

RESOLUTION No. 15-12

ROLL CALL

VOTING	YES	NO
STEVE LEIFSON <i>Mayor (votes only in case of tie)</i>		
ROD DART <i>Council member</i>	X	
RICHARD M. DAVIS <i>Council member</i>	X	
BRANDON B. GORDON <i>Council member</i>	ABSENT	
MIKE MENDENHALL <i>Council member</i>	X	
KEIR A. SCUBES <i>Council member</i>	ABSENT	

I MOVE this resolution be adopted: Council member Dart
 I SECOND the foregoing motion: Council member Mendenhall

RESOLUTION No. 15-12

A RESOLUTION APPROVING THE MUNICIPAL WASTEWATER PLANNING PROGRAM SELF ASSESSMENT REPORT FOR 2014

WHEREAS, Spanish Fork City owns and operates a wastewater utility, including all of the necessary facilities to provide wastewater services to its residents; and

WHEREAS, the City is required to file an annual municipal wastewater planning program self-assessment report with the Utah Department of Environmental Quality, Division of Water Quality; and

WHEREAS, the City has prepared the report and presented it to the Council for review;

NOW THEREFORE, be it resolved by the Spanish Fork City Council as follows:

1. The attached Annual Municipal Wastewater Planning Program Self-assessment Report for 2014 has been reviewed and accepted.
2. Staff is directed to file the Report with the Utah State Department of Environmental Quality, Division of Water Quality.

DATED this 7th day of July

Attest:


 KENT R. CLARK, Recorder




 STEVE LEIFSON, Mayor

STATE OF UTAH

MUNICIPAL WASTEWATER PLANNING PROGRAM

SELF-ASSESSMENT REPORT

FOR

SPANISH FORK

2014



Resolution Number 15-12

MUNICIPAL WASTEWATER PLANNING PROGRAM RESOLUTION

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

1. Reviewed the attached Municipal Wastewater Planning Program Report for 2014.
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

7-7-15

(date)



Mayor/Chairman

Steve Larson

 7-8-15

Attest:

Recorder/Clerk

Kent R. Clark



Municipal Wastewater Planning Program (MWPP) Financial Evaluation Section

Owner Name: *SPANISH FORK*

Name and Title of Financial Contact Person:

Chris Thompson
Public Works Director

Phone: *(801) 804-4556*

E-mail: *cthompson@spanishfork.org*

PLEASE SUBMIT TO STATE BY: May 1, 2015

Mail to: MWPP - Department of Environmental Quality
Division of Water Quality
195 North 1950 West
P.O. Box 144870
Salt Lake City, Utah 84114-4870
Phone : (801) 536-4300

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 <i>at this time?</i>	YES = 0 points NO = 25 points	0
Are the projected revenues sufficient to cover operation, maintenance, and repair & replacement (OM&R) costs for the <i>next five years?</i>	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 <i>next five years?</i>	YES = 0 points NO = 25 points	0
Are projected funding sources sufficient to cover all projected capital improvement costs for the <i>next ten years?</i>	YES = 0 points NO = 25 points	0
Are projected funding sources sufficient to cover all projected capital improvement costs for the <i>next twenty years?</i>	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

Municipal Wastewater Planning Program (MWPP) Collection System Section

Owner Name: SPANISH FORK

Name and Title of Contact Person:

James M. Chappel
Streets & Sewer Manager

Phone:

801-921-9854

E-mail:

jchappel@spanishfork.org

PLEASE SUBMIT TO STATE BY: May 1, 2015

Mail to: MWPP - Department of Environmental Quality
Division of Water Quality
195 North 1950 West
P.O. Box 144870
Salt Lake City, Utah 84114-4870
Phone : (801) 536-4300

Form completed by

James M. Chappel

Part I: SYSTEM AGE

A. What year was your collection system first constructed (approximately)?

Year 1935

B. What is the oldest part of your present system?

Oldest part 68 years

Part II: BYPASSES

A. Please complete the following table:

Question	Number	Points Earned	Total Points
How many days last year was there a bypass, overflow or basement flooding by untreated wastewater in the system due to rain or snowmelt?		0 times = 0 points 1 time = 5 points 2 times = 10 points 3 times = 15 points 4 times = 20 points 5 or more = 25 points	0
How many days last year was there a bypass, overflow or basement flooding by untreated wastewater due to equipment failure? (except plugged laterals)		0 times = 0 points 1 time = 5 points 2 times = 10 points 3 times = 15 points 4 times = 20 points 5 or more = 25 points	1
TOTAL PART II =			5

B. The Utah Sewer Management Program defines sanitary sewer overflows into two classes. Below include the number of SSOs that occurred in 2014:

Number of Class 1 SSOs in Calendar year 2014 1

Number of Class 2 SSOs in Calendar year 2014 1

Class 1- a Significant SSO means a SSO or backup that is not caused by a private lateral obstruction or problem that:

- (a) effects more than five private structures;
- (b) affects one or more public, commercial or industrial structure(s);
- (c) may result in a public health risk to the general public;
- (d) has a spill volume that exceeds 5,000 gallons, excluding those in single private structures; or
- (e) discharges to Waters of the state.

