

RESOLUTION NO. 02-05

ROLL CALL

VOTING	YES	NO
MAYOR DALE R. BARNEY <i>(votes only in case of tie)</i>		
SHERMAN E. HUFF <i>Councilmember</i>	X	
EVERETT KELEPOLO <i>Councilmember</i>	X	
GLENN A. JAMES <i>Councilmember</i>	X	
ROY L. JOHNS <i>Councilmember</i>	X	
PAUL M. CHRISTENSEN <i>Councilmember</i>	X	

I MOVE this resolution be adopted: Councilmember Kelepolo

I SECOND the foregoing motion: Councilmember Huff

RESOLUTION 02-05

MUNICIPAL WASTEWATER PLANNING PROGRAM RESOLUTION

WHEREAS, Spanish Fork City informs the Water Quality Board the following actions

were taken by the City Council:

Spanish Fork City Council has reviewed the Municipal Wasterwater Planning Program Report for 2001, which is attached to this resolution.

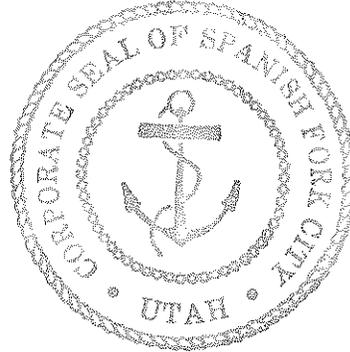
Spanish Fork City has taken all appropriate actions necessary to maintain affluent requirements contained in the UPDES Permit (If Applicable)

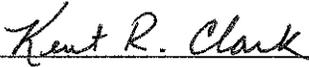
This resolution adopted this 2nd day of April, 2002, by the City Council of Spanish Fork
City, Utah.



DALE R. BARNEY, Mayor

ATTEST:





KENT R. CLARK, City Recorder

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STATE OF UTAH

MUNICIPAL WASTEWATER PLANNING PROGRAM

SELF-ASSESSMENT REPORT

FOR

SPANISH FORK CITY

2001



Resolution Number _____

MUNICIPAL WASTEWATER PLANNING PROGRAM RESOLUTION

RESOLVED that SPANISH FORK CITY informs the Water Quality Board the following actions were taken by the CITY COUNCIL

1. Reviewed the Municipal Wastewater Planning Program Report for 2001, which is attached to this resolution.
2. Have taken all appropriate actions necessary to maintain effluent requirements contained in the UPDES Permit (If Applicable)

Passed by a (majority) (unanimous) vote on

(date)

Mayor/Chairman

Attest: Recorder/Clerk

Municipal Wastewater Planning Program (MWPP) Mechanical Plant Section

Owner Name: SPANISH FORK CITY

Name and Title of Contact Person:

Dennis Sorenson

Treatment Plant Manager

Phone: 798-5051

PLEASE SUBMIT TO STATE BY: MARCH 1, 2002

Mail to: MWPP c/o Jennifer Strong
Department of Environmental Quality
Division of Water Quality
288 North 1460 West
P.O. Box 144870
Salt Lake City, Utah 84114-4870
Phone : 538-6018
E-mail: JSTRONG@DEQ.STATE.UT.US

Form completed by

Dennis Sorenson

Part I: INFLUENT INFORMATION

A. Please list the average design flow and average design BOD₅ and TSS loading for your facility.

	Average Design Flow (MGD)	Average Design BOD ₅ Loading (lbs/day)	Average Design TSS Loading (lbs/day)
Design Criteria	5 MGD	6250 lbs/day	6470 lbs/day
90% of the Design Criteria	4.5 MGD	5625	5823

B. Please list the average monthly flows in millions of gallons per day (MGD) and BOD₅ and TSS loadings in milligrams per liter (mg/L) received at your facility during 2001 (Calculate the BOD₅ and TSS loadings in pounds per day (lbs/day)).

