



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
Division of Water Resources

William R. Snodgrass Tennessee Tower, 312 Rosa L. Parks Ave., 11th Floor, Nashville, TN 37243
1-888-891-8332 (TDEC)

OCT 05 2020

Division of Water Resources

Notice of Intent (NOI) - General Permit for Dischargers from Water Treatment Plants

Type of application (NOI): New Reissuance Modification

(If this NOI is Reissuance or Modification provide the existing permit tracking number: TNR05_____)

Facility Name: ATHOWOMINEE WATER TREATMENT PLANT CURRENT NPDES # TN0081299	County: HAWKINS		
Street Address or Location: 1179 OLD STAGE RD, ROGERSVILLE, TN 37857	Latitude: (DD.DDD)	36D25'09.10" N	
	Longitude: (-DD.DDD)	82D56'15.29"W	
Attach a copy of a topo map, a city map, or a county map, identifying the location of this facility and each outfall			<input checked="" type="checkbox"/> Map Attached

Owner or Operator: (the person or legal entity which controls facility's operation; this may or may not be the same as the facility name or the official contact name):
LAKEVIEW UTILITY DISTRICT OF HAWKINS COUNTY TN

1	Official Contact Person Name: (individual responsible for a facility) TIM CARWILE	Title or Position: GENERAL MANAGER		
	Mailing Address: PO BOX 99	City: ROGERSVILLE	State: TN	Zip: 37857
	Phone: () (423) 272-5126	E-mail: lakeviewud@bellsouth.net		

2	Local Contact Person Name: (if appropriate, write "same as #1") SAME AS #1	Title or Position: GENERAL MANAGER		
	Facility Address: (may or may not be the same as street address) 1179 OLD STAGE RD	Facility City: ROGERSVILLE	State: TN	Zip: 37857
	Phone: () (423) 272-5126	E-mail:		

Write in the box (to the right) or circle the number (above) to indicate where to send correspondence:

1

PROCESS DESCRIPTION (Reply on a separate page, if necessary)

Name of surface waters receiving the discharge: (and the mileage point, if available)
UNNAMED TRIBUTARY TO HOLSTON RIVER. DISCHARGE POINT: LAT: 36D25'07.97"N LONG: 82D56'12.82"W

A description of the source of the raw water; if surface water is used, include the distance the plant is located from the intake point; if the source is groundwater, include the number and depth of wells.
GROUNDWATER: 2 WELLS: HIRSUTE (305') OMG (245')

Submit the original completed and signed form to the above address or a scanned PDF copy to Water.Permits@tn.gov



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A description of the plant, i.e. iron removal, manganese and/or turbidity removal, and a list of any additives used in the water treatment process, such as coagulant, oxidizing enhancers, etc. TURBIDITY REMOVAL BY PRESSURE MEMBRANE MICROFILTRATION UNITS. POST TREATMENT FINISHED WATER CHLORINATION WITH SODIUM HYPOCHLORITE. NO COAGULANTS OR OXIDIZING ENHANCERS USED	
Design capacity of treatment plant in millions of gallons per day (MGD):	0.120
Number and volume of sedimentation basins:	1
Average flow of finished water production in MGD over 12 months prior to submission of the NOI:	0.0848
Filter backwashing. Number of filters backwashed:	2
Frequency for each filter:	112 times per week.
Amount of water used to backwash:	200 for each filter.
Frequency sedimentation basin is washed out:	n/a times per year.
Amount of water used to wash out the largest sedimentation basin:	n/a gallons.
Describe type of treatment provided for backwash and sedimentation basin washwaters and the design capacity of the treatment system: SODIUM THIOSULFATE FOR DECHLORINATION. DESIGN CAPACITY OF THE TREATMENT SYSTEM: 0.120 MGD. NO SLUDGE GENERATED.	
Water is released from the backwash settling basin	n/a times per week for n/a hours per release and a volume of n/a gallons per release.
For existing facility, give averages from last 12 months of operation. For new facilities, indicate "not available." Describe more fully, if necessary. DISCHARGE IS CONTINUOUS OVERFLOW ~ 3700 GALLONS PER DAY	
A description of how sludge from the settling processes are disposed, for example, landfill, land applied, etc. NO SLUDGE GENERATED DURING WATER TREATMENT OPERATIONS.	

CERTIFICATION AND SIGNATURE

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 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. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.

