

APPLICATION FOR A PERMIT TO UTILIZE
WASTEWATER SLUDGE IN DELAWARE

PRELIMINARY INFORMATION

1. Name of facility: Naturalawn of America, Inc.
- Mailing Address: 1 E. Church Street
Frederick, MD 21701
- Location (street address, if different from mailing address):

2. Name of operator: Naturalawn of America, Inc.
- Mailing Address: 1 E. Church Street
Frederick, MD 21701
- Telephone Number: 301-694-5440

1. Does this facility have a currently effective NPDES permit?
 Yes X No
2. Is this facility required to have, or is it requesting, permit(s) from other agencies under other programs (e.g. RCRA, UST, CERCLA, etc.)?
 Yes X No

If the answers to the above questions are **both** no, complete Part 1 only. If the answer to **any** of the above questions is yes, complete Part 2 rather than Part 1.

Send the completed application information to:

State of Delaware
Division of Water Resources
Department of Natural Resources and Environmental Control
Surface Water Discharges Section
89 Kings Highway, P.O. Box 1401
Dover, Delaware 19901

PART 1: LIMITED BACKGROUND INFORMATION

Applicants that answered NO to all questions in the Preliminary Information section (Part 1) complete Part 1 only. Applicants that answered yes to any of the questions to the Preliminary Information section complete Part 2.

1. Does this operator own the facility for which the information is submitted?

Yes No

2. Indicate type of facility:

Federally owned treatment works

Privately owned treatment works

Publicly owned treatment works (POTW)

Other Privately owned lawncare business that uses Class A biosolids as a minor component in their fertilizers.

3. **Description of Sewage Sludge Use or Disposal Practices.** Provide the following information on the quantity (total dry metric tons per year) of sewage sludge handled at the applicants facility:

Amount of sewage sludge:

_____ generated at the facility:

_____ received from off-site:

_____ land applied on-site:

_____ sent off-site for land application:

_____ sent off-site for further treatment or distribution

Approx. 5 for ultimate land application:

_____ disposed of in a surface disposal unit on-site:

_____ sent off-site for surface disposal:

_____ used or disposed of by a method not described above, including sewage sludge sent to a municipal solid waste landfill unit (explain below):

4. **Sludge Quality Data.** Attach any data available on the quality of the sewage sludge, including but not limited to pollutant concentrations and the level of pathogen reduction attained. The applicant may use the tables in Section A of Part 2 to provide any or all of this information.

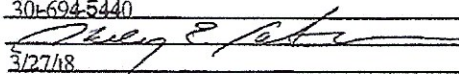
5. **Certification.** Sign the certification statement below.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with the system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person/s who manage the system or those persons directly responsible for gathering the information, the information 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.

Name of Officer: Phillip E. Catron

Official Title of Officer: President

Telephone Number: 301-694-5440

Signature of Officer: 

Date Signed: 3/27/18

PART 2: PERMIT APPLICATION INFORMATION

Applicants that answered "Yes" to any of the questions in the Preliminary Information section complete Part 2.

SLUDGE USE AND DISPOSAL INFORMATION

SECTION A. GENERAL INFORMATION

- A.1. Applicants NPDES Permit Number _____
- A.2. Does this operator own the facility for which the application information is submitted?
____ Yes ____ No
- A.3. Indicate type of facility:
____ Federally owned treatment works
____ Privately owned treatment works
____ Publicly owned treatment works (POTW)
If a POTW, provide the following:
Total population served: _____
Design influent flow (MGD): _____
____ Other _____
- A.4. Does this applicant perform any collection, treatment, storage, application to land, or disposal of sewage on Indian Lands?
____ Yes ____ No
- A.5. Provide a topographic map (or other appropriate map if a topographic map is unavailable) that shows the following three items of information. Include the area one mile beyond all property boundaries of the applicant's facility (submit as many maps as necessary to show the entire area).
- a. Location of sewage sludge management facilities (including on-site disposal sites).
 - b. Location of all water bodies.
 - c. Location of wells used for drinking water listed in public records or otherwise known to the applicant within 1/4 mile of the property boundaries.
- A.6. Other Requirements
- a. List all Federal, State, and local permits or construction approvals received or applied for that are not described above that regulate sewage sludge management practices used by this applicant.