Month	(1) Average Monthly Flow (MGD)	(2) Average Monthly BOD ₅ Concentration (mg/L)	(3) Average BOD ₅ Loading (lbs/day) ¹	(4) Average Monthly TSS Concentration (mg/L)	(5) Average TSS Loading (lbs/day) ²
January	2.8	168	3923	173	4040
February	2.6	237	5139	206	4467
March	2.8	226	5277	287	6726
April	3.	243	6079	234	5855
May	3.2	184	4911	179	4777
June	3.5	143	4174	139	4057
July	3.8	178	5641	170	5388
August	3.8	158	5007	178	5641
September	3.6	166	4984	163	4894
October	3.1	183	4731	156	4033
November	3.1	163	4214	160	4137
December	3.2	160	4270	159	4243
Average	3.2	184	4911	184	4911

1 BOD₅ Loading (3) = Average Monthly Flow (1) x Average Monthly BOD₅ Concentration (2) x 8.34

2 TSS Loading (5) = Average Monthly Flow (1) x Average Monthly TSS Concentration (4) x 8.34

Part I. INFLUENT INFORMATION (cont.)

C. Refer to the information in A & B to determine a point value for your facility. Please enter the points for each question in the blank provided.

Question	Number	Points Earned	Total Points
How many times did the average monthly flow (Part B., Column 1) to the wastewater facility exceed 90% of design flow?	0	0 = 0 points 1-2 = 10 points 3-4 = 20 points 5 or more = 30 points	0
How many times did the average monthly flow (Part B., Column 1) to the wastewater facility exceed the design flow?	0	0 = 0 points 1-2 = 20 points 3-4 = 40 points 5 or more = 60 points	0
How many times did the average monthly BOD ₅ loading (Part B., Column 3) to the wastewater facility exceed 90% of the design loading?	2	0-1 = 0 points 1-2 = 10 points 3-4 = 20 points 5 or more = 30 points	10
How many times did the average monthly BOD ₅ loading (Part B., Column 3) to the wastewater facility exceed the design loading?	0	0 = 0 points 1-2 = 20 points 3-5 = 40 points 5 or more = 60 points	0
TOTAL PART I =			10

Part II: EFFLUENT INFORMATION

A. Please list the average monthly BOD₅, TSS, Ammonia (NH₃), monthly maximum Cl₂, monthly minimum DO, and 30-day geometric averages for Fecal Coliforms, Total Coliforms, produced by your facility during 2001.

Month	(1) BOD ₅ (mg/L)	(2) TSS (mg/L)	(3) Fecal Coliform (#/100 mL)	(4) Total Coliform (#/100 mL)	(5) Cl ₂ (mg/L)	(6) DO (mg/L)	(7) NH ₃ (mg/L)
	Whole Numbers Only				One Decimal Place Only		
January	16	17	2	59	0.3	6.3	3.4
February	18	13	3	159	0.3	5.0	3.8
March	18	14	5	71	0.4	4.0	6.5
April	15	151	3	160	0.3	5.5	4.2
May	24	22	4	223	0.3	5.0	4.3
June	16	16	5	171	0.1	5.0	3.9
July	16	12	20	889	0.1	4.0	3.9
August	17	13	40	719	0.2	4.0	4.4
September	16	12	28	766	0.4	5.0	4.1
October	13	9	14	208	0.4	5.0	2.6
November	11	9	11	206	0.4	5.0	2.5
December	15	14	2	42	0.1	5.0	3.7
Average	16	14	7	504	0.3	5.0	3.9

B. Please list the monthly average permit limits for the facility in the blanks below.

	BOD ₅ (CBOD ₅) (mg/L)	Cl ₂ maximum (mg/L)	NH ₃ (mg/L)	DO minimum (mg/L)
Monthly Permit Limit	25 mg/L	0.42	8 Ap-Sept 9 Oct	5.0
80% of the Permit Limit	20	0.34	6.4 April-Sept 7.2 Oct/Nov	4.0

Part II: EFFLUENT INFORMATION (cont.)

