

Gull Lake Sewer & Water Authority

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Gull Lake Sewer + Water Authority

Sanitary Sewer Overflow Reporting (SSO)

Standard Operating Procedure (SOP)

April, 2009

(stored in the SSO binder on break room shelf)

SSO-SOP

Purpose: It is required that a standard operating procedure be developed for the reporting of Sanitary Sewer Overflows.

Goals: To ensure and protect the health, safety and welfare of the ground-waters and surface waters of the state, to protect the immediate surrounding neighborhoods, and to protect any adjacent or downstream water users should the SSO impact surface streams or lake surfaces.

Procedures:

Upon discovery of the SSO: Notify two of three persons below:

| | | |
|--------------------------------|--------------|----------------------------------|
| Notification of Director | Rich Pierson | 269-998-4587 (alt # -352-3310) |
| Notification of Superintendent | Barry Bowman | 269-998-4588 (alt# 616-680-0721) |
| Notification of Asst. Supt. | Jerred Dill | 269-929-1267 |

One of the three persons above shall be deemed Person in Responsible Charge (Supervisor) and assume responsibility to oversee and direct the following response procedures.

Stopping + Correcting the SSO:

The first responder must assess the extent of the SSO and contact the appropriate contractor for clean-up and/or repair equipment.

Contact List for Repair and Clean-up Assistance:

| | | | |
|---------------------|--|---------------------|---|
| Contractors: | Balkema Excavating: | 269-345-5289 | Emerg: 269-207-5702 269-207-4798 |
| | Byholt Excavating: | 269-649-1666 | Emerg: 269-217-7630 |
| | Bruce Electric: | 269-372-8134 | Emerg: 269-207-1965 |
| | CT Electric: | 269-342-5016 | Emerg: 269-806-7824 269-720-6321 |
| | Plummers Env: | 616-877-3930 | Emerg: 616-877-3930 |
| | Clean Earth Env: | 269-381-2400 | Emerg: 269-381-2400 |
| | Modernistic: (home interiors) | 269-385-3377 | Emerg: 269-385-3377 |
| | Engineer Tom Wheat: | 269-372-1158 | Emerg-h: 269-373-0469 |

The first responder must secure the area with tape, cones and other barricades, determine a methodology to stop and contain the wastewater flow as soon as possible, utilizing appropriate equipment and safety procedures during the work. Adjacent municipality personnel may be utilized as needed. Mutual aid contacts: Vern Eldridge: 998-2229 / Scott Monroe: 207-5324.

SSO-SOP

The Supervisor or Person in Responsible Charge shall contact the DEQ and Health Department as promptly as possible after the area is secured and again when the leakage has been contained and/or stopped, but in any event, contact must be made within 24 hours to the DEQ and Health Department - as well as to the newspaper, advising them of the event status to the extent it the situation.

Should the event result in significant discharge to a public body of water (Gull Lake, Gull Creek, Augusta Creek, etc) where bodily contact is possible, the Health Department shall evaluate the impact to determine what water sampling and testing, if any, should be done, and what type of notification, if any, is needed to the adjacent property owners. If notification is necessary, the Supervisor must contact homes in the immediate vicinity by flyer or other positive contact method to advise them of the necessary precautions, plus follow-up as may be needed upon Health Department advisory procedures.

Should the event have a significant discharge to Augusta Creek, notify the municipalities on Attachment 1.

Other contacts: (Red = required contact within 24 hours)

- Kzoo Road Comm: 269-381-3171 Emerg-p: 269-232-3080
- MDOT 269-337-3900 Emerg: 269-337-3900
- Kzoo Health Dept 269-373-5210 Emerg-p: 269-577-1460
- MDEQ-Plainwell 269-567-3591 PEAS Emerg: 800-292-4706
- Kzoo Gazette 269-388-8530 Hot-line: 269-388-8530
Email: news@kalamazoogazette.com

Repair of leakage:

Upon repair of leakage, additional clean-up of the area shall be accomplished by best available technology (vactor, lime treatment or other). Use of chlorine or bromine products shall not be utilized. Pictures shall be taken of the progress through-out the repair.

