

New York State Department of Environmental Conservation

Division of Environmental Permits, 4th Floor

625 Broadway, Albany, New York 12233-1750

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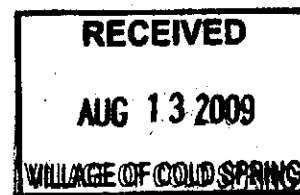
Website: www.dec.ny.gov



Alexander B. Grannis
Commissioner

August 10, 2009

Honorable Seth J. Gallagher
Mayor, Village of Cold Spring
85 Main Street
Cold Spring, NY 10516



Re: Cold Spring Wastewater Treatment Plant
DEC#: 3-3726-00010/00003 SPDES #: NY 002 2721

Dear Mayor Gallagher:

Enclosed is a final modified State Pollutant Discharge Elimination System (SPDES) permit for the above referenced facility. This permit has been modified in accordance with the Environmental Benefit Permit Strategy. No comments were received on this modification.

Should you have questions on the administration of this modification, please feel free to contact me at the address or phone number listed above. Should you have technical questions on permit content, please contact the permit writer, Aparna Roy, at (914) 428-2505, ext 362, or the Regional Water Engineer, Tom Rudolph, at (914) 428-2505, ext 350.

Sincerely,

Teresa Diehsner
Division of Environmental Permits

Enclosure

cc: M. Duke, RPA
T. Rudolph, RWE
A. Roy, Permit Writer
DOW-BWP Permit Coordinator
M. Josilo, EPA Reg II
Putnam Co DOH
G. Phillips, (V) Cold Spring



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
State Pollutant Discharge Elimination System (SPDES)
DISCHARGE PERMIT

First3.99

Industrial Code: **4952**
Discharge Class (CL): **07**
Toxic Class (TX): **N**
Major Drainage Basin: **13**
Sub Drainage Basin: **01**
Water Index Number: **H portion**
Compact Area:

SPDES Number: **NY 0022721**
DEC Number: **3-3726-00010/00003**
Effective Date (EDP): **08/01/2009**
Expiration Date (ExDP): **07/31/2014**
Modification Dates:(EDPM) **09/01/2009**

This SPDES permit is issued in compliance with Title 8 of Article 17 of the Environmental Conservation Law of New York State and in compliance with the Clean Water Act, as amended, (33 U.S.C. §1251 et.seq.) (hereinafter referred to as "the Act").

PERMITTEE NAME AND ADDRESS

Name: Village of Cold Spring
Street: 85 Main Street
City: (V) Cold Spring

Attention: Mayor

State: NY Zip Code: 10516

is authorized to discharge from the facility described below:

FACILITY NAME AND ADDRESS

Name: Cold Spring Wastewater Treatment Plant
Location (C,T,V): (V) Cold Spring
Facility Address: 53 Fair Street
City: (V) Cold Spring

County: Putnam

State: NY Zip Code: 10516

NYTM -E:

NYTM - N:

From Outfall No.: 001 at Latitude: 41 ° 25 ' 00 " & Longitude: 73 ° 57 ' 30 "
into receiving waters known as: Hudson River Class: B

and; (list other Outfalls, Receiving Waters & Water Classifications)

in accordance with: effluent limitations; monitoring and reporting requirements; other provisions and conditions set forth in this permit; and 6 NYCRR Part 750-1.2(a) and 750-2.

DISCHARGE MONITORING REPORT (DMR) MAILING ADDRESS

Mailing Name: Superintendent, Water and Sewer
Street: 53 Fair Street
City: (V) Cold Spring
Responsible Official or Agent: Gregory R. Phillips

State: NY Zip Code: 10516
Phone: (845) 265-9293

This permit and the authorization to discharge shall expire on midnight of the expiration date shown above and the permittee shall not discharge after the expiration date unless this permit has been renewed, or extended pursuant to law. To be authorized to discharge beyond the expiration date, the permittee shall apply for permit renewal not less than 180 days prior to the expiration date shown above.