Class 2 – a Non-Significant SSO means a SSO or backup that is not caused by a private lateral obstruction or problem that does not meet the Class 1 SSO criteria.

Part II: BYPASSES (cont.)

C. Please specify whether the SSOs were caused a contract or tributary community, etc.

N/A

Part III: 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	NO 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	NO 0
TOTAL PART III =		0

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

130 new residential connections

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

46 new commercial/industrial connections

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

720 new people served

Part IV: OPERATOR CERTIFICATION

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

9 collection system operators employed

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

James M. Chappel

Ed Roberts

Don Stoneman

C. You are required to have the collection DRC operator(s) certified at **Grade III**

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

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

Not Certified _____
 Small Lagoons _____
 Collection I 1 _____
 Collection II _____
 Collection III 8 _____
 Collection IV 1 _____

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	Yes 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	3 or more 0
TOTAL PART IV =		0

Part V: 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	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is it written?	Yes = 0 points No = 20 points	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Do you have a written emergency response plan?	Yes = 0 points No = 20 points	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Do you have an updated operations and maintenance manual	Yes = 0 points No = 20 points	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Do you have a written safety plan?	Yes = 0 points No = 20 points	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
TOTAL PART V =		<input checked="" type="checkbox"/>

Part VI: SSMP EVALUATION

- A. Has your system completed its Sewer System Management Plan (SSMP)?
 Yes NO
- B. If the SSMP has been completed then has the SSMP been public noticed?
 No Yes, included date of public notice July 2, 2015
- C. Has the SSMP been approved by the permittee's governing body at a public meeting?
 Yes NO
- D. During the annual assessment of the operation and maintenance plan were any adjustments needed based on the performance of the plan?
 No If yes, what components of the plan were changed (i.e. line cleaning, CCTV inspections and manhole inspections and/or SSO events)
-
-

Part VI: SSMP EVALUATION (cont.)

E. During 2014 was any part of the SSMP audited as part of the five year audit?

No

If yes, what part of the SSMP was audited and were changed made to the SSMP as a result of the audit? _____

F. Has your system completed its *System Evaluation and Capacity Assurance Plan (SECAP)* as defined by the Utah Sewer Management Program?

Yes NO

The following are required completion dates that the SSMP and SECAP based on population. The SSMP and SECAP must be public noticed and approved by the permittee's governing body in order to be considered complete.

Program	Population				
	< 2,000	2,000 - 3,500	3,501 – 15,000	15,001 – 50,000	> 50,000
SSMP	3-31-16	3-31-16	9-30-15	3-31-15	9-30-14
SECAP	Optional	9-30-17	9-30-16	3-31-16	9-30-15

SSMP Signatory Requirement

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Signatory Official

Date

Print Name of Signatory Official

Title

The signatory official is the person authorized to sign permit documents, per R317-8-3.4.

Part VII: SUBJECTIVE EVALUATION

This section should be with the system operators.

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

Lift Station are newer and in great shape with daily inspections and maintenance. Sewer lines are cleaned as per the city's maintenance plan.

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

The city has a ten year replacement plan and continues to replace main trunk lines that are in need each year. We have also been working on I&I problems by slip lining the pipes and sealing manholes.

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

We have not experienced any problems with our system this year

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

With the growth that has occurred we are always expanding and upgrading our system. The city keeps the community involved with public meetings.

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

ALWAYS SOMETIMES NO

If they do, what percentage is paid?

approximately 100 %

Municipal Wastewater Planning Program (MWPP) Mechanical Plant Section

Owner Name: SPANISH FORK

Name and Title of Contact Person:

Dennis R. Sorenson
POTW Manager

Phone: 801 804 4466

E-mail: d.sorenson@spanishfork.org

PLEASE SUBMIT TO STATE BY: May 1, 2015

Mail to: MWPP - Department of Environmental Quality
Division of Water Quality
195 North 1950 West
P.O. Box 144870
Salt Lake City, Utah 84114-4870
Phone : (801) 536-4300

Form completed by

Dennis R Sorenson

Part I: INFLUENT INFORMATION

A. Please update (if needed) 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	6 MGD	9007	9007
90% of the Design Criteria	5.4	8106	8106

