No (10 points)
- ○ N/A

0

3. Biosolids Metals

Number of biosolids outfalls in your WPDES permit:

3.1 For each outfall tested, verify the biosolids metal quality values for your facility during the last calendar year.

Outfall No. 002 - Anaerobic Belt Pressed Sludge

Parameter	80% of Limit	H.Q. Limit	Ceiling Limit	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	80% Value	High Quality	Ceiling
Arsenic		41	75	6.4		5.8		7.4		4.7		4.2		8.4			0	0
Cadmium		39	85	<.66		1.4		<.66		.74		.87		1.1			0	0
Copper		1500	4300	639		649		624		641		679		684			0	0
Lead		300	840	23.8		30.5		24.7		25.9		27.6		25.9			0	0
Mercury		17	57	.57		.62		.45		.54		.69		.77			0	0
Molybdenum	60		75	19.2		18.5		18.8		16.8		17		16.4		0		0
Nickel	336		420	38.9		44.1		36.9		44.7		45.1		41.6		0		0
Selenium	80		100	5.8		<5.1		<5.5		7.1		5.6		6.8		0		0
Zinc		2800	7500	1190		1160		980		998		1080		1080			0	0

3.1.1 Number of times any of the metals exceeded the high quality limits OR 80% of the limit for molybdenum, nickel, or selenium = 0

Exceedence Points

- ● 0 (0 Points)

○ 1-2 (10 Points) ○ > 2 (15 Points) 3.1.2 If you exceeded the high quality limits, did you cumulatively track the metals loading at each land application site? (check applicable box) ○ Yes ○ No (10 points) ● N/A - Did not exceed limits or no HQ limit applies (0 points) ○ N/A - Did not land apply biosolids until limit was met (0 points) 3.1.3 Number of times any of the metals exceeded the ceiling limits = 0 Exceedence Points ● 0 (0 Points) ○ 1 (10 Points) ○ > 1 (15 Points) 3.1.4 Were biosolids land applied which exceeded the ceiling limit? ○ Yes (20 Points) ● No (0 Points) 3.1.5 If any metal limit (high quality or ceiling) was exceeded at any time, what action was taken? Has the source of the metals been identified?	0

4. Pathogen Control (per outfall):

4.1 Verify the following information. If any information is incorrect, use the Report Issue button under the Options header in the left-side menu.

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	01/01/2017 - 02/28/2017
Density:	160,000
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	01/01/2017 - 03/31/2017
Density:	160,000
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	03/01/2017 - 04/30/2017
Density:	49,000
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	04/01/2017 - 06/30/2017
Density:	49,000
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	05/01/2017 - 06/30/2017
Density:	92,000
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Anaerobic Digestion
Process Description:	Storage pile samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	05/01/2017 - 06/30/2017
Density:	42,000
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	07/01/2017 - 08/31/2017
Density:	7,000
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	07/01/2017 - 09/30/2017
Density:	5,900
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	09/01/2017 - 10/31/2017
Density:	5,900
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	10/01/2017 - 12/31/2017
Density:	2,600
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Anaerobic Digestion
Process Description:	Storage pile samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	10/01/2017 - 12/31/2017
Density:	2,500
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	11/01/2017 - 12/31/2017
Density:	2,600
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Anaerobic Digestion
Process Description:	Storage pile samples. Lab Certification Number: 721026460

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	11/01/2017 - 12/31/2017
Density:	2,500
Sample Concentration Amount:	CFU/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Anaerobic Digestion
Process Description:	Centrifuge samples. Lab Certification Number: 721026460

4.2 If exceeded Class B limit or did not meet the process criteria at the time of land application.

4.2.1 Was the limit exceeded or the process criteria not met at the time of land application?

○ Yes (40 Points)

● No

If yes, what action was taken?

0

5. Vector Attraction Reduction (per outfall):

5.1 Verify the following information. If any of the information is incorrect, use the Report Issue button under the Options header in the left-side menu.