C. Refer to the information in A & B and your operating reports to determine a point values for your facility.

Question	Number	Points Earned	Total Points
How many months did the effluent BOD ₅ (CBOD ₅) exceed 80% of monthly permit limit?	0	0 - 1 = 0 points 2 = 5 points 3 = 10 points 4 = 15 points 5 or more = 20 points	0
How many months did the effluent BOD ₅ (CBOD ₅) exceed the monthly permit limits?	0	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	0
How many months did the effluent TSS exceed 20 mg/L?	1	0 - 1 = 0 points 2 = 5 points 3 = 10 points 4 = 15 points 5 or more = 20 points	0
How many months did the effluent TSS exceed 25 mg/L?	0	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	0
How many times did the Cl ₂ exceed permit limit?	0	0 = 0 points 1 - 2 = 15 points 3 or more = 30 points	0
How many times did the NH ₃ concentration exceed permit limits?	0	0 = 0 points 1 - 2 = 15 points 3 or more = 30 points	0
How many times did the DO not meet permit limit?	3	0 = 0 points 1 - 2 = 15 points 3 or more = 30 points	30
How many months did the 30-day fecal coliform exceed 200 #/100 mL?	0	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	0
How many months did the 30-day total coliform exceed 2000 #/100 mL?	0	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	0
TOTAL PART II =			30

Part III: FACILITY AGE

In what year were the following process units constructed or underwent a major upgrade?
To determine a point score subtract the construction or upgrade year from 2001.

$$\text{Points} = \text{Age} = \text{Present Year} - \text{Construction or Upgrade Year.}$$

Enter the calculated age below.

If the point total exceeds 20 points, enter only 20 points. for Part III total.

Unit Process	Present Year	Construction or Upgrade Year	Age = Points
Headworks	2001	1985	16
Primary Treatment	2001	1985	16
Secondary Treatment	2001	1999	2
Solids Handling	2001	1985	16
Disinfection	2001	1997	4
TOTAL PART III (not greater than 20) =			20

Part IV: BYPASSES

Please complete the following table:

Question	Number	Points Earned	Total Points
How many days in the past year was there a bypass or overflow of untreated wastewater due to high flows?	0	0 = 0 points 1 = 5 points 2 = 10 points 3 = 15 points 4 = 20 points 5 or more = 25 points	0
How many days in the last year was there a bypass or overflow of untreated wastewater due to equipment failure?	0	0 = 0 points 1 = 5 points 2 = 10 points 3 = 15 points 4 = 20 points 5 or more = 25 points	0
TOTAL PART IV =			0

Part V: SOLIDS HANDLING

A. Please complete the following table:

Current Disposal Method (check all that apply)	Points Earned	Total Points
Landfilling	Class B = 0 points < Class B = 50 points	
<input checked="" type="checkbox"/> Land Application	Site Life <input checked="" type="checkbox"/> 0-5 years = 20 points 5-10 years = 10 points 10-20 years = 0 points	20
Give Away/Distribution and Marketing	Unrestricted = 10 points (Class A) Restricted = 20 points (Class B)	
TOTAL PART V =		20

Part VI: NEW DEVELOPMENT

A. Please complete the following table:

Question	Points Earned	Total Points
Has an industry (or other development) moved into the community or expanded production in the past two years, such that either flow or wastewater loadings to the sewerage system were significantly increased (10 - 20%)?	No = 0 points Yes = 10 points	0
Are there any major new developments (industrial, commercial, or residential) anticipated in the next 2 - 3 years, such that either flow or BOD ₅ loadings to the sewerage system could significantly increase (25%)?	No = 0 points Yes = 10 points	0
Have you experienced any upset due to septic haulers?	No = 0 points Yes = 10 points	0
TOTAL PART VI =		0

Part VI: NEW DEVELOPMENT (cont.)

- B. Approximate number of new residential sewer connections in the last year
_____ new residential connections
- C. Approximate number of new commercial/industrial connections in the last year
_____ new commercial/industrial connections
- D. Approximate number of new population serviced in the last year
_____ new people served

Part VII: OPERATOR CERTIFICATION

- A. How many treatment system operators are currently employed by your facility?
3 treatment system operators employed

- B. What is/are the name(s) of your DRC operator(s)?

Dennis R. Sorensen

Jerry Hadlock

- C. You are required to have the DRC operator(s) certified at a treatment grade III.