 - b. Submit, with this application information, any other information that the permitting authority requests to assess sewage sludge use and disposal practices or identify appropriate requirements.
- A.7. Provide the information on sewage sludge generated or material derived from sewage sludge at the applicant's facility.

e. Check all activities performed by the receiving facility on the applicants sewage sludge.

- Dewatering
- Composting
- Stabilization
- Pathogen reduction
- Vector attraction reduction
- Blending with sewage sludge from other treatment works
- Addition of bulking materials (wood chips, sawdust, manure)
- Placement in bag or other container
- Sale or give-away to public
- Other

Describe the activities identified above. Attach a copy of all labels or notices that accompany the product.

B.3. To be completed if the applicant processes or packages sewage sludge for sale or give-away in a bag or other container for application to land (as explained in the instructions)

a. Provide the total dry metric tons per year processed or packaged for sale or give-away in a bag or other container for application to land. 5 tons

b. Indicate which class of pathogen reduction is met by the sewage sludge processed or packaged for sale or give away in a bag or other container for application to land. Class A. Exceptional Quality

Describe the process(es) used to meet this class of pathogen reduction. Heat Drying

Are all processes used to meet this class of pathogen reduction provided by the applicant?

Yes No

If no, explain.

c. Which of the following vector attraction reduction requirements is met by the sewage sludge processed or packaged for sale or give away in a bag or other container for application to land?

- Minimum 38 percent reduction in volatile solids
- Anaerobic process, with bench-scale demonstration
- Aerobic process, with bench-scale demonstration
- Specific oxygen uptake rate (SOUR) for aerobically digested sludge
- Aerobic processes plus raised temperature
- Raise pH to 12 and retain at 11.5
- 75 percent solids with no unstabilized solids
- 90 percent solids with unstabilized solids
- Other, explain.

Describe the process(es) used to meet this vector attraction reduction requirement. Heat Drying

Are all processes used for vector attraction reduction provided by the applicant?

Yes No

If no, explain.

d. Briefly describe any blending or manufacturing processes employed prior to sale or give away in a bag or

other container. Information on blenders is attached

e. Attach a copy of all labels or notices that accompany the product being sold or given away.

B.4. To be completed if sewage sludge from this facility is applied to land.

a. Provide the total dry metric tons per year from this facility applied to each land application site

<u>Amount</u>	<u>Land Application Site</u>
_____	_____
_____	_____
_____	_____

b. Have all land application sites been identified at the time of permit application?

Yes No

If no, submit a copy of the land application plan with this application information. Complete Section C only for land application sites identified at the time of permit application.

B.5. To be completed if sewage sludge from this facility is disposed of in a surface disposal site.

a. Total dry metric tons per year from the applicants facility disposed of in surface disposal site _____

b. Name and location of surface disposal site

Name _____

Location _____

c. If the surface disposal site is owned or operated by the applicant, go to B.6, and also complete Section D. If not, answer B.5.d through B.5.f.

d. Provide the name and address of the site owner/operator.

Name _____

Address _____

e. Which class of pathogen reduction is met for the sewage sludge disposed of in this surface disposal site?

Describe the process(es) used to meet this class of pathogen reduction. _____

Are all processes used to meet this class of pathogen reduction provided by the applicant?

Yes No

If no, explain. _____

f. Which of the following vector attraction reduction requirements is met for the sewage sludge disposed of in this surface disposal site?