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Outfall Number:	002
Method Date:	02/28/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	01/03/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>=38
Results (if applicable):	41.50

Outfall Number:	002
Method Date:	03/31/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	01/03/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>=38
Results (if applicable):	41.50

Outfall Number:	002
Method Date:	04/30/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	
Results (if applicable):	

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Outfall Number:	002
Method Date:	03/08/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>=38
Results (if applicable):	51.60

Outfall Number:	002
Method Date:	06/30/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	03/08/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	>=38
Results (if applicable):	51.60

Outfall Number:	002
Method Date:	06/30/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	07/03/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>=38
Results (if applicable):	44.70

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Outfall Number:	002
Method Date:	08/31/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	09/30/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	09/07/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>=38
Results (if applicable):	51.80

Outfall Number:	002
Method Date:	09/07/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>=38
Results (if applicable):	51.80

Outfall Number:	002
Method Date:	10/31/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	12/31/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	11/01/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	>=38
Results (if applicable):	63.30

Outfall Number:	002
Method Date:	12/31/2017
Option Used To Satisfy Requirement:	Incorporation when land apply
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	
Results (if applicable):	

Outfall Number:	002
Method Date:	11/01/2017
Option Used To Satisfy Requirement:	Volatile Solids Reduction
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	>=38
Results (if applicable):	63.30

5.2 Was the limit exceeded or the process criteria not met at the time of land application?

- ○ Yes (40 Points)
- ● No

If yes, what action was taken?

0

6. Biosolids Storage

6.1 How many days of actual, current biosolids storage capacity did your wastewater treatment facility have either on-site or off-site?

- ● >= 180 days (0 Points)
- ○ 150 - 179 days (10 Points)
- ○ 120 - 149 days (20 Points)
- ○ 90 - 119 days (30 Points)
- ○ < 90 days (40 Points)
- ○ N/A (0 Points)

6.2 If you checked N/A above, explain why.

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	0

7. Issues

7.1 Describe any outstanding biosolids issues with treatment, use or overall management:

A very wet spring in 2017 shortened the window of application before the crops were planted.

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Staffing and Preventative Maintenance (All Treatment Plants)

1. Plant Staffing

1.1 Was your wastewater treatment plant adequately staffed last year?

- ● Yes
- ○ No

If No, please explain:

Could use more help/staff for:

1.2 Did your wastewater staff have adequate time to properly operate and maintain the plant and fulfill all wastewater management tasks including recordkeeping?

- ● Yes
- ○ No

If No, please explain:

2. Preventative Maintenance

2.1 Did your plant have a documented AND implemented plan for preventative maintenance on major equipment items?

- ● Yes (Continue with question 2)
- ○ No (40 points)

If No, please explain, then go to question 3:

2.2 Did this preventative maintenance program depict frequency of intervals, types of lubrication, and other tasks necessary for each piece of equipment?

- ● Yes
- ○ No (10 points)

2.3 Were these preventative maintenance tasks, as well as major equipment repairs, recorded and filed so future maintenance problems can be assessed properly?

- ● Yes
  - ○ Paper file system
  - ○ Computer system
  - ● Both paper and computer system
- ○ No (10 points)

0

3. O&M Manual

3.1 Does your plant have a detailed O&M and Manufacturer Equipment Manuals that can be used as a reference when needed?

- ● Yes
- ○ No

4. Overall Maintenance /Repairs

4.1 Rate the overall maintenance of your wastewater plant.

- ● Excellent
- ○ Very good
- ○ Good
- ○ Fair
- ○ Poor

Describe your rating:

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With our recent major upgrade, most equipment was replaced. We are following manufacturer O&M for this equipment. Equipment not replaced was mostly rebuilt in house such as primary influent and effluent pumps and RAS/WAS pumps.

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Operator Certification and Education

1. Operator-In-Charge

1.1 Did you have a designated operator-in-charge during the report year?

- ● Yes (0 points)
- ○ No (20 points)

Name: JEFF HARENDA

Certification No: 31618

0

2. Certification Requirements

2.1 In accordance with Chapter NR 114.56 and 114.57, Wisconsin Administrative Code, what level and subclass(es) were required for the operator-in-charge (OIC) to operate the wastewater treatment plant and what level and subclass(es) were held by the operator-in-charge?

Sub Class	SubClass Description	WWTP	OIC		
		Advanced	OIT	Basic	Advanced
A1	Suspended Growth Processes	X			X
A2	Attached Growth Processes				X
A3	Recirculating Media Filters				
A4	Ponds, Lagoons and Natural		X		
A5	Anaerobic Treatment Of Liquid				
B	Solids Separation	X			X
C	Biological Solids/Sludges	X			X
P	Total Phosphorus	X			X
N	Total Nitrogen				
D	Disinfection	X			X
L	Laboratory	X			X
U	Unique Treatment Systems				
SS	Sanitary Sewage Collection	X	NA	NA	NA

2.2 Was the operator-in-charge certified at the appropriate level and subclass(es) to operate this plant? (Note: Certification in subclass SS, N and A5 not required in 2016; subclass SS is basic level only.)