Report submittal:

Within one week after the event, the DEQ report (2-page web available) shall be filled out and submitted. A follow-up report may also be submitted in a reasonable time thereafter. The link for the DEQ form to be submitted is: <http://www.deq.state.mi.us/csosso/> and a blank form is attached for reference.

Prepared by: _____
R. Pierson, Director

Approved by Authority Board: _____

Reviewed w/ Personnel: _____
Barry G. Bowman

Jerred B. Dill

SSO-SOP **Attachments 1: 1 pg contact list; 2: 2 pg PA 451 excerpt; 3: 54 pg SSO reporting form.**
Attachment 1

Impacted municipalities if discharge is Augusta Creek. Consult Health Department in this regard:

| | | | |
|----------------------|----------------------|---------------------|-----------------------|
| Augusta, MI | Vern Eldridge | 269-731-4717 | Cell: 998-2229 |
| Galesburg, MI | Rob Wilson | 269-665-7213 | Cell: 217-8625 |
| Comstock, MI | Tim Hudson | 269-381-2360 | Cell: 806-8984 |
| Kalamazoo, MI | Mike Wetzel | 269-337-8667 | Cell: 998-0275 |

NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION ACT (EXCERPT)
Act 451 of 1994

324.3112a Discharge of untreated sewage from sewer system; notification; duties of municipality; legal action by state not limited; penalties and fines; definitions.

Sec. 3112a. (1) Except for sewer systems described in subsection (8), if untreated sewage or partially treated sewage is directly or indirectly discharged from a sewer system onto land or into the waters of the state, the person responsible for the sewer system shall immediately, but not more than 24 hours after the discharge begins, notify the department; local health departments as defined in section 1105 of the public health code, 1978 PA 368, MCL 333.1105; a daily newspaper of general circulation in the county or counties in which a municipality notified pursuant to subsection (4) is located; and a daily newspaper of general circulation in the county in which the discharge occurred or is occurring of all of the following:

(a) Promptly after the discharge starts, by telephone or in another manner required by the department, that the discharge is occurring.

(b) At the conclusion of the discharge, in writing or in another manner required by the department, all of the following:

(i) The volume and quality of the discharge as measured pursuant to procedures and analytical methods approved by the department.

(ii) The reason for the discharge.

(iii) The waters or land area, or both, receiving the discharge.

(iv) The time the discharge began and ended as measured pursuant to procedures approved by the department.

(v) Verification of the person's compliance status with the requirements of its national pollutant discharge elimination system permit or groundwater discharge permit and applicable state and federal statutes, rules, and orders.

(2) Upon being notified of a discharge under subsection (1), the department shall promptly post the notification on its website.

(3) Each time a discharge to surface waters occurs under subsection (1), the person responsible for the sewer system shall test the affected waters for E. coli to assess the risk to the public health as a result of the discharge and shall provide the test results to the affected local county health departments and to the department. The testing shall be done at locations specified by each affected local county health department but shall not exceed 10 tests for each separate discharge event. The requirement for this testing may be waived by the affected local county health department if the affected local county health department determines that such testing is not needed to assess the risk to the public health as a result of the discharge event.

(4) A person responsible for a sewer system that may discharge untreated sewage or partially treated sewage into the waters of the state shall annually contact each municipality whose jurisdiction contains waters that may be affected by the discharge. If those contacted municipalities wish to be notified in the same manner as provided in subsection (1), the person responsible for the sewer system shall provide that notification.

(5) A person who is responsible for a discharge of untreated sewage or partially treated sewage from a sewer system into the waters of the state shall comply with the requirements of its national pollutant discharge elimination system permit or groundwater discharge permit and applicable state and federal statutes, rules, and orders.

(6) This section does not authorize the discharge of untreated sewage or partially treated sewage into the waters of the state or limit the state from bringing legal action as otherwise authorized by this part.

(7) The penalties and fines provided for in section 3115 apply to a violation of this section.

