

## DEPARTMENT OF ENVIRONMENT AND CONSERVATION DIVISION OF WATER RESOURCES William R. Snodgrass - Tennessee Tower 312 Page L. Page A. Angel Angel

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JAN -4 2019

**DIVISION** OF WATER RESOURCES

## NOTICE OF INTENT (NOI) for Land Application of Non-Exceptional Quality Biosolids

Gen Nam	Fairfield Glade Community WWTF	Current NPDES No:	Existing Tracking No. TNB025615						
Own	er or Operator: (the person or legal entity which controls the site's operatio	n)							
	Name of Official Contact Person: (individual responsible for a site)  Bruce Evans  Title or Position:  Director of Sewer Systems								
1	Mailing Address: 7827 Peavine Road, Box 2000	City: Fairfield Glade	State: TN	Zip: 38558					
	Phone: )931 510-7072	bevans@fairfieldglade.cc							
	Name of Local Contact Person: (if appropriate, write "same as #1") same as #1  Title or Position:  Director of Sewer Systems								
2	Site Address: (this may or may not be the same as street address) 7218 Chestnut Hill Road	Site City: Crossville	State: TN	<sup>Zip:</sup> 38558					
	Phone; )931 510-7072	bevans@fairfieldglade.cc							
	Write in the box (to the right)	or circle the number (above) to indicate	where to send correspon	dence:					
pern	All non-exceptional biosolids land application sites that have been approved by the division prior to the effective date of this permit will be covered under this permit upon receipt of the signed certification statement, completed NOI and a copy of site approval letter(s).								
A.	OPERATIONAL INFORMATION:								
	Estimated annual amount of biosolids generated (dry weight basis)								
В.									
C.	CHEMICAL ANALYOIC, I. P. (111 a.d. 1								
0.	Table 1 Ceiling Contaminant Concentrations:  Table 3 Contaminant Concentrations:  Submit analytical results to demonstrate eligibility for and compliance with the quality criteria specified in the								
	General Permit.  Submit PCB and TCLP analytical results that are	less five years old.							
		,							
D.	PATHOGEN REDUCTION LEVEL ACHIEVED: Ind A, Alternatives 5 and 6; for Class B, Alternatives 2 and	licate alternative used to achieve 3, list the specific Process to Fu	the pathogen reducerther Reduce Patho	ction. For Class ogens (PFRP) or					
	Process to Significantly Reduce Pathogens (PSRP).	•							
	Class A: Alternative 1 Alternative 4 Alterna		ernative 3 ernative 6						
	(List PFRP)		Eq. PFRP)						
	Class B: Alternative 1 Alterna (List PSRP)	tive 2 Alte	ernative 3						
	(List PSRP) (List Eq. PSRP)  Provide a detailed description of the pathogen treatment process. Attach laboratory analytical and/or process monitoring results, as appropriate, that demonstrate pathogen reduction is being achieved:								

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E.	vector att	RACTION REL	DUCTION LEVEL ACHIEV	ED: marcate the option use	d to acmeve the	vector attraction	
	Option 1		tion 2	Option 4			
	Option 5	☐ Op	tion 6 Option 7	Option 8			
	If one of the ve	ector attraction i	reduction Options 1 - 5 is some time as meeting the vector	selected, do the biosolids i	meet Class A p	athogen reduction	
	Yes	No	ne time as meeting the vector	auraction reduction requiren	nents?		
	Provide a detaile	d description of t	he vector attraction reduction	treatment process. Attach l	aboratory analyti	ical and/or process	
	monitoring result	s, as appropriate	, that demonstrate vector attra	ction reduction is being achi	eved:		
							1
F.	If one of the vect	or attraction redu	action Options 1 - 8 above was	s not performed, indicate hor	w the vector attra	action reduction	
		i on the neid as p bsurface Injecti	part of the land application pro	ocess: Option 10 (Incorporation	) n)		
		bour mee injecti	···)	Option to (incorporatio	, <i>)</i>		
							1
G.	SAMPLING PI	AN: Include a	detailed copy of the biosolids	campling plan as specified	in the instruction	no The compline	4
0.	plan must addres	s sampling proto	ocols for contaminants, patho	gen reduction, and vector a	ttraction reduction	on quality criteria	
	•	1 01	γ	6		on quanty officers.	1
Н.	LAND APPLIC	ATION ADEA	() I I I I I ( C1 I	19 (2) (3) (4) (4)	1 10 11	1 (11 111	
1 ***		ATION AREA	(s): Include a list of land a	pplication area(s) that will	be used for disp	osal of biosolids.	1
11.	Attach a detailed	map showing ap	propriate buffers in accordance	e with section 3.2.1 (add add	ditional pages if	necessary)	
***	Attach a detailed  Area Number	map showing ap Area (acres)	propriate buffers in accordance Application Rate (tons/acr	e with section 3.2.1 (add add	ditional pages if Latitude	necessary) Longitude	
-11	Attach a detailed	map showing ap	propriate buffers in accordance	e with section 3.2.1 (add add	ditional pages if	necessary)	
410	Attach a detailed	map showing ap	propriate buffers in accordance	e with section 3.2.1 (add add	ditional pages if Latitude	necessary) Longitude	
4.10	Attach a detailed	map showing ap	propriate buffers in accordance	e with section 3.2.1 (add add	ditional pages if Latitude	necessary) Longitude	
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	Attach a detailed	map showing ap	propriate buffers in accordance	e with section 3.2.1 (add add	ditional pages if Latitude	necessary) Longitude	
I.	Attach a detailed Area Number  CERTIFICATION	Area (acres)  ON: I certify, un	Application Rate (tons/acr	re) per section 3.2.1 (add addre) per section 3.2.2	ditional pages if  Latitude (decimal)  the biosolids, pa	Longitude (decimal)	
	Attach a detailed  Area Number  CERTIFICATION Vector attraction is	Area (acres)  ON: I certify, undeduction, and other	Application Rate (tons/acr	taminant concentrations in olids stated in the regulation	ditional pages if  Latitude (decimal)  the biosolids, pages if	Longitude (decimal)  athogen reduction, or, if appropriate,	
	Attach a detailed  Area Number  CERTIFICATION will be met prior	Area (acres)  ON: I certify, uneduction, and other to land application.	Application Rate (tons/acr	taminant concentrations in olids stated in the regulation iffy that other information in	the biosolids, part this document an	Longitude (decimal)  athogen reduction, or, if appropriate, and all attachments	
	Attach a detailed  Area Number  CERTIFICATION vector attraction rewill be met prior were prepared un	Area (acres)  ON: I certify, undeduction, and office to land application and office my direction.	Application Rate (tons/acr	taminant concentrations in olids stated in the regulation ify that other information ince with a system designed	the biosolids, part this document at to assure that questional pages if Latitude (decimal)	athogen reduction, or, if appropriate, and all attachments ualified personnel	
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NOTE: In evaluating NOI forms, TDEC may request additional information to complete its review to determine the eligibility for coverage under TDEC's General Permit.

Submit the original completed and signed form to <u>Water Permits@tn.gov</u> or:
Biosolids NOI Processing - Division of Water Resources
William R. Snodgrass - Tennessee Tower, 312 Rosa L. Parks Avenue, 11th Floor
Nashville, TN 37243-1102