



**ENVIRONMENTAL HEALTH BUREAU
DEPARTMENT OF HEALTH**

1270 Natividad Road, Salinas, CA 93906 (831) 755-4507 (831) 796-8680 fax

SEWAGE TREATMENT AND RECLAMATION FACILITY

Application for an Operating Permit

required pursuant to Monterey County Code, Chapter 15.23, Nitrate-Nitrogen Discharge Monitoring

NEW

INFORMATION UPDATE

A. GENERAL INFORMATION

Facility:

Name:		
Address:	City:	Zip:
Contact Person:	Phone: () -	

Legal Owner of Facility:

Name:	Phone: () -	Type of Ownership: <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Government Agency <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____
Address:		
City:	State: Zip:	

Business Operating Facility:

Name:	Phone: () -	Type of Business: <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Government Agency <input type="checkbox"/> Partnership <input type="checkbox"/> Other _____
Address:		
City:	State: Zip:	
Plant Operator:	24-Hour Emergency Phone : () -	Certificate #:

Owner of Business Operating Facility:

Name:	Phone: () -
Address:	
City:	State: Zip:
Contact Person:	Phone: () -

Billing Address:

To the Attention of:		
Address:		
City:	State:	Zip:

Potable Water Source serving Facility:

<input type="checkbox"/> Private Well
<input type="checkbox"/> Private Water System <i>name:</i> _____
<input type="checkbox"/> Public Water System <i>name:</i> _____

Regional Water Quality Control Board, Central Coast Region

Discharge Permit No:

B. TECHNICAL INFORMATION

Each facility shall provide a report of sufficient detail with this application to enable Monterey County Health Department, Environmental Health Bureau, to adequately assess the discharge monitoring program proposed by the facility.

1. LOCATION

- a. Vicinity Map (1 inch = 2 miles)
- b. Area Map (1 inch = 2,000 feet) showing the physical plant and adjacent land uses within 1000 feet of the plant. Area map should identify residential and commercial structures, natural and artificial waterways, agricultural and domestic water wells, and farmlands.
- c. Facility Map (no less than 1 inch = 50 feet)
- d. Service Area Boundaries

2. DISCHARGE VOLUME

- a. Facility design capacity
- b. Provide a copy of the current Regional Water Quality Control Board, Central Coast Region, Discharge Order.
- c. Current discharge volume.
- d. Number of users / connections.

3. PHYSICAL PLANT

Provide a description of each physical component of the facility used for the collection, treatment, disposal, or storage of wastewater. The report must include, but is not limited to:

- a. *Ponds.* Describe function (treatment, percolation, storage) of each and provide detailed design, construction and elevation plans of each pond.
- b. *Irrigation.* Provide the acreage covered, rotation plan, and monthly average effluent application rate (in gallons per acre per day). Indicate whether irrigation is via flood or spray and the spacing between points of discharge.
- c. *Other.* Provide operational information on other physical components of the treatment facility, including reactors, filters, generators, chlorinator, etc.

4. MONITORING

Each discharger is required to monitor effluent discharged to soil surfaces for nitrate-nitrogen concentration.

- a. *Requirements.* Monitoring lysimeters shall be designed and constructed to enable the facility operator to sample wastewater percolating through the shallow soils beneath the point of effluent discharge. The number of lysimeters required will be that number necessary to establish the nitrate-nitrogen concentration of the discharge to the soil. At a minimum, lysimeters shall be installed at each pond for which design or construction allows effluent percolation. Lysimeters shall be placed within the boundaries of the irrigation areas in numbers and locations adequate to determine the nitrate loading to the soil surface as a result of the operation of the sewage treatment facility. Frequency of the sampling shall be at least quarterly, or as otherwise approved by the Director of Environmental Health.
- b. *Proposals.* Pursuant to Monterey County Code Chapter 15.23, each facility operator shall submit to the Environmental Health Bureau for review and approval a wastewater discharge monitoring proposal. Proposals must include:
 - i. Proposed lysimeter locations
 - ii. Lysimeter design and construction plans
 - iii. Frequency of sampling
- c. *Lysimeter alternative.* The following alternative may be selected in the event you believe you can demonstrate compliance with Monterey County Code, Chapter 15.23 without installing lysimeters:
 - i. Request an alternative in writing within 30 days.
 - ii. Establish a sampling station at the final pond or chamber effluent just prior to discharge.
 - iii. Quarterly, and for a period of one year, take a sample from the effluent sampling station and have it analyzed for nitrate-nitrogen and total nitrogen.
 - iv. Forward the results of the analyses to the Environmental Health Bureau by the 20th of January, April, July and October.
 - v. With each quarterly nitrogen report, include the number of gallons of effluent discharged daily for the previous quarter.

If after one year it is apparent that the facility is in compliance with Chapter 15.23, the need for lysimeters will be eliminated.

C. APPLICATION SUBMITTAL

Each facility shall submit to the Environmental Health Bureau the information as required in items (A) and (B) above, certification as required in (D) below, and a copy of the facility operator’s current Wastewater Treatment Plant Operator Certificate, issued by the State Water Resources Control Board with the application fee as specified by Article I.E, Health Department Fees. Upon approval of a discharge monitoring plan and payment of annual operating permit fees, a permit to allow operation of the sewage treatment and reclamation facility will be issued.

D. CERTIFICATION

As owner or his authorized agent, I represent that the information herein submitted is correct to the best of my knowledge. By signing this application the owner or authorized agent agrees to a condition on the subsequent permit that the owner shall indemnify and hold harmless the County and its officers, agents, and employees from actions or claims of any description brought on account of any injury or damages sustained, by any person or property resulting from the issuance of the permit and the conduct of the activities authorized under said permit.

1. Owner of Facility

Signature _____

Name (Print or Type) _____

Title _____

Date _____

2. Operator of Facility

Signature _____

Name (Print or Type) _____

Title _____

Date _____

For Office Use Only: Application and Permit Fee Information

Date	Received By	Amount Paid	Check No.	Receipt No.	Invoice No.
FA#		PR#		PE	