DISTRIBUTION:

CO BWP Permit Coordinator
RWE
RPA
EPA Region II - Michelle Josilo
NYSEFC

Deputy Chief Permit Administrator: Stuart M. Fox	
Address: Division of Environmental Permits 625 Broadway Albany, NY 12233-1750	
Signature: <i>Stuart M. Fox</i>	Date: 8/10/09

PERMIT LIMITS, LEVELS AND MONITORING DEFINITIONS

OUTFALL	WASTEWATER TYPE	RECEIVING WATER	EFFECTIVE	EXPIRING		
	This cell describes the type of wastewater authorized for discharge. Examples include process or sanitary wastewater, storm water, non-contact cooling water.	This cell lists classified waters of the state to which the listed outfall discharges.	The date this page starts in effect. (e.g. EDP or EDPM)	The date this page is no longer in effect. (e.g. ExDP)		
PARAMETER	MINIMUM	MAXIMUM	UNITS	SAMPLE FREQ.	SAMPLE TYPE	
e.g. pH, TRC, Temperature, D.O.	The minimum level that must be maintained at all instants in time.	The maximum level that may not be exceeded at any instant in time.	SU, °F, mg/l, etc.			
PARA-METER	EFFLUENT LIMIT	PRACTICAL QUANTITATION LIMIT (PQL)	ACTION LEVEL	UNITS	SAMPLE FREQUENCY	SAMPLE TYPE
	Limit types are defined below in Note 1. The effluent limit is developed based on the more stringent of technology-based standards, required under the Clean Water Act, or New York State water quality standards. The limit has been derived based on existing assumptions and rules. These assumptions include receiving water hardness, pH and temperature; rates of this and other discharges to the receiving stream; etc. If assumptions or rules change the limit may, after due process and modification of this permit, change.	For the purposes of compliance assessment, the analytical method specified in the permit shall be used to monitor the amount of the pollutant in the outfall to this level, provided that the laboratory analyst has complied with the specified quality assurance/quality control procedures in the relevant method. Monitoring results that are lower than this level must be reported, but shall not be used to determine compliance with the calculated limit. This PQL can be neither lowered nor raised without a modification of this permit.	Type I or Type II Action Levels are monitoring requirements, as defined below in Note 2 that trigger additional monitoring and permit review when exceeded.	This can include units of flow, pH, mass, Temperature, concentration. Examples include µg/l, lbs/d, etc.	Examples include Daily, 3/week, weekly, 2/month, monthly, quarterly, 2/yr and yearly.	Examples include grab, 24 hour composite and 3 grab samples collected over a 6 hour period.

Note 1: DAILY DISCHARGE: The discharge of a pollutant measured during a calendar day or any 24-hour period that reasonably represents the calendar day for the purposes of sampling. For pollutants expressed in units of mass, the 'daily discharge' is calculated as the total mass of the pollutant discharged over the day. For pollutants with limitations expressed in other units of measurement, the 'daily discharge' is calculated as the average measurement of the pollutant over the day.

DAILY MAX: The highest allowable daily discharge. **DAILY MIN:** The lowest allowable daily discharge.

MONTHLY AVG (daily avg): The highest allowable average of daily discharges over a calendar month, calculated as the sum of each of the daily discharges measured during a calendar month divided by the number of daily discharges measured during that month.

RANGE: The minimum and maximum instantaneous measurements for the reporting period must remain between the two values shown.

7 DAY ARITHMETIC MEAN (7 day average): The highest allowable average of daily discharges over a calendar week. **12 MRA (twelve month rolling avg):** The average of the most recent twelve month's monthly averages.

30 DAY GEOMETRIC MEAN (30 d geo mean): The highest allowable geometric mean of daily discharges over a calendar month, calculated as the antilog of: the sum of the log of each of the daily discharges measured during a calendar month divided by the number of daily discharges measured during that month.