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 2014. (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	3.2	252	6725	369	19848
February	3.6	252	7566	406	12190
March	3.4	235	6664	339	9613
April	3.9	309	10051	376	12230
May	4.4	291	10679	384	14091
June	4.2	163	5710	187	6550
July	4.4	171	6275	207	7596
August	4.5	247	9270	313	11747
September	4.8	142	5685	168	6725
October	4.1	159	5437	184	6292
November	3.7	174	5369	215	6634
December	4.0	171	5705	176	5871
Average	4.0	213.8	7094	277	9116

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

Part II: EFFLUENT INFORMATION

A. Please list the average monthly BOD₅, TSS, Ammonia (NH₃), monthly maximum Cl₂, minimum monthly DO, and 30-day geometric averages for Fecal and Total Coliform, or E-Coli produced by your facility during 2014.

Month	(1) BOD ₅ (mg/L)	(2) TSS (mg/L)	(3) Fecal Coliform (#/100 mL)	(4) Total Coliform (#/100 mL)	(5) E-Coli	(6) Cl ₂ (mg/L)	(7) DO (mg/L)	(8) NH ₃ (mg/L)
	Whole Numbers Only					One Decimal Place Only		
January	7	8	N/A	N/A	1	1.9	4.5	17.9
February	10	6			1	1.9	4.3	18.9
March	8	5			1	1.5	4.5	17.6
April	10	7			5	1.6	4	10.9
May	14	10			30	2	4	18.5
June	10	12			7	1.9	4.3	12.9
July	10	10			2	1.4	4	7.4
August	7	6			3	1.0	4	6.8
September	14	6			3	1.6	4.5	9.0
October	8	8			3	1.7	4.2	12.8
November	13	10			3	1.6	4	12.9
December	12	12			2	1.7	4.5	15
Average	10	8			3	1.7	4.2	13.4

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

	BOD ₅ (CBOD ₅) (mg/L)	maximum Cl ₂ (mg/L)	NH ₃ (mg/L)	minimum DO (mg/L)
Monthly Permit Limit	25	2	18	4
80% of the Permit Limit	20	1.6	14.4	4.1

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?	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 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 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?	0	0 = 0 points 1 - 2 = 15 points 3 or more = 30 points	0
How many months did the 30-day fecal coliform exceed 200 #/100 mL?	N/A	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	
How many months did the 30-day total coliform exceed 2,000 #/100 mL?	N/A	0 = 0 points 1 - 2 = 10 points 3 or more = 20 points	
How many months did the 30-day E-coli exceed 126 #/100 mL?	0	0 = 0 points 1 - 2 = 20 points 3 or more = 40 points	0
TOTAL PART II =			0

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 2014.

Points = Age = Present Year - Construction or Upgrade Year.

Enter the calculated age below.

If the point total exceeds 20 points, enter only 20 points.

Unit Process	Current Year	Construction or Last Upgrade Year	Age = Points
Headworks	2014	2001	13
Primary Treatment	2014	2013	1
Secondary Treatment	2014	2014	0
Solids Handling	2014	2009	5
Disinfection	2014	1998	16
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 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 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
Landfill	Class B = 0 points < Class B = 50 points	0
Land Application	Site Life 0 - 5 years = 20 points 5 - 10 years = 10 points 10+ years = 0 points	0
Give Away/Distribution and Marketing	Class A = 10 points Class B = 20 points	N/A
TOTAL PART V =		0

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 septage 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
130 new residential connections
- C. Approximate number of new commercial/industrial connections in the last year
46 new commercial/industrial connections
- D. Approximate number of new population serviced in the last year
720 new people served

Part VII: OPERATOR CERTIFICATION

- A. How many operators are currently employed by your facility?
3 operator(s) employed
- B. What is/are the name(s) of your DRC operator(s)?
Dennis R. Sorenson
Benn P. Winn

- C. You are required to have the treatment DRC operator(s) certified at GRADE III.
What is the current grade of the DRC operator(s)? IV
- D. State of Utah Administrative Rules Require that all operators considered to be in DRC to be appropriately certified. List all the operators in your system by their certification class.

Not Certified	<u>0</u>
Treatment I	<u>0</u>
Treatment II	<u>1</u>
Treatment III	<u>0</u>
Treatment IV	<u>2</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 a 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 a 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 0 NO _____

If NOT, why?

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

Nutrient removal

- C. Where there any backups into basements at any point in the collection system in 2014.

YES X NO _____

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

Because of baby + Hand wipes at an offset joint. The joint was repaired.

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

ALWAYS X SOMETIMES _____ NO _____

If so, what percentage do they pay?

approximately 100 %

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	60
II	0
III	20
IV	0
V	0
VI	0
VII	0
VIII	0
Total	80