COMMONWEALTH of VIRGINIA

DEPARTMENT OF ENVIRONMENTAL QUALITY
BLUE RIDGE REGIONAL OFFICE
7705 Timberlake Road, Lynchburg, Virginia 24502
(434) 582-5120 Fax (434) 582-5125
www.deq.virginia.gov

L. Preston Bryant, Jr.
Secretary of Natural Resources

David K. Paylor
Director

Steven A. Dietrich
Regional Director

Lynchburg Office
7705 Timberlake Road
Lynchburg, Virginia 24502
(434) 582-5120
Fax (434) 582-5125

Roanoke Office
3019 Peters Creek Road
Roanoke, Virginia 24019
(540) 562-6700
Fax (540) 562-6725

March 18, 2009

Mr. Robert (Bob) Hanson
Public Works Director
Town of Chatham
P.O. Box 370
Chatham, Virginia 24531

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Re: **Reissuance** VPDES Permit Number VA0020524; Town of Chatham STP
Pittsylvania County, Virginia

Dear Mr. Hanson:

Please find your VPDES permit enclosed along with the final public participation item (No. 29) of the fact sheet. A Discharge Monitoring Report (DMR) form is included with the permit. Please make additional copies of the DMRs for future use. The first DMR for outfall 001 (monthly monitoring starting April 1, 2009) is due by **May 10, 2009**. Please send DMRs to:

Virginia Department of Environmental Quality
Blue Ridge Regional Office - Lynchburg
7705 Timberlake Road
Lynchburg, VA 24502

Note that DEQ has launched an e-DMR program that allows you to submit the effluent data electronically. If you are interested in participating in this program please visit the following website for details:

http://www.deq.virginia.gov/water/edmrfaq.html

As provided by Rule 2A:2 of the Supreme Court of Virginia, you have thirty days from the date of service (the date you actually received this decision or the date it was mailed to you, whichever occurred first) within which to appeal this decision by filing a notice of appeal in accordance with the Rules of the Supreme Court of Virginia with the Director, Department of Environmental Quality. In the event that this decision is served on you by mail, three days are added to the period.

Alternatively, any owner under §§62.1-44.16, 62.1-44.17, and 62.1-44.19 of the State Water Control Law aggrieved by any action of the state water Control Board taken without formal hearing, or by inaction of the Board, may demand in writing a formal hearing of such owner's grievance, provided a petition requesting such hearing is filed with the Board. Said petition must meet the requirements set forth in §1.23(b) of the Board's Procedural Rule No. 1. In cases involving actions of the Board, such petition must be filed within thirty days after notice of such action is mailed to such owner by certified mail.

If you have any questions about the permit, please call Kirk A. Batsel at (434) 582-6204 or by e-mail at kabatsel@deq.virginia.gov.

Sincerely,

Steven A. Dietrich

Steven A. Dietrich
Regional Director

Enclosure: Fact Sheet Public Participation Item (No.29), DMRs and VPDES Permit

cc: OWPP (electronic copy)
EPA, Region III-3WP12 (electronic copy)
SCRO Compliance Auditor (electronic copy)

24. **303(d) LISTED SEGMENTS:** Indicate if the facility discharges directly to a segment that is listed on the current 303(d) list, if the allocations are specified by an approved TMDL and, if so, provide all appropriate information/calculations. If the facility discharges directly to a stream segment that is on the current 303(d) list, the fact sheet must include a description of how the TMDL requirements are being met.

This facility discharges directly to Cherrystone Creek. This stream segment receiving the effluent is listed as Category 5A on the current approved 303(d) list for non-attainment of Fecal coliform. EPA approved the "Bacteria TMDL development for the Banister River, Bearskin Creek, Cherrystone Creek, Polecat Creek, Stinking River, Sandy Creek, and Whitehorn Creek Watersheds" as it drains into Cherrystone Creek on November 4, 2007 for this segment. The SWCB also approved this TMDL on July 31, 2008. The TMDL contains waste load allocations for *E. coli* of 1.13×10^{12} cfu/year (existing load) and 5.67×10^{12} cfu/year (allocated) for the Chatham STP. This permit contains a limit for *E. coli* which conforms to the approved TMDL.

SEE ATTACHMENT 10

25. **CHANGES TO PERMIT:** Use **TABLE A** to record any **changes from the previous permit** and the rationale for those changes. Use **TABLE B** to record any **changes made to the permit during the permit processing period** and the rationale for those changes [i.e., use for comments from the applicant, VDH, EPA, other agencies and/or the public where comments resulted in changes to the permit limitations or any other changes associated with the special conditions or reporting requirements].