7 DAY GEOMETRIC MEAN (7 d geo mean): The highest allowable geometric mean of daily discharges over a calendar week.

Note 2: ACTION LEVELS: Routine Action Level monitoring results, if not provided for on the Discharge Monitoring Report (DMR) form, shall be appended to the DMR for the period during which the sampling was conducted. If the additional monitoring requirement is triggered as noted below, the permittee shall undertake a short-term, high-intensity monitoring program for the parameter(s). Samples identical to those required for routine monitoring purposes shall be taken on each of at least three consecutive operating and discharging days and analyzed. Results shall be expressed in terms of both concentration and mass, and shall be submitted no later than the end of the third month following the month when the additional monitoring requirement was triggered. Results may be appended to the DMR or transmitted under separate cover to the same address. If levels higher than the Action Levels are confirmed, the permit may be reopened by the Department for consideration of revised Action Levels or effluent limits. The permittee is not authorized to discharge any of the listed parameters at levels which may cause or contribute to a violation of water quality standards. **TYPE I:** The additional monitoring requirement is triggered upon receipt by the permittee of any monitoring results in excess of the stated Action Level. **TYPE II:** The additional monitoring requirement is triggered upon receipt by the permittee of any monitoring results that show the stated action level exceeded for four of six consecutive samples or for two of six consecutive samples by 20 % or more or for any one sample by 50 % or more.

PERMIT LIMITS, LEVELS AND MONITORING

OUTFALL No.	LIMITATIONS APPLY:	RECEIVING WATER	EFFECTIVE	EXPIRING
001	All year unless otherwise noted	Hudson River	09/01/2009	07/31/2014

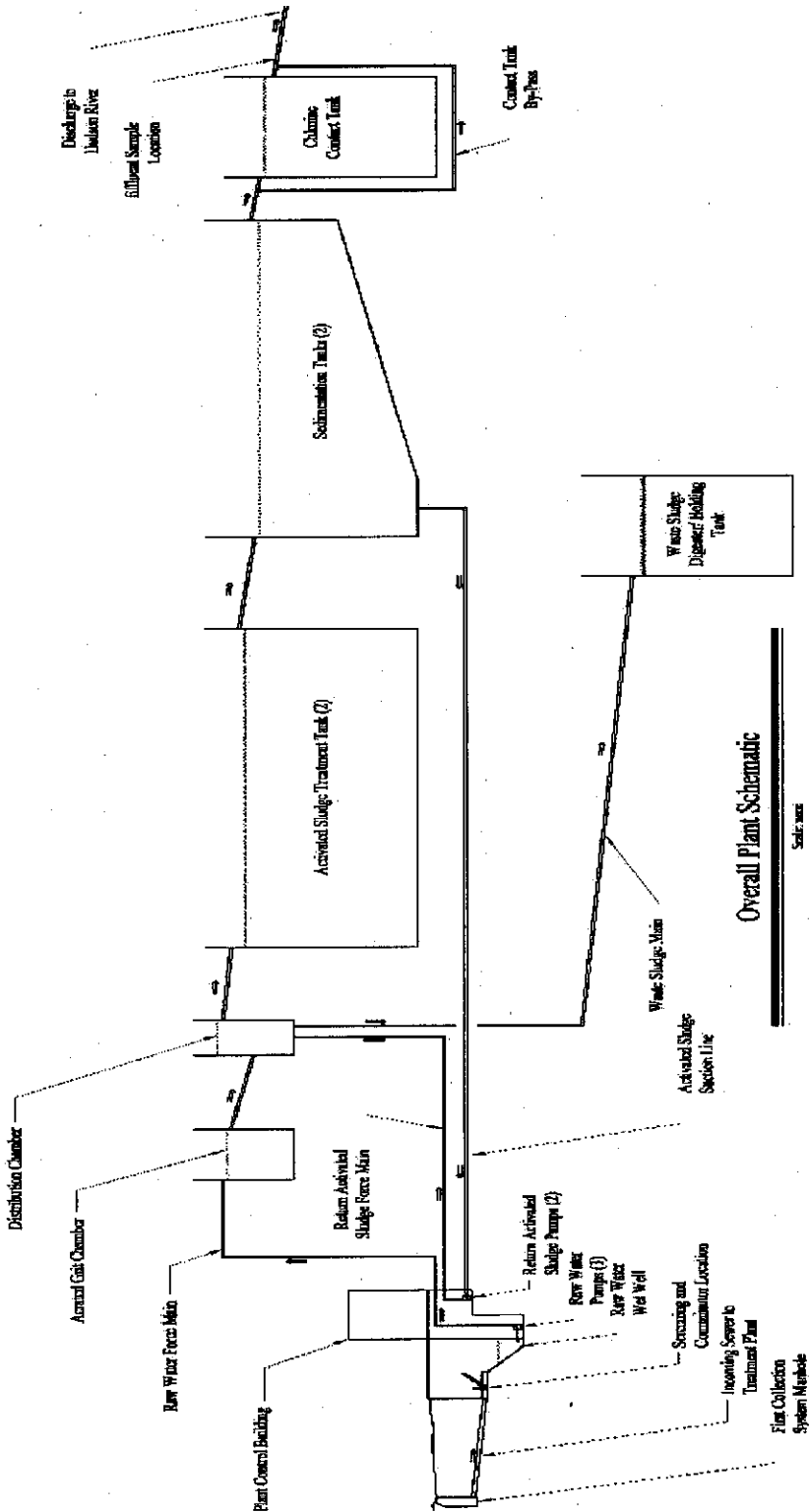
PARAMETER	EFFLUENT LIMIT					MONITORING REQUIREMENTS				FN
	Type	Limit	Units	Limit	Units	Sample Frequency	Sample Type	Location		
								Influent	Effluent	
Flow	Monthly Average	0.5	MGD			Continuous	Recorder	X		
BOD ₅	Monthly Average	30	mg/l	125	lbs/d	2/Month	6 hr. comp	X	X	(1)
BOD ₅	7 Day Average	45	mg/l	188	lbs/d	2/Month	6 hr. comp.		X	
Solids, Suspended	Monthly Average	30	mg/l	125	lbs/d	2/Month	6 hr. comp	X	X	(1)
Solids, Suspended	7 Day Average	45	mg/l	188	lbs/d	2/Month	6 hr. comp		X	
Solids, Settleable	Daily maximum	0.3	ml/l			Daily	Grab		X	
pH	Range	6.0 -9.0	SU			Daily	Grab		X	
Nitrogen, Ammonia (as NH ₃), Nov 1-May 31	Monthly Average	2.2	mg/l			2/Month	6 hr. comp.		X	
Nitrogen, Ammonia (as NH ₃), June 1-Oct 31	Monthly Average	1.5	mg/l			2/Month	6 hr. comp.		X	
Temperature	Daily Maximum	Monitor	Deg C			Daily	Grab		X	
Effluent Disinfection required: [] All Year [x] Seasonal from <u>May 15</u> to <u>October 15</u>										
Coliform, Fecal	30 Day Geometric Mean	200	No./100 ml			2/Month	Grab		X	
Coliform, Fecal	7 Day Geometric Mean	400	No./100 ml			2/Month	Grab		X	
Chlorine, Total Residual	Daily maximum	2.0	mg/l			Daily	Grab		X	(2)