- ● Yes (0 points)
- ○ No (20 points)

0

3. Succession Planning

3.1 In the event of the loss of your designated operator-in-charge, did you have a contingency plan to ensure the continued proper operation and maintenance of the plant that includes one or more of the following options (check all that apply)?

- ☒ One or more additional certified operators on staff
- ☐ An arrangement with another certified operator
- ☐ An arrangement with another community with a certified operator
- ☐ An operator on staff who has an operator-in-training certificate for your plant and is expected to be certified within one year
- ☐ A consultant to serve as your certified operator
- ☐ None of the above (20 points)

If "None of the above" is selected, please explain:

0

4. Continuing Education Credits

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4.1 If you had a designated operator-in-charge, was the operator-in-charge earning Continuing Education Credits at the following rates?

OIT and Basic Certification:

- ○ Averaging 6 or more CECs per year.
- ○ Averaging less than 6 CECs per year.

Advanced Certification:

- ● Averaging 8 or more CECs per year.
- ○ Averaging less than 8 CECs per year.

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Financial Management

1. Provider of Financial Information

Name: Rich Abbott

Telephone: (262)-524-3556 (XXX) XXX-XXXX

E-Mail Address (optional): rabbott@waukesha-wi.gov

2. Treatment Works Operating Revenues

2.1 Are User Charges or other revenues sufficient to cover O&M expenses for your wastewater treatment plant AND/OR collection system ?

- ● Yes (0 points)
- ○ No (40 points)

If No, please explain:

2.2 When was the User Charge System or other revenue source(s) last reviewed and/or revised?

Year: 2017

- ● 0-2 years ago (0 points)
- ○ 3 or more years ago (20 points)
- ○ N/A (private facility)

2.3 Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system?

- ● Yes (0 points)
- ○ No (40 points)

0

REPLACEMENT FUNDS [PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 3]

3. Equipment Replacement Funds

3.1 When was the Equipment Replacement Fund last reviewed and/or revised?

Year: 2017

- ● 1-2 years ago (0 points)
- ○ 3 or more years ago (20 points)
- ○ N/A

If N/A, please explain:

3.2 Equipment Replacement Fund Activity

3.2.1 Ending Balance Reported on Last Year's CMAR		$ 2,826,366.80
3.2.2 Adjustments - if necessary (e.g. earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)		$ 0.00
3.2.3 Adjusted January 1st Beginning Balance		$ 2,826,366.80
3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.)	+	$ 825,000.00

3.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 3.2.6.1 below*) - $ 96,321.85

3.2.6 Ending Balance as of December 31st for CMAR Reporting Year $ 3,555,044.95

All Sources: This ending balance should include all Equipment Replacement Funds whether held in a bank account(s), certificate(s) of deposit, etc.

3.2.6.1 Indicate adjustments, equipment purchases, and/or major repairs from 3.2.5 above.

$61,864.00 UV upgrade construction
$19,897.93 Phosphorus planning design
$9,870.07 400 Bldg. air compressor replacement
$4,689.85 Final clarifier rehabilitation

0

3.3 What amount should be in your Replacement Fund? $ 1,558,369.00

Please note: If you had a CWFP loan, this amount was originally based on the Financial Assistance Agreement (FAA) and should be regularly updated as needed. Further calculation instructions and an example can be found by clicking the SectionInstructions link under Info header in the left-side menu.

3.3.1 Is the December 31 Ending Balance in your Replacement Fund above, (#3.2.6) equal to, or greater than the amount that should be in it (#3.3)?

- ● Yes
- ○ No

If No, please explain.

4. Future Planning

4.1 During the next ten years, will you be involved in formal planning for upgrading, rehabilitating, or new construction of your treatment facility or collection system?