(8) For sewer systems that discharge to the groundwater via a subsurface disposal system, that do not have a groundwater discharge permit issued by the department, and the discharge of untreated sewage or partially treated sewage is not to surface waters, the person responsible for the sewer system shall notify the local health department in accordance with subsection (1)(a) and (b), but the requirements of subsections (2), (3), (4), and (5) do not apply.

(9) As used in this section:

(a) "Partially treated sewage" means any sewage, sewage and storm water, or sewage and wastewater, from domestic or industrial sources that meets 1 or more of the following:

(i) Is not treated to national secondary treatment standards for wastewater or that is treated to a level less than that required by the person's national pollutant discharge elimination system permit.

(ii) Is treated to a level less than that required by the person's groundwater discharge permit.

(iii) Is found on the ground surface.

(b) "Sewer system" means a public or privately owned sewer system designed and used to convey or treat sanitary sewage or sanitary sewage and storm water. Sewer system does not include an on-site wastewater treatment system serving 1 residential unit or duplex.

(c) "Surface water" means all of the following, but does not include drainage ways and ponds used solely for wastewater conveyance, treatment, or control:

(i) The Great Lakes and their connecting waters.

(ii) Inland lakes.

(iii) Rivers.

(iv) Streams.

(v) Impoundments.

(vi) Open drains.

(vii) Other surface bodies of water.

History: 1994, Act 451, Eff. Mar. 30, 1995;—Am. 1998, Act 3, Imd. Eff. Jan. 30, 1998;—Am. 2000, Act 286, Imd. Eff. July 10, 2000;—Am. 2004, Act 72, Imd. Eff. Apr. 20, 2004.

Popular name: Act 451

Popular name: NREPA



Report of Discharges of Untreated or Partially Treated Sewage

*This information is required to be submitted under Michigan Act 451, Public Acts of 1994, as amended, Part 31.
 Potential fines and penalties specified in Part 31 apply to this requirement.*

| Report Submitted by: | |
|-----------------------------|--|
| Name | |
| Position | |
| Municipality | |
| Address | |
| City, State, Zip | |
| County | |
| Telephone # | |
| Fax # | |
| E-mail address | |

| Discharge Information (see instructions for completing this section) | |
|---|--|
| Description of / reason for the discharge(s) | |
| Name of wastewater treatment facility normally receiving sewage | |
| Location of the discharge(s) | |
| Surface waters impacted by the discharge(s) | |
| Land impacted by the discharge(s) | |
| Were initial notification procedures followed? (yes/no) If no, explain. | |
| Event start date and time | |
| Event end date and time | |
| Precipitation type and measurements | |
| Volume discharged (specify units, either gallons or million gallons) | |
| Quality of discharge(s) | |
| Actions taken to stop and/or minimize the discharge(s) | |

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY
WATER BUREAU

Report of Discharges of Untreated or Partially Treated Sewage
(continued)

| | | | |
|---|--|--|---|
| <p>Actions taken to minimize the impact from the discharge(s)</p> | | | |
| <p>Actions to prevent reoccurrence of the discharge(s)</p> | | | |
| <p>Compliance status of the municipality (in compliance/ not in compliance)</p> | | | |
| <p>Results of <u>E. coli</u> testing (circle one)</p> | <p>Results attached or pending</p> | <p>Testing waived by local health department</p> | <p>Not applicable, no discharge to surface waters</p> |
| <p>Discharge report (Check appropriate box, please check only one box)</p> | <p><input type="checkbox"/> (1) The reported discharge was of untreated or partially treated sewage (definition in Section 3112a) which is not characterized by either condition below.</p> <p><input type="checkbox"/> (2) The reported discharge was caused by a party other than this municipality over which this municipality had no control, or knowledge of the actions which resulted in the discharge. Reporting and corrective actions by this municipality were conducted in a timely manner upon becoming aware of the condition.</p> <p><input type="checkbox"/> (3) The reported discharge was of "partially treated sewage", from a CSO treatment facility, <u>and</u> the level of treatment provided is in full compliance with <u>final</u> performance criteria in a permit, order or other enforceable document issued or entered between the Michigan Department of Environmental Quality and the discharger, or by court action.</p> | | |
| <p>Additional information (attach sheets as necessary)</p> | | | |