FOOTNOTES:(1) and effluent shall not exceed 15 % and 15 % of influent concentration values for BOD₅ & TSS respectively.

(2) Sample contact chamber effluent.

MONITORING LOCATIONS

The permittee shall take samples and measurements, to comply with the monitoring requirements specified in this permit, at the location(s) specified below:



SCHEDULE OF COMPLIANCE**Inflow and Infiltration Program**

Action Code	Outfall Number(s)	Compliance Action	Due Date
	001	Permittee must maintain and periodically update the map of the sanitary collection system.	On Going basis
		Submit written confirmation of the elimination of the twelve known illegal connection identified during the smoke test on September 2007.	10/01/2009
		Conduct dye testing in the suspected areas identified during smoke test of September 2007.	03/01/2010
		Perform smoke test along Main Street. Submit findings and recommendations to the Department. This report should include a schedule of repairs, which will be enforceable under this permit.	
		Establish an inventory of manholes which require shields and provide inflow shields on at least 25% of manholes in the inventory each year.	09/01/2010
		Establish a three year flow monitoring plan and initiate flow monitoring and recommend areas for further investigation.	09/01/2010
		Initiate detailed inspections and eliminate cross connections and/or I/I as they are identified.	03/01/2011
		Permittee shall submit an annual I/I program report no later than January 31 of each year detailing the actions taken the preceding year. The report shall contain: details of the repairs completed each year; details of monitoring performed; list of repairs planned for the next year, the occurrence of sanitary sewer overflows from the collection system and evaluate the effect on the influent flow to the treatment plant. A commitment to a comprehensive and effective sewer maintenance program shall be a part of this report.	Annual report must be submitted every January 31st