- ● Yes - If Yes, please provide major project information, if not already listed below.
- ○ No

Project #	Project Description	Estimated Cost	Approximate Construction Year
1	6-10 year faciltity plan upgrades, to include phosphorus treatment,cogeneration, and electrical upgrades.	12,300,000	2020
2	Replace scum pump for final clarifiers in bldg. 240	16500	2018
3	Rehabilitate two final clarifiers not included in major upgrade	750000	2018
4	upgrade storm water pump station at WWTP	40000	2018
5	Replace five primary influent pumps at treatment plant	800,000	2020
6	Eliminate two lift stations and their force mains with a gravity sewer line. One of the stations (Greenmeadow) can cause a bottle neck during peak flows.	15,000,000	2018
7	Eliminate three lift stations on the south side of city consolidating into another by gravity.	14000000	2020
8	Eliminate and consolidate three lift stations on west side of city.	4000000	2021
9	Replace second air compressor in Bldg. 400	10,000	2018
10	Construct a Return Flow Pump Station and pipeline for switch to a Lake Michigan water supply.	120,000,000	2021

5. Financial Management General Comments

The phosphorus upgrades are dependent upon the change in water supply and receiving stream. Co-generation is being re-evaluated with a study on bio-gas utilization in conjunction with focus on energy.

ENERGY EFFICIENCY AND USE

6. Collection System

6.1 Energy Usage

6.1.1 Enter the monthly energy usage from the different energy sources:

COLLECTION SYSTEM PUMPAGE: Total Power Consumed

Number of Municipally Owned Pump/Lift Stations: 40

	Electricity Consumed (kWh)	Natural Gas Consumed (therms)
January	108,397	54
February	98,602	12
March	97,167	11
April	117,457	8
May	114,439	20
June	94,955	14
July	97,400	0
August	91,435	38
September	77,166	10
October	70,711	9
November	78,959	46
December	89,194	27
Total	1,135,882	249
Average	94,657	23

6.1.2 Comments:

Natural gas use is only for 3 onsite emergency back-up generators which are normally exercised weekly. We have 4 small grinder pump stations that are not metered separately, but by taking the average of 3 of the same that are, we would add 2,957 kWh to the 1,135,882 kWh total to get 1,138,839 total kWh for all lift stations.

6.2 Energy Related Processes and Equipment

6.2.1 Indicate equipment and practices utilized at your pump/lift stations (Check all that apply):

- ☐ Comminution or Screening
- ☒ Extended Shaft Pumps
- ☐ Flow Metering and Recording
- ☐ Pneumatic Pumping
- ☒ SCADA System
- ☒ Self-Priming Pumps
- ☒ Submersible Pumps
- ☒ Variable Speed Drives
- ☒ Other:

Three pump stations have onsite natural gas back-up generators.

6.2.2 Comments:

Reducing I&I through our CMOM program will reduce flow and energy required.

6.3 Has an Energy Study been performed for your pump/lift stations?

○ No

● Yes

Year: 2011

By Whom: AECOM

Describe and Comment:

A study was done to look at the feasibility of eliminating 7-8 lift stations on the west side of the city and 4 on the south side of the city replacing with gravity interceptors. Energy use was looked at as a factor in the feasibility.

6.4 Future Energy Related Equipment

6.4.1 What energy efficient equipment or practices do you have planned for the future for your pump/lift stations?

More VFDs will be added as stations are upgraded. We are still planning on some station eliminations.

7. Treatment Facility

7.1 Energy Usage

7.1.1 Enter the monthly energy usage from the different energy sources:

TREATMENT PLANT: Total Power Consumed/Month

	Electricity Consumed (kWh)	Total Influent Flow (MG)	Electricity Consumed/ Flow (kWh/MG)	Total Influent BOD (1000 lbs)	Electricity Consumed/ Total Influent BOD (kWh/1000lbs)	Natural Gas Consumed (therms)
January	875,525	294.57	2,972	428.48	2,043	37,906
February	795,676	254.63	3,125	407.88	1,951	32,680
March	764,506	312.30	2,448	727.94	1,050	26,330
April	829,023	426.45	1,944	706.47	1,173	17,261
May	796,351	407.25	1,955	572.26	1,392	10,430
June	898,684	324.78	2,767	505.53	1,778	4,268
July	885,671	383.71	2,308	673.79	1,314	1,511
August	741,004	267.18	2,773	752.53	985	1,551
September	797,962	200.78	3,974	354.09	2,254	2,354
October	691,898	323.25	2,140	851.91	812	1,860
November	778,252	258.15	3,015	843.90	922	18,014
December	741,898	247.85	2,993	460.94	1,610	32,564
Total	9,596,450	3,700.90		7,285.72		186,729
Average	799,704	308.41	2,701	607.14	1,440	15,561

7.1.2 Comments:

We have two natural gas accounts for the plant. One is for six of our emergency back-up generators which totaled 5,902 therms of the 186,729 total. The other account has two emergency back-up generators on it in addition to building and process heat. The generator portion of that second account would estimate to be 1,475.5 therms of the total, meaning 179,351.5 therms were used for building and process heat. The back-up generators are exercised weekly.