Report of Discharges of Untreated or Partially Treated Sewage Instructions

The municipality responsible for the discharge of untreated or partially treated sewage shall immediately, but not more than 24 hours after the discharge begins, notify the department and others as specified in the law. During normal business hours, notification to the Department shall be made to the phone number shown on the attached table. Notification during non-business hours shall be made to the Pollution Emergency Alerting System at 1-800-292-4706. The "Report of Discharges of Untreated or Partially Treated Sewage" shall be submitted by the responsible municipality to the appropriate District Office (see attached table), and others as specified in the law, at the conclusion of the discharge.

Description of / reason for the discharge(s)

Provide a description of and the reason for each discharge, such as overflow from lift station due to power failure cause by lightning strike, sewer overflow due to heavy rain, bypass at wastewater treatment plant due to pump failure, etc. Be specific.

Name of wastewater treatment facility normally receiving sewage

Provide the name of the wastewater treatment facility that would have normally provided treatment to the sewage that was discharged.

Location of the discharge(s)

Provide street address or other descriptive location (provide a map if necessary) for each point of discharge. Provide the latitude and longitude to within 10 seconds, if known or obtainable. Indicate the county where the discharge is located.

Surface waters impacted by the discharge(s)

Provide the name of the surface waters into which the discharge flows. If the discharge did not reach a surface water body, indicate "None". If the discharge goes to an unnamed surface waterbody, indicate that and provide the name of the first downstream waterbody with a name and a description of the path to this waterbody.

Land impacted by the discharge(s)

Provide a description of any land that is impacted by the discharge, or indicate "None".

Were initial notification procedures followed?

Municipalities responsible for a discharge of untreated or partially treated sanitary sewage are required to immediately, but not more than 24 hours after the discharge begins, notify the department, local health departments, daily newspaper(s), and affected municipalities as described by the law. Was this done? If initial notification procedures were not followed, please explain why this happened and what steps will be taken to correct this situation.

Event start date and time

Event end date and time

Provide the date and time the discharge began and ended. If multiple discharge locations are included in the report, provide information for each discharge location.

Volume discharged

Provide the volume discharged in gallons or millions of gallons (clearly indicate which units are being used). If volume is estimated, indicate that. If multiple discharge locations are included in the report, provide information for each discharge location, and the total volume for all discharges.

Quality of discharge(s)

Provide information on the quality of the discharge (a narrative description and/or analytical data). If multiple discharge locations are included in the report, provide this information for each discharge location.

Report of Discharges of Untreated or Partially Treated Sewage Instructions (continued)

Precipitation type and measurements

If the reason for the discharge is related to rainfall and/or snowmelt, provide the precipitation type, the amount of precipitation, time and duration of the precipitation (e.g., 2 inches of rain over a 6-hour period beginning at 3:00 a.m. on 9/9/2000).

Actions taken to stop and/or minimize the discharge(s)

Provide a description of the action(s) that the municipality took to stop the discharge(s) or to minimize the amount discharged.

Actions taken to minimize the impact from the discharge(s)

Provide a description of the action(s) that the municipality took to minimize the impact from the discharge(s), such as actions taken to minimize exposure to the public or to contain/capture the discharge(s).

Actions to prevent reoccurrence of the discharge(s)

Provide a description of actions taken or planned (but not yet implemented) to prevent reoccurrence of this discharge(s). This may include plans to replace equipment, to conduct inflow/infiltration studies, to examine maintenance procedures, etc. Include a schedule for planned actions.

Compliance status

Indicate whether the municipality is in compliance with its National Pollutant Discharge Elimination System (NPDES) permit, if applicable, and applicable state and federal statutes, rules, and orders. If "not in compliance" is indicated, provide an explanation.

Results of E. coli testing

Provide the results (as an attachment) of E. coli testing of affected waters as specified by the local health department(s) (if results are not yet available, submit them as soon as they become available); indicate that the testing is "waived" by the local health department; or indicate not applicable (N.A.) if the discharge(s) did not affect surface waters.

Discharge Report

Report the characterization of the discharge by checking the appropriate box. Please check only one box.