The above compliance actions are one time requirements. The permittee shall comply with the above compliance actions to the Department's satisfaction once. When this permit is administratively renewed by NYSDEC letter entitled "SPDES NOTICE/RENEWAL APPLICATION/PERMIT," the permittee is not required to repeat the submission(s) noted above. The above due dates are independent from the effective date of the permit stated in the letter of "SPDES NOTICE/RENEWAL APPLICATION/PERMIT."

- c) The permittee shall submit a written notice of compliance or non-compliance with each of the above schedule dates no later than 14 days following each elapsed date, unless conditions require more immediate notice in accordance with 6NYCRR Part 750-2.7. All such compliance or non-compliance notification shall be sent to the locations listed under the section of this permit entitled RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS. Each notice of non-compliance shall include the following information:
1. A short description of the non-compliance;
 2. A description of any actions taken or proposed by the permittee to comply with the elapsed schedule requirements without further delay and to limit environmental impact associated with the non-compliance;
 3. A description or any factors which tend to explain or mitigate the non-compliance; and
 4. An estimate of the date the permittee will comply with the elapsed schedule requirement and an assessment of the probability that the permittee will meet the next scheduled requirement on time.
- d) The permittee shall submit copies of any document required by the above schedule of compliance to NYSDEC Regional Water Engineer and to the Bureau of Water Permits, 625 Broadway, Albany, N.Y. 12233-3505, unless otherwise specified in this permit or in writing by the Department.

DISCHARGE NOTIFICATION REQUIREMENTS

a) The permittee shall maintain the existing identification signs at all outfalls to surface waters, which have not been waived by the Department in accordance with 17-0815-a. The sign(s) shall be conspicuous, legible and in as close proximity to the point of discharge as is reasonably possible while ensuring the maximum visibility from the surface water and shore. The signs shall be installed in such a manner to pose minimal hazard to navigation, bathing or other water related activities. If the public has access to the water from the land in the vicinity of the outfall, an identical sign shall be posted to be visible from the direction approaching the surface water.

The signs shall have minimum dimensions of eighteen inches by twenty four inches (18" x 24") and shall have white letters on a green background and contain the following information:

N.Y.S. PERMITTED DISCHARGE POINT**SPDES PERMIT No.: NY_____****OUTFALL No. : _____**

For information about this permitted discharge contact:

Permittee Name: _____

Permittee Contact: _____

Permittee Phone: () - ### - ####

OR:

NYSDEC Division of Water Regional Office Address :

NYSDEC Division of Water Regional Phone: () - ### - ####

b) For each discharge required to have a sign in accordance with a), the permittee shall provide for public review at a repository accessible to the public, copies of the Discharge Monitoring Reports (DMRs) as required by the RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS page of this permit. This repository shall be open to the public, at a minimum, during normal daytime business hours. The repository may be at the business office repository of the permittee or at an off-premises location of its choice (such location shall be the village, town, city or county clerk's office, the local library or other location as approved by the Department). In accordance with the RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS page of your permit, each DMR shall be maintained on record for a period of five years.

c) The permittee shall periodically inspect the outfall identification signs in order to ensure that they are maintained, are still visible and contain information that is current and factually correct.

RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS

- a) The permittee shall also refer to 6 NYCRR Part 750-1.2(a) and 750-2 for additional information concerning monitoring and reporting requirements and conditions.
- b) The monitoring information required by this permit shall be summarized, signed and retained for a period of five years from the date of the sampling for subsequent inspection by the Department or its designated agent. **Also, monitoring information required by this permit shall be summarized and reported by submitting;**

☒ (if box is checked) completed and signed Discharge Monitoring Report (DMR) forms for each 1 month reporting period to the locations specified below. Blank forms are available at the Department's Albany office listed below. The first reporting period begins on the effective date of this permit and the reports will be due no later than the 28th day of the month following the end of each reporting period.