- Minimum 38 percent reduction in volatile solids
- Anaerobic process, with further bench-scale demonstration
- Aerobic process, with further bench-scale demonstration
- Specific oxygen uptake rate (SOUR) for aerobically digested sludge
- Aerobic processes plus raised temperature
- Raise pH to 12 and retain at 11.5
- 75 percent solids with no unstabilized solids
- 90 percent solids with unstabilized solids
- Injection below land surface
- Incorporation into soil within 6 hours
- Covering active sewage sludge unit daily
- Other, explain. _____

Describe the process(es) used to meet this vector attraction requirement. _____

Are all processes used for vector attraction reduction provided by the applicant?
 Yes No

If no, explain. _____

SECTION C. LAND APPLICATION

Applicants whose sewage sludge is applied to land, and applicants that apply sewage sludge to land complete Section C.

C.1. Amount of Sewage Sludge Applied to Land Application Site. Provide the total dry metric tons per hectare per year applied to this site. _____

C.2. Site Information.

a. Provide the name (if any) and street address of this land application site.

Name _____
Address _____

b. Provide the size of the land application site in hectares. _____

c. Federal, State, and local permit number(s) applicable to this land application site (attach additional pages if necessary).

<u>Permit Number</u>	<u>Type of Permit</u>
_____	_____
_____	_____
_____	_____

d. Is this site owned/operated by the applicant?
 Yes No

e. What is the concentration of total nitrogen (as N on dry weight basis) in the bulk sewage sludge applied to this land application site? _____

C.3. Person that Land Applies the Sewage Sludge. Sewage sludge is applied to the site by:

Facility generating the sewage sludge

Site owner/operator

Other _____

Provide the name and address of the person that applies sewage sludge to this site.

Name _____

Address _____

C.4. Type of Land Application Site

Agricultural

Forest

Public contact

Reclamation site

Lawn or home garden

Other _____

C.5. Vegetation Grown on Site.

a. What type of vegetation is grown on this site? _____

b. What is the nitrogen requirement for this vegetation? _____

C.6. Other facilities. Is sewage sludge sent to this land application site by any facilities other than the applicant's facility?

Yes No

If yes, provide the names and addresses of other persons that send sewage sludge to the site.

Name _____

Address _____

C.7. Sewage Sludge Applied to Land in a Different State. Is this land application site located in a State other than the State where the sewage sludge is generated or the material is derived from sewage sludge?

Yes No

If yes, describe how the applicant plans to notify the permitting authority for the State where the land application site is located.

C.8. Land Application Cumulative Pollutant Loading Rates. Is this sewage sludge applied to land subject to cumulative pollutant loading rates?

Yes No

If yes, have the cumulative pollutant loading rates of each pollutant applied to land in accordance with been determined?

Yes No

If yes, provide the allotment remaining for the following pollutants (in kilograms per hectare).

_____ Arsenic	_____ Lead	_____ Nickel
_____ Cadmium	_____ Mercury	_____ Selenium
_____ Chromium	_____ Molybdenum	_____ Zinc
_____ Copper		

C.9. Pathogen Reduction.

- a. Which class of pathogen reduction is met by the sewage sludge applied to this site? _____
- b. Describe the process(es) used to meet this class of pathogen reduction. _____

- c. Are all processes used to meet this class of pathogen reduction provided by the applicant?
____ Yes ____ No
- If no, explain. _____

C.10. Vector Attraction Reduction.

- a. Which of the following vector attraction reduction requirements is met by the sewage sludge applied to this site?
- _____ Minimum 38 percent reduction in volatile solids
 - _____ Anaerobic process, with further bench-scale demonstration
 - _____ Aerobic process, with further bench-scale demonstration
 - _____ Specific oxygen uptake rate (SOUR) for aerobically digested sludge
 - _____ Aerobic processes plus raised temperature
 - _____ Raise pH to 12 and retain at 11.5
 - _____ 75 percent solids with no unstabilized solids
 - _____ 90 percent solids with unstabilized solids
 - _____ Injection below land surface
 - _____ Incorporation into soil within 6 hours
 - _____ Covering active sewage sludge unit daily
 - _____ Other, explain. _____
- b. Describe the process(es) used to meet this vector attraction reduction requirement. _____

- c. Are all processes used for vector attraction reduction provided by the applicant?
____ Yes ____ No
- If no, explain. _____

SECTION D. SURFACE DISPOSAL

Complete Section D if applicants own or operate a surface disposal site.