Examples of discharge characterization (2) include: accidental releases from a contractor unexpectedly damaging a sewer pipe or discharges from a private sewer system such as a mobile home park.

An example of discharge characterization (3) is a CSO treatment facility where the level of treatment provided is in full compliance with final performance criteria.

The discharge will be characterized when posted to the Michigan Department of Environmental Quality (MDEQ) web site. *However, be aware that the MDEQ reserves the right to re-characterize the web posting based on facts related to the discharge.*

Additional information

Provide any additional information you deem appropriate.

Return completed form by mail or fax to the District Office indicated on attached table.

Water Bureau District Office Addresses And County Jurisdictions

| <u>DEQ DISTRICT OFFICES</u> | <u>TELEPHONE # FAX #</u> | <u>COUNTY JURISDICTIONS</u> | | |
|--|------------------------------|--|---|---|
| CADILLAC DISTRICT OFFICE WB DISTRICT SUPERVISOR 120 WEST CHAPIN ST CADILLAC, MI 49601-2158 | 231-775-3960 231-775-1511 | ALPENA ALCONA ANTRIM BENZIE CHARLEVOIX CHEBOYGAN CRAWFORD EMMET | GRAND TRAVERSE KALKASKA LAKE LEELANAU MANISTEE MASON MISSAUKEE MONTMORENCY | OSCEOLA OSCODA OTSEGO PRESQUE ISLE ROSCOMMON WEXFORD |
| SOUTHEAST MICHIGAN DISTRICT OFFICE WB DISTRICT SUPERVISOR 27700 DONALD CT WARREN, MI 48092-2793 | 586-753-3700 586-753-3751 | MACOMB OAKLAND ST. CLAIR WAYNE | | |
| GRAND RAPIDS DISTRICT OFFICE WB DISTRICT SUPERVISOR 4460 44TH STREET SE, SUITE E KENTWOOD, MI 49512-4096 | 616-356-0500 616-356-0202 | BARRY IONIA KENT MECOSTA MONTCALM MUSKEGON | NEWAYGO OCEANA OTTAWA | |
| JACKSON DISTRICT OFFICE WB DISTRICT SUPERVISOR 301 EAST LOUIS GLICK HIGHWAY JACKSON, MI 49201-1556 | 517-780-7690 517-780-7855 | HILLSDALE JACKSON LENAWEE MONROE WASHTENAW | | |
| UPPER PENINSULA DISTRICT OFFICE WB DISTRICT SUPERVISOR K.I. SAWYER INTERNATIONAL AIRPORT AND BUSINESS CENTER 420 FIFTH STREET GWINN, MICHIGAN 49841 | 906-346-8300 906-346-4480 | ALGER BARAGA CHIPPEWA DELTA DICKINSON GOGEBIC | HOUGHTON IRON KEWEENAW LUCE MARQUETTE MACKINAC | MENOMINEE ONTONAGON SCHOOLCRAFT |
| KALAMAZOO DISTRICT OFFICE WB DISTRICT SUPERVISOR 7953 ADOBE ROAD KALAMAZOO, MI 49009-5026 | 616-567-3500 616-567-9440 | ALLEGAN BERRIEN BRANCH CALHOUN CASS KALAMAZOO | ST. JOSEPH VAN BUREN | |
| SAGINAW BAY DISTRICT OFFICE WB DISTRICT SUPERVISOR 503 NORTH EUCLID AVENUE BAY CITY, MI 48706-2965 | 989-686-8025 989-684-9799 | ARENAC BAY CLARE GLADWIN HURON IOSCO | ISABELLA MIDLAND OGEMAW SAGINAW SANILAC TUSCOLA | |
| LANSING DISTRICT OFFICE WB DISTRICT SUPERVISOR CONSTITUTION HALL 4TH FLOOR, NORTH 525 W. ALLEGAN P.O. BOX 30242 LANSING, MI 48909-7742 | 517-335-6010 517-241-3571 | CLINTON EATON GENESEE GRATIOT INGHAM | LAPEER LIVINGSTON SHIAWASSEE | |