☐ (if box is checked) an annual report to the Regional Water Engineer at the address specified below. The annual report is due by February 1 and must summarize information for January to December of the previous year in a format acceptable to the Department.

☒ (if box is checked) a monthly "Wastewater Facility Operation Report..." (form 92-15-7) to the:

☒ Regional Water Engineer and/or ☒ County Health Department or Environmental Control Agency specified below

Send the DMRs with original signatures to:

Department of Environmental Conservation
Division of Water
Bureau of Water Compliance Programs
625 Broadway
Albany, New York 12233-3506

Phone: (518) 402-8177

Send a copy of each DMR page to:

Department of Environmental Conservation
Regional Water Engineer
100 Hillside Avenue Suite 1W
White Plains, New York 10603

Phone: 914-428-2505

Send an additional copy of each DMR page to:

Putnam County Health Department
1 Geneva Rd.
Brewster, New York 10509-2339

- c) Noncompliance with the provisions of this permit shall be reported to the Department as prescribed in 6 NYCRR Part 750-1.2(a) and 750-2.
- d) Monitoring must be conducted according to test procedures approved under 40 CFR Part 136, unless other test procedures have been specified in this permit.
- e) If the permittee monitors any pollutant more frequently than required by the permit, using test procedures approved under 40 CFR Part 136 or as specified in this permit, the results of this monitoring shall be included in the calculations and recording of the data on the Discharge Monitoring Reports.
- f) Calculation for all limitations which require averaging of measurements shall utilize an arithmetic mean unless otherwise specified in this permit.
- g) Unless otherwise specified, all information recorded on the Discharge Monitoring Report shall be based upon measurements and sampling carried out during the most recently completed reporting period.
- h) Any laboratory test or sample analysis required by this permit for which the State Commissioner of Health issues certificates of approval pursuant to section five hundred two of the Public Health Law shall be conducted by a laboratory which has been issued a certificate of approval. Inquiries regarding laboratory certification should be sent to the Environmental Laboratory Accreditation Program, New York State Health Department Center for Laboratories and Research, Division of Environmental Sciences, The Nelson A. Rockefeller Empire State Plaza, Albany, New York 12201.

SPDES FACT SHEET NARRATIVE
For Cold Spring Wastewater Treatment Plant
March 2009

The Department of Environmental Conservation has initiated a modification of the State Pollutant Discharge Elimination System (SPDES) permit for the Cold Spring Wastewater Treatment Plant. This modification is undertaken pursuant to 6 NYCRR Part 750-1.18(b) (1), New York State's Environmental Benefit Permit Strategy (EBPS). The following permit has been modified:

Facility	SPDES Permit Number	DEC Number
Cold Spring Wastewater Treatment Plant	NY 002 2721	3-3726-00010/00003

In response to the Department's April 10, 2008 Request for Information under the EBPS system, Cold Spring Wastewater Treatment Plant provided sampling data and a SPDES Permit application packet on July 7, 2008. Based upon the review of this information and the discharge monitoring results from January 2005 to February 2008, a revised SPDES permit has been drafted. This draft permit has been modified from the existing SPDES Permit in the following ways:

Draft Permit Pages

- Updated permit pages and conditions reflect current Department guidance, format and nomenclature.
- Permit pages and conditions have been renumbered and reordered.
- Permit Limits, Levels and Monitoring Definitions Page has been added.
- The monitoring locations for the Permit Limits, Levels and Monitoring pages have been updated.
- The footnotes for the Permit Limits, Levels and Monitoring pages have been updated and reordered.
- Monitoring location Section has been added to show the effluent sampling location.
- A Compliance Schedule section has been added requiring the permittee to eliminate Inflow and Infiltration problem.
- Discharge Notification Requirements section has been added to address the identification signs of all outfalls to surface waters.

Draft Permit Limits, Levels and Monitoring

- The total residual chlorine (TRC) limit at Outfall 001 has been changed from a technology based range of 0.5-2.0 mg/l to a limit of 2.0 mg/l.
- Limits for Nitrogen (as NH₃) have been added based on effluent based water quality standards.