What is the current grade of the DRC operator(s)? IV, III

- D. State of Utah Administrative Rules require all operators considered to be in DRC to be appropriately certified. List all the operators in your system by their certification class.

Not Certified	___
Treatment I	___
Treatment II	<u>1</u>
Treatment III	<u>1</u>
Treatment IV	<u>1</u>

Part VII: OPERATOR CERTIFICATION (cont.)

E. Please complete the following table:

Question	Points Earned	Total Points
Is/are your DRC operator(s) currently certified at the appropriate grade for this facility? (see C)	Yes = 0 points No = 50 points	0
How many continuing education units has each of the DRC operator(s) completed over the last 3 years?	3 or more = 0 points less than 3 = 10 points	0
TOTAL PART VII =		0

Part VIII: FACILITY MAINTENANCE

A. Please complete the following table:

Question	Points Earned	Total Points
Do you follow an annual preventative maintenance program?	Yes = 0 points No = 30 points	0
Is it written?	Yes = 0 points No = 20 points	0
Do you have an written emergency response plan?	Yes = 0 points No = 20 points	0
Do you have an updated operations and maintenance manual	Yes = 0 points No = 20 points	0
Do you have an written safety plan?	Yes = 0 points No = 20 points	0
TOTAL PART VIII =		0

Part IX: SUBJECTIVE EVALUATION

This section should be completed with the facility operators.

- A. Do you consider your wastewater facility to be in good physical and structural condition?

YES NO

If NO, why?

- B. What improvements do you think the plant will need in the next 5 years?

~~2007 New upgrade in head works~~
~~New Belt & Press~~
~~Sand Filter~~
* → Total Upgrade

- C. Did you experienced backups into basements at any point in the collection system in 2001.

YES NO

Why? (do not include backups due to clogged laterals)

- D. Does the municipality/district pay for the continuing education expenses of operators?

ALWAYS SOMETIMES NO

If they pay, what percentage?

approximately 100 %

Part IX: SUBJECTIVE EVALUATION (cont.)

E. Is there a written policy regarding continuing education and training for wastewater operators?

YES NO

F. Have you done any major repairs or mechanical equipment replacement in 2001? (do not include construction or upgrade projects)

YES NO

G. What was the approximate cost for those repairs or replacements?

\$ _____

H. Any additional comments? (Attach additional sheets if necessary.)

In 2002 The upgrade to Head Works will be complete. The new Belt Press will be complete. A sand filter is in the process to be installed.

Point Summation

Fill in the values from Parts I through VIII in the blanks provided in column 1. Add the numbers to determine the MWPP point total that your wastewater facility has generated for the past twelve months.

Part	Points
I	10
II	30
III	20
IV	0
V	20
VI	0
VII	0
VIII	0
Total	80

Municipal Wastewater Planning Program (MWPP) Collection System Section

Owner Name: SPANISH FORK CITY

Name and Title of Contact Person:

Richard Nielson

Assistant Public Works Director

Phone: 798-5000 x 26

PLEASE SUBMIT TO STATE BY: MARCH 1, 2002

Mail to: MWPP c/o Jennifer Strong
Department of Environmental Quality
Division of Water Quality
288 North 1460 West
P.O. Box 144870
Salt Lake City, Utah 84114-4870
Phone : 538-6018
E-mail: JSTRONG@DEQ.STATE.UT.US

Form completed by

Richard Nielson

Part III : NEW DEVELOPMENT

A. Please complete the following table:

Question	Points Earned	Total Points
Has there been any major new developments (industrial, commercial, or residential) such that flow in the system has significantly increase (10 - 20%) or > 25,000 gallons/day within the last year?	No = 0 points Yes = 10 points	- 0 -
Are there any new major new developments (industrial, commercial, or residential) planned in the next 2-3 years such that flow in the system could significantly increase (10 - 20%) or > 25,000 gallons/day ?	No = 0 points Yes = 10 points	10
TOTAL PART III =		10

B. Approximate number of new residential sewer connections in the last year

367 new residential connections

C. Approximate number of new commercial/industrial connections in the last year

11 new commercial/industrial connections

D. Approximate number of new population serviced in the last year

1200 new people served

Part IV: OPERATOR CERTIFICATION

A. How many collection system operators are currently employed by your system?

1 collection system operators employed

B. What is/are the name(s) of your DRC operator(s)?

Marvin Banks

Part IV: OPERATOR CERTIFICATION (cont.)