D.1. Name and Location of Surface Disposal Site.

Name _____
Address _____

D.2. Ownership Status. Is this surface disposal site owned by the applicant?

_____ Yes _____ No

D.3. Person Who Disposes of Sewage Sludge in the Surface Disposal Site. Sewage sludge is disposed of in the surface disposal site by (check all that apply)

_____ Facility generating the sewage sludge

_____ Site owner

_____ Other _____

Provide name and mailing address of person who disposes of sewage sludge in this surface disposal site.

Name _____

Address _____

D.4. Ground-Water Monitoring.

a. Is ground-water monitoring conducted at this surface disposal site?

_____ Yes _____ No

If yes, describe. _____

b. Has a ground-water monitoring plan been prepared for the surface disposal site?

_____ Yes _____ No

If yes, provide a copy of the ground-water monitoring plan.

c. Has the applicant obtained a certification from a qualified ground-water scientist that ground-water contamination has not occurred?

_____ Yes _____ No

If yes, provide a copy of the certification.

Provide the information requested in D.5. - D.12. once for each active sewage sludge unit.

D.5. Name or Number of Active Sewage Sludge Unit. _____

D.6. Amount of Sewage Sludge Disposed of in the Unit. Provide the total dry metric tons per year disposed of in this sewage sludge unit. _____

D.7. Pathogen Reduction.

a. Which class of pathogen reduction is met for the sewage sludge disposed of in this sewage sludge unit?

b. Describe the process(es) used to meet this class of pathogen reduction. _____

c. Are all processes used to meet this class of pathogen reduction provided by the applicant?

_____ Yes _____ No

If no, explain. _____

D.8. Vector Attraction Reduction.

a. Which of the following vector attraction reduction requirements is met for the sewage sludge disposed of in this surface disposal site?

- Minimum 38 percent reduction in volatile solids
- Anaerobic process, with further bench-scale demonstration
- Aerobic process, with further bench-scale demonstration
- Specific oxygen uptake rate (SOUR) for aerobically digested sludge
- Aerobic processes plus raised temperature
- Raise pH to 12 and retain at 11.5
- 75 percent solids with no unstabilized solids
- 90 percent solids with unstabilized solids
- Injection below land surface
- Incorporation into soil within 6 hours
- Covering active sewage sludge unit daily
- Other, explain. _____

b. Describe the process(es) used to meet this vector attraction reduction requirement. _____

c. Are all processes used for vector attraction reduction provided by the applicant?
 Yes No

If no, explain. _____

D.9. Distance from Property Boundary. Is the distance from the boundary of this sewage sludge unit to the property line of the surface disposal site less than 150 meters?

Yes No

If yes, list the actual distance: _____

D.10. Liners. Does this sewage sludge unit have a liner?

Yes No

If yes, describe the liner. _____

D.11. Leachate Collection Systems. Does this sewage sludge unit have a leachate collection system?

Yes No

If yes, describe the method used for leachate disposal. _____

Also if yes, provide Federal, State, and local permit number(s) for the disposal of leachate.


<u>Permit Number</u>	<u>Type of Permit</u>
_____	_____
_____	_____
_____	_____

D.12. Site-Specific Limits. Are site-specific pollutant limits being sought for the sewage sludge disposed of in this sewage sludge unit?

Yes No

SECTION F. CERTIFICATION

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 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 Officer: 
Name of Officer: Philip E. Catron
Official Title of Officer: President
Telephone Number: 301-694-5440
Date Signed: 3/27/18