SEE ATTACHMENT 11

26. **NPDES INDUSTRIAL PERMIT RATING WORKSHEET:**

N/A - This is a municipal facility.

27. **EPA/VIRGINIA DRAFT PERMIT SUBMISSION CHECKLIST:**

SEE ATTACHMENT 12

28. **DEQ PLANNING COMMENTS RECEIVED ON DRAFT PERMIT:** Document any comments received from DEQ planning.

The expanded discharge model results (O_2 demanding parameters) limited by this permit will be included in the current amendments of the WQMP.

29. **PUBLIC PARTICIPATION:** Document comments/responses received during the public participation process. If comments/responses provided, especially if they result in changes to the permit, place in the attachment.

VDH COMMENTS RECEIVED ON DRAFT PERMIT: Document any comments received from the Virginia Dept. of Health and noted how resolved.

Based on their review of the application, the VDH had no objections to the draft permit, as stated by letter dated October 24, 2008 and received in the Lynchburg DEQ office October 27, 2008.

EPA COMMENTS RECEIVED ON DRAFT PERMIT: Document any comments received from the U.S. Environmental Protection Agency and noted how resolved.

EPA has no objections to the adequacy of the draft permit.

ADJACENT STATE COMMENTS RECEIVED ON DRAFT PERMIT: Document any comments received from an adjacent state and noted how resolved.

Nno objections were received as to the adequacy of the draft permit.

OTHER AGENCY COMMENTS RECEIVED ON DRAFT PERMIT: Document any comments received from any other agencies (e.g., VIMS, VMRC, DGIF, etc.) and noted how resolved.

No objections were received as to the adequacy of the draft permit.

OTHER COMMENTS RECEIVED FROM RIPARIAN OWNERS/CITIZENS ON DRAFT PERMIT:
Document any comments received from other sources and note how resolved.

The application and draft permit have received public notice in accordance with the VPDES Permit Regulation, and no comments were received.

PUBLIC NOTICE INFORMATION: Comment Period: **Start Date: February 5, 2009**
End Date: March 9, 2009

Persons may comment in writing or by e-mail to the DEQ on the proposed reissuance of the permit within 30 days from the date of the first notice. Address all comments to the contact person listed below. Written or e-mail comments shall include the name, address, and telephone number of the writer, and shall contain a complete, concise statement of the factual basis for comments. Only those comments received within this period will be considered. The Director of the DEQ may decide to hold a public hearing if public response is significant. Requests for public hearings shall state the reason why a hearing is requested, the nature of the issues proposed to be raised in the public hearing and a brief explanation of how the requestor's interests would be directly and adversely affected by the proposed permit action.

All pertinent information is on file and may be inspected, and arrangements made for copying by contacting Kirk A. Batsel at: Department of Environmental Quality (DEQ), Blue Ridge Regional Office, 7705 Timberlake Road, Lynchburg, VA 24502. Telephone: 434-582-5120 E-mail: kabatsel@deq.virginia.gov

Following the comment period, the Board will make a determination regarding the proposed reissuance. This determination will become effective, unless the Director grants a public hearing. Due notice of any public hearing will be given.

30. **ADDITIONAL FACT SHEET COMMENTS/PERTINENT INFORMATION:**

The permittee is current with their annual permit maintenance fees.

31. **SUMMARY OF SPECIFIC ATTACHMENTS LABELED AS:**

Attachment 1 Site Inspection Report/Memorandum
Attachment 2 Discharge Location/Topographic Map
Attachment 3 Schematic/Plans & Specs/Site Map/Water Balance
Attachment 4 Discharge/Outfall Description
Attachment 5 Limitations/Monitoring
Attachment 6 Special Conditions
Attachment 7 Effluent/Sludge/Ground Water Limitations/Monitoring Rationale/Suitable Data/ Stream Modeling/Antidegradation/Antibacksliding
Attachment 8 Special Conditions Rationale
Attachment ___ Material Stored
Attachment 9 Receiving Waters Info./Tier Determination/STORET Data
Attachment 10 303(d) Listed Segments
Attachment 11 TABLE A and TABLE B - Change Sheets
Attachment ___ NPDES Industrial Permit Rating Worksheet
Attachment 12 EPA/Virginia Draft Permit Submission Checklist
Attachment 13 Chronology Sheet

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF ENVIRONMENTAL QUALITY
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES)
DISCHARGE MONITORING REPORT(DMR)