C. You are required to have the DRC operator(s) certified at collection grade II .

What is the current grade of the DRC operator(s)? III

D. State of Utah Administrative Rules require all operators considered to be in DRC to be appropriately certified. List all the operators in your system by their certification class.

Not Certified 4
 Collection I
 Collection II
 Collection III 1
 Collection IV

E. Complete the following table:

Question	Points Earned	Total Points
Is the DRC operator currently certified at the appropriate grade for this facility? (see C)	Yes = 0 points No = 50 points	- 0 -
How many continuing education units has the DRC operator completed over the last 3 years?	3 or more = 0 points less than 3 = 10 points	- 0 -
TOTAL PART IV =		- 0 -

Part V: SYSTEM MAINTENANCE

A. Please check the appropriate box:

Do you have any of the following?	Yes	No
traffic control devices (cones, barricades, etc.)	✓	
safety harness, winch, tripod	✓	
ventilation equipment	✓	
explosive meter/O ₂ meter	✓	
self contained breathing apparatus	✓	
a written confined space entry program	✓	

Part V: SYSTEM MAINTENANCE(cont.)

B. Please complete the following table:

Question	Points Earned	Total Points
Do you follow an annual preventative maintenance program? (ie. annual flushing, T.V. of lines, etc.)	Yes = 0 points No = 30 points	- 0 -
Is it written?	Yes = 0 points No = 20 points	- 0 -
Do you have an written emergency response plan?	Yes = 0 points No = 20 points	- 0 -
Do you have an written safety plan?	Yes = 0 points No = 20 points	- 0 -
TOTAL PART V =		- 0 -

Part VI: SUBJECTIVE EVALUATION

This section should be with the system operators.

A. Describe the physical condition of the sewer collection system: (lift stations, etc. included)

System is in generally good condition with some areas that are causing problems. 2 lift stations were eliminated last year as a new gravity sewer was installed

B. What sewerage system improvements does the community have under consideration for the next 10 years?

Replacement of old lines in annual projects

Part VI: SUBJECTIVE EVALUATION (cont.)

C. Explain what problems, other than plugging have you experienced over the last year

1 lift station had a pump failure

D. Is your community presently involved in formal planning for system expansion/upgrading? If so explain.

Yes, we have a plan for the next several years
for line replacement

E. How many times in the last year were there sewage in basements at any point in the collection system for any reason, except plugging of the lateral connections?

6 times sewage was in basements

F. Does the municipality/district pay for the continuing education expenses of operators?

ALWAYS X SOMETIMES _____ NO _____

If they do, what percentage is paid?

approximately 100 %

G. Is there a written policy regarding continuing education and training for wastewater operators?

YES _____ NO X

H. Any additional comments? (Attach additional sheets if necessary.)

POINT SUMMATION

Fill in the values from Parts II through V in the blanks provided in column 1. Add the numbers to determine the MWPP point total that your wastewater facility has generated for the past twelve months.

Part	Points
II	10
III	10
IV	-0-
V	-0-
Total	20

Municipal Wastewater Planning Program (MWPP) Financial Evaluation Section

Owner Name: SPANISH FORK CITY

Name and Title of Contact Person: _____

Phone: _____

PLEASE SUBMIT TO STATE BY: MARCH 1, 2002

Mail to: MWPP c/o Jennifer Strong
Department of Environmental Quality
Division of Water Quality
288 North 1460 West
P.O. Box 144870
Salt Lake City, Utah 84114-4870
Phone : 538-6018
E-mail: JSTRONG@DEQ.STATE.UT.US

NOTE: This questionnaire has been compiled for your benefit by a state sponsored task force comprised of representatives of local government and service districts. It is designed to assist you in making an evaluation of your wastewater system and financial planning. Please answer questions as accurately as possible to give you the best evaluation of your facility. If you need assistance please call Nancy Hess, Utah Division of Water Quality, (801) 538-6070.