7.2 Energy Related Processes and Equipment

7.2.1 Indicate equipment and practices utilized at your treatment facility (Check all that apply):

- ☐ Aerobic Digestion
- ☒ Anaerobic Digestion
- ☐ Biological Phosphorus Removal
- ☐ Coarse Bubble Diffusers
- ☒ Dissolved O2 Monitoring and Aeration Control
- ☒ Effluent Pumping
- ☒ Fine Bubble Diffusers
- ☒ Influent Pumping
- ☒ Mechanical Sludge Processing
- ☐ Nitrification
- ☒ SCADA System
- ☒ UV Disinfection
- ☒ Variable Speed Drives
- ☒ Other:

Eight 300Kw natural gas powered back-up generators.

7.2.2 Comments:

Our primary influent is pumped and our primary effluent is pumped, but not our final effluent.

7.3 Future Energy Related Equipment

7.3.1 What energy efficient equipment or practices do you have planned for the future for your treatment facility?

We are currently working on a bio-gas beneficial use study in conjunction with Focus On Energy.

8. Biogas Generation

8.1 Do you generate/produce biogas at your facility?

- ○ No
- ● Yes

If Yes, how is the biogas used (Check all that apply):

- ☒ Flared Off
- ☒ Building Heat
- ☒ Process Heat
- ☐ Generate Electricity
- ☐ Other:

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9. Energy Efficiency Study

9.1 Has an Energy Study been performed for your treatment facility?

- ○ No
- ● Yes
  - ☐ Entire facility
    - Year:
    - By Whom:
    - Describe and Comment:
  - ☒ Part of the facility
    - Year: 2011
    - By Whom: Strand Associates
    - Describe and Comment: The 20 year Facility Plan Study recommended energy efficiency improvements. Separate building power and gas metering capability were also incorporated to aide in future evaluations.

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Sanitary Sewer Collection Systems

1. Capacity, Management, Operation, and Maintenance (CMOM) Program

1.1 Do you have a CMOM program that is being implemented?

- ● Yes
- ○ No

If No, explain:

1.2 Do you have a CMOM program that contains all the applicable components and items according to Wisc. Adm Code NR 210.23 (4)?

- ● Yes
- ○ No (30 points)
- ○ N/A

If No or N/A, explain:

1.3 Does your CMOM program contain the following components and items? (check the components and items that apply)

☒ Goals [NR 210.23 (4)(a)]

Describe the major goals you had for your collection system last year:

Maintain assets through rehabilitation and replacement program – rehabilitated / replaced:
30,915 LF mainline; 4112 LF laterals
Clean 30% of sewers
Televise 10% of sewers
Inspect all pump stations weekly
Rehabilitated 206 manholes

Did you accomplish them?

- ○ Yes
- ● No

If No, explain:

Accomplished all items but televising due to scheduling with contractor. Moved the work to 2018.

☒ Organization [NR 210.23 (4) (b)]

Does this chapter of your CMOM include:

- ☒ Organizational structure and positions (eg. organizational chart and position descriptions)
- ☒ Internal and external lines of communication responsibilities
- ☒ Person(s) responsible for reporting overflow events to the department and the public

☒ Legal Authority [NR 210.23 (4) (c)]

What is the legally binding document that regulates the use of your sewer system?