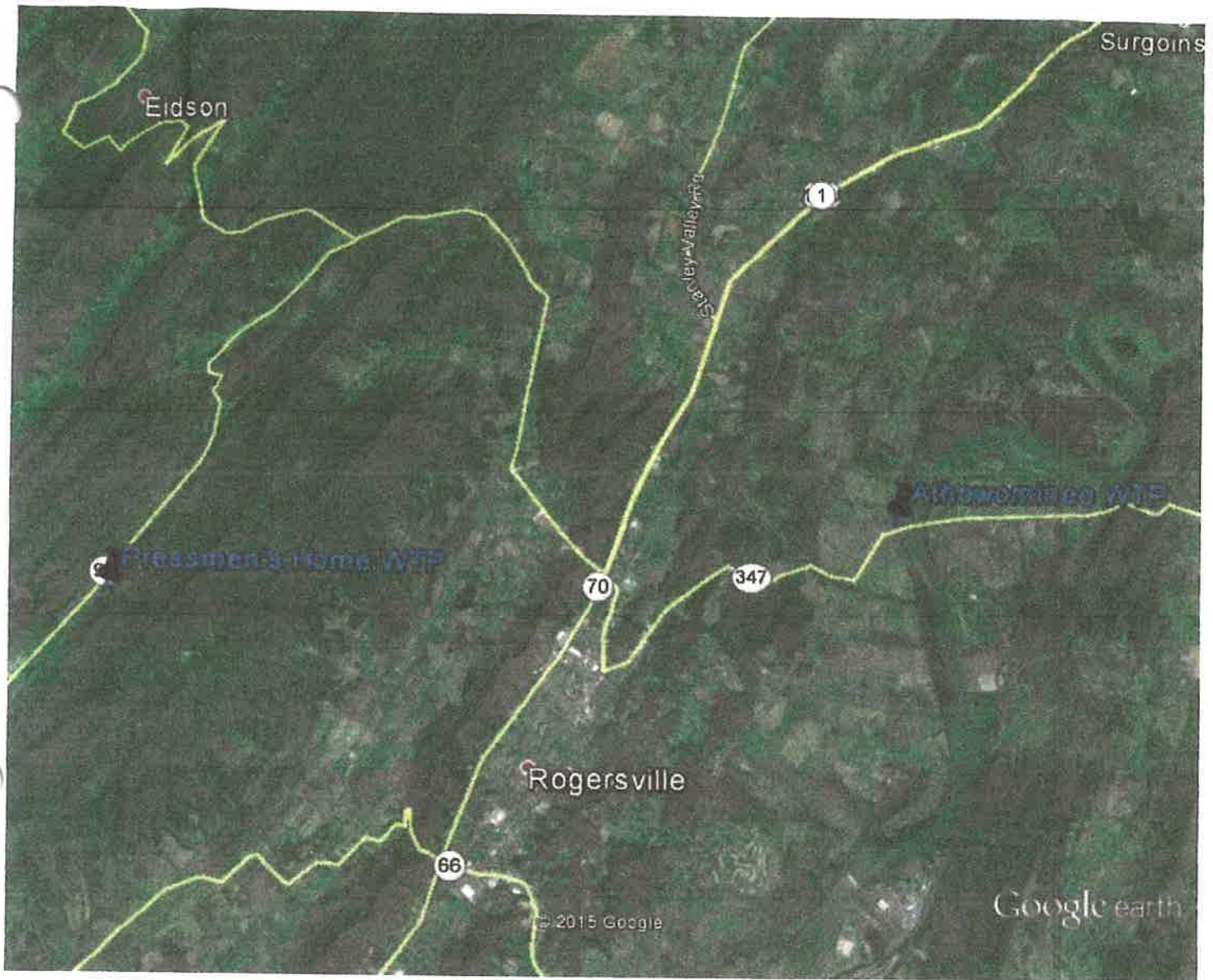
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Timmy B. Carwile	General Manager		9/29/2020
Printed Name	Official Title	Signature	Date

STATE USE ONLY

Received Date	Domestic Water Supply Use	Protective for Lead Conc.	Tracking No.	EFO
Unavailable Conditions	Exceptional TN Waters	T&E Aquatic Fauna	NOC Date	Reviewer

Submit the original completed and signed form to the above address or a scanned PDF copy to Water.Permits@tn.gov



Google earth



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