I. Definitions: The following terms and definitions may help you complete the work-sheets and questionnaire:

User Charge (UC) - A fee established for one or more class(es) of users of the wastewater treatment facilities that generate revenues to pay for costs of the system.

Operation and Maintenance Expense - Expenditures incurred for materials, labor, utilities, and other items necessary for managing and maintaining the facility to achieve or maintain the capacity and performance for which it was designed and constructed.

Repair and Replacement Cost - Expenditures incurred during the useful life of the treatment works for obtaining and installing equipment, accessories, and/or appurtenances necessary to maintain the existing capacity and the performance for which the facility was designed and constructed.

Capital Needs - Cost to construct, upgrade or improve the facility.

Capital Improvement Reserve Account - A reserve established to accumulate funds for construction and/or replacement of treatment facilities, collection lines or other capital improvement needs.

Reserve for Debt Service - A reserve for bond repayment as may be defined in accordance with terms of a bond indenture.

Current Debt Service - Interest and principal costs for debt payable this year.

Repair and Replacement Sinking Fund - A fund to accumulate funds for repairs and maintenance to fixed assets not normally included in operation expenses and for replacement costs (defined above).

Part I: OPERATION AND MAINTENANCE

Complete the following table:

Question	Points Earned	Total
Are revenues sufficient to cover operation, maintenance, and repair & replacement (OM&R) costs <u>at this time</u> ?	YES = 0 points NO = 25 points	- 0 -
Are the projected revenues sufficient to cover operation, maintenance, and repair & replacement (OM&R) costs for the <u>next five years</u> ?	YES = 0 points NO = 25 points	- 0 -
Does the facility have sufficient staff to ensure proper O&M?	YES = 0 points NO = 25 points	- 0 -
Has a dedicated sinking fund been established to provide for repair & replacement costs?	YES = 0 points NO = 25 points	- 0 -
Is the repair & replacement sinking fund adequate to meet anticipated needs?	YES = 0 points NO = 25 points	- 0 -
TOTAL PART I =		- 0 -

Part II: CAPITAL IMPROVEMENTS

Complete the following table:

Question	Points Earned	Total
Are present revenues collected sufficient to cover all costs and provide funding for capital improvements?	YES = 0 points NO = 25 points	- 0 -
Are projected funding sources sufficient to cover all projected capital improvement costs for the <u>next five years</u> ?	YES = 0 points NO = 25 points	- 0 -
Are projected funding sources sufficient to cover all projected capital improvement costs for the <u>next ten years</u> ?	YES = 0 points NO = 25 points	- 0 -
Are projected funding sources sufficient to cover all projected capital improvement costs for the <u>next twenty years</u> ?	YES = 0 points NO = 25 points	- 0 -
Has a dedicated sinking fund been established to provide for future capital improvements?	YES = 0 points NO = 25 points	- 0 -
TOTAL PART II =		- 0 -

Part III: GENERAL QUESTIONS

Complete the following table:

Question	Points Earned	Total
Is the wastewater treatment fund a separate enterprise fund/account or district?	YES = 0 points NO = 25 points	- 0 -
Are you collecting 95% or more of your sewer billings?	YES = 0 points NO = 25 points	- 0 -
Is there a review, at least annually, of user fees?	YES = 0 points NO = 25 points	- 0 -
Are bond reserve requirements being met if applicable?	YES = 0 points NO = 25 points	- 0 -
TOTAL PART III =		- 0 -

Part IV: PROJECTED NEEDS

Estimate as best you can the following:

cost of projected capital improvements (in thousands)	2002	2003	2004	2005	2006
	710	1000	660	345	3870

Point Summation

Fill in the values from Parts I through III in the blanks provided in column 1. Add the numbers to determine the MWPP point total that reflects your present financial position for meeting your wastewater needs.

Part	Points
I	- 0 -
II	- 0 -
III	- 0 -
Total	- 0 -