Chapter 29

If you have a Sewer Use Ordinance or other similar document, when was it last reviewed and revised? (MM/DD/YYYY) 03/20/2018

Does your sewer use ordinance or other legally binding document address the following:

- ☒ Private property inflow and infiltration
- ☒ New sewer and building sewer design, construction, installation, testing and inspection
- ☒ Rehabilitated sewer and lift station installation, testing and inspection
- ☒ Sewage flows satellite system and large private users are monitored and controlled, as necessary
- ☒ Fat, oil and grease control
- ☒ Enforcement procedures for sewer use non-compliance

☒ Operation and Maintenance [NR 210.23 (4) (d)]

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Does your operation and maintenance program and equipment include the following:

- ☒ Equipment and replacement part inventories
- ☒ Up-to-date sewer system map
- ☒ A management system (computer database and/or file system) for collection system information for O&M activities, investigation and rehabilitation
- ☒ A description of routine operation and maintenance activities (see question 2 below)
- ☒ Capacity assessment program
- ☒ Basement back assessment and correction
- ☒ Regular O&M training

☒ Design and Performance Provisions [NR 210.23 (4) (e)]

What standards and procedures are established for the design, construction, and inspection of the sewer collection system, including building sewers and interceptor sewers on private property?

- ☒ State Plumbing Code, DNR NR 110 Standards and/or local Municipal Code Requirements
- ☒ Construction, Inspection, and Testing
- ☒ Others:

Sanitary Infrastructure Field Verification & Acceptance Request forms must be submitted and approved prior to acceptance of sanitary infrastructure.

0

☒ Overflow Emergency Response Plan [NR 210.23 (4) (f)]

Does your emergency response capability include:

- ☒ Responsible personnel communication procedures
- ☒ Response order, timing and clean-up
- ☒ Public notification protocols
- ☒ Training
- ☒ Emergency operation protocols and implementation procedures

☒ Annual Self-Auditing of your CMOM Program [NR 210.23 (5)]

☒ Special Studies Last Year (check only those that apply):

- ☐ Infiltration/Inflow (I/I) Analysis
- ☐ Sewer System Evaluation Survey (SSES)
- ☐ Sewer Evaluation and Capacity Managment Plan (SECAP)
- ☐ Lift Station Evaluation Report
- ☒ Others:

An evaluation was performed to determine if we should rehabilitate two lift stations or replace them with a gravity interceptor.

2. Operation and Maintenance

2.1 Did your sanitary sewer collection system maintenance program include the following maintenance activities? Complete all that apply and indicate the amount maintained.

Cleaning	68	% of system/year
Root removal	0.5	% of system/year
Flow monitoring	0	% of system/year
Smoke testing	0	% of system/year
Sewer line televising	7.5	% of system/year
Manhole inspections	1	% of system/year
Lift station O&M	50	# per L.S./year
Manhole rehabilitation	3	% of manholes rehabbed

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Mainline rehabilitation	2	% of sewer lines rehabbed
Private sewer inspections	1	% of system/year
Private sewer I/I removal	1	% of private services
River or water crossings	100	% of pipe crossings evaluated or maintained

Please include additional comments about your sanitary sewer collection system below:

We had 80 after hours call-ins for lift station alarms in 2017. 28 of those were for a communication problem, 12 were for power outages due to a storm or other event, 40 were for a mechanical or control issue which was able to be resolved in the field. None resulted in a failure. Lift station O&M includes weekly inspection to test equipment and pump down wet wells. Wet wells are cleaned once per year minimum. We had 39 calls of back-ups, all were problems with owner's laterals.

3. Performance Indicators

3.1 Provide the following collection system and flow information for the past year.

37.37	Total actual amount of precipitation last year in inches
34.62	Annual average precipitation (for your location)
270	Miles of sanitary sewer
40	Number of lift stations
0	Number of lift station failures
0	Number of sewer pipe failures
0	Number of basement backup occurrences
0	Number of complaints
10.802	Average daily flow in MGD (if available)
14.215	Peak monthly flow in MGD (if available)
	Peak hourly flow in MGD (if available)

3.2 Performance ratios for the past year:

0.00	Lift station failures (failures/year)
0.00	Sewer pipe failures (pipe failures/sewer mile/yr)
0.02	Sanitary sewer overflows (number/sewer mile/yr)
0.00	Basement backups (number/sewer mile)
0.00	Complaints (number/sewer mile)
1.3	Peaking factor ratio (Peak Monthly:Annual Daily Avg)
0.0	Peaking factor ratio (Peak Hourly:Annual Daily Avg)

4. Overflows

LIST OF SANITARY SEWER (SSO) AND TREATMENT FACILITY (TFO) OFERFLOWS REPORTED **

	Date	Location	Cause	Estimated Volume (MG)
0	6/16/2017 10:00:00 AM - 6/21/2017 12:15:00 PM	800 block of Northview Rd., on north side of the road.	Broken Sewer, Broken Sewer	0.0750 - 0.0750

1	6/17/2017 1:00:00 PM - 6/23/2017 1:15:00 PM	2800 block of Golf Road		0.0033 - 0.0033
2	8/10/2017 9:00:00 AM - 8/10/2017 9:05:00 AM	Intersection of Manhattan Dr. and Greenway Terr., Waukesha, WI N 43.026643, W -88.207566	Equipment Failure	0.0005 - 0.0005

** If there were any SSOs or TFOs that are not listed above, please contact the DNR and stop work on this section until corrected.