Municipal Minor 03/23/2009

PERMITTEE NAME/ADDRESS(INCLUDE FACILITY NAME/LOCATION IF DIFFERENT)

NAME Chatham Town - Sewage Treatment Plant
ADDRESS P O Box 370
Chatham VA 24531

FACILITY LOCATION 400 Hillcrest Ln

VA0020524	001
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	YEAR	MO	DAY		YEAR	MO	DAY
FROM				TO			

DEPT. OF ENVIRONMENTAL QUALITY (REGIONAL OFFICE)

South Central Regional Office
7705 Timberlake Rd

Lynchburg VA 24502

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
001 FLOW	REPORTD				*********	*********	*********				
	REQRMNT	0.685	NL	MGD	*********	*********	*********			CONT	REC
002 PH	REPORTD	*********	*********			*********					
	REQRMNT	*********	*********		6.0	*********	9.0	SU		1/DAY	GRAB
004 TSS	REPORTD				*********						
	REQRMNT	77.8	116.7	KG/D	*********	30.0	45.0	MG/L		3D/W	8HC
007 DO	REPORTD	*********	*********			*********	*********				
	REQRMNT	*********	*********		7.0	*********	*********	MG/L		1/DAY	GRAB
068 TKN (N-KJEL)	REPORTD				*********						
	REQRMNT	38.9	58.3	KG/D	*********	15.0	22.5	MG/L		3D/W	8HC
120 E.COLI	REPORTD	*********	*********		*********		*********				
	REQRMNT	*********	*********		*********	126	*********	N/CML		1/W	GRAB
159 CBOD5	REPORTD				*********						
	REQRMNT	64.8	97.2	KG/D	*********	25.0	37.5	MG/L		3D/W	8HC
442 COPPER, DISSOLVED (UG/L AS CU)	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	NL	NL	UG/L		1/6M	GRAB

ADDITIONAL PERMIT REQUIREMENTS OR COMMENTS

BYPASSES AND OVERFLOWS	TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)

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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

OPERATOR IN RESPONSIBLE CHARGE			DATE		
TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY
PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE			
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
445 NICKEL, DISSOLVED (UG/L AS NI)	REPORTD	********	********		********						
	REQRMNT	********	********		********	NL	NL	UG/L		1/6M	GRAB
807 ZINC, DISSOLVED (AS ZN)	REPORTD	********	********		********						
	REQRMNT	********	********		********	NL	NL	UG/L		1/6M	GRAB
	REPORTD										
	REQRMNT									*******	
	REPORTD										
	REQRMNT									*******	
	REPORTD										
	REQRMNT									*******	
	REPORTD										
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	REQRMNT									*******	
	REPORTD										
	REQRMNT									*******	

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
672 SOLIDS, TOTAL, SLUDGE AS PERCENT	REPORTD	*********	*********		*********		*********				
	REQRMNT	*********	*********		*********	NL	*********	MG/KG		1/YR	COMP
680 ARSENIC, SLUDGE	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	41	75	MG/KG		1/YR	COMP
681 MOLYBDENUM, SLUDGE	REPORTD	*********	*********		*********	*********					
	REQRMNT	*********	*********		*********	*********	75	MG/KG		1/YR	COMP
682 ZINC, SLUDGE	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	2800	7500	MG/KG		1/YR	COMP
683 LEAD, SLUDGE	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	300	840	MG/KG		1/YR	COMP
684 NICKEL, SLUDGE	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	420	420	MG/KG		1/YR	COMP
685 MERCURY, SLUDGE	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	17	57	MG/KG		1/YR	COMP
686 COPPER, SLUDGE	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	1500	4300	MG/KG		1/YR	COMP

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
687 CADMIUM, SLUDGE	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	39	85	MG/KG		1/YR	COMP
693 ANNUAL SLUDGE PRODUCTION TOTAL	REPORTD	*********			*********	*********	*********				
	REQRMNT	*********	NL	MTNYR	*********	*********	*********			1/YR	CALC
694 ANNUAL AMT SLUDGE LAND APPLIED	REPORTD	*********			*********	*********	*********				
	REQRMNT	*********	NL	MTNYR	*********	*********	*********			1/YR	CALC
697 SELENIUM, SLUDGE	REPORTD	*********	*********		*********						
	REQRMNT	*********	*********		*********	100	100	MG/KG		1/YR	COMP
	REPORTD										
	REQRMNT									*******	
	REPORTD										
	REQRMNT									*******	
	REPORTD										
	REQRMNT									*