What actions were taken, or are underway, to reduce or eliminate SSO or TFO occurences in the future?

Continued education of contractors working on behalf of City to respond to field issues right away. Inspection of air release valves. Replacement/elimination of air release valves as force mains replaced/eliminated.

5. Infiltration / Inflow (I/I)

5.1 Was infiltration/inflow (I/I) significant in your community last year?

○ Yes

● No

If Yes, please describe:

5.2 Has infiltration/inflow and resultant high flows affected performance or created problems in your collection system, lift stations, or treatment plant at any time in the past year?

○ Yes

● No

If Yes, please describe:

5.3 Explain any infiltration/inflow (I/I) changes this year from previous years:

For 2017, the monthly average difference in Clean Water Plant (CWP) influent versus Water Utility pumping was 4.553 MGD. This is higher than the historical (2005-2010) monthly difference of 3.390 MGD by 1.163 MGD. The precipitation for the year was 2.63 inches above the historical yearly average.

The higher than average precipitation total for the year caused higher than average I/I. Overall, the system continues to show a downward trend of I/I compared to the historical median I/I.

5.4 What is being done to address infiltration/inflow in your collection system?

Lining or relaying of mainline sewer, lining or relaying of laterals within the ROW, grouting of individual leaks in sewers, chimney seals on rehabilitated manholes, lining of existing manholes. Separate $1 million earmarked for lining of existing concrete sewers, and televising laterals suspect of clear water discharges.

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Grading Summary

WPDES No: 0029971

SECTIONS	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Influent	A	4	3	12
BOD/CBOD	A	4	10	40
TSS	A	4	5	20
Ammonia	A	4	5	20
Phosphorus	A	4	3	12
Biosolids	A	4	5	20
Staffing/PM	A	4	1	4
OpCert	A	4	1	4
Financial	A	4	1	4
Collection	A	4	3	12
TOTALS			37	148
GRADE POINT AVERAGE (GPA) = 4.00				

Notes:

A = Voluntary Range (Response Optional)

B = Voluntary Range (Response Optional)

C = Recommendation Range (Response Required)

D = Action Range (Response Required)

F = Action Range (Response Required)

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Resolution or Owner's Statement

Name of Governing Body or Owner: City of Waukesha

Date of Resolution or Action Taken: 06/19/2018

Resolution Number:

Date of Submittal:

ACTIONS SET FORTH BY THE GOVERNING BODY OR OWNER RELATING TO SPECIFIC CMAR SECTIONS (Optional for grade A or B. Required for grade C, D, or F):

Influent Flow and Loadings: Grade = A

Effluent Quality: BOD: Grade = A

Effluent Quality: TSS: Grade = A

Effluent Quality: Ammonia: Grade = A

Effluent Quality: Phosphorus: Grade = A

Biosolids Quality and Management: Grade = A

Staffing: Grade = A

Operator Certification: Grade = A

Financial Management: Grade = A

Collection Systems: Grade = A

(Regardless of grade, response required for Collection Systems if SSOs were reported)

Firms that contract with the City of Waukesha will continued to be closely monitored. The City requires that both the contractor and its agents understand the SSO notification procedure and utilize it when appropriate. Additionally, Digger's Hotline requests will be screened more thoroughly to identify potential conflicts with sanitary sewers and these will be marked in the field as necessary.

Air release valves will be monitored routinely to detect failures as soon as possible. The manual air release valves will be replaced/abandoned as the associated force mains are replaced/abandoned according to our CIP schedule and budget allows.

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ACTIONS SET FORTH BY THE GOVERNING BODY OR OWNER RELATING TO THE OVERALL GRADE POINT AVERAGE AND ANY GENERAL COMMENTS
(Optional for G.P.A. greater than or equal to 3.00, required for G.P.A. less than 3.00)
G.P.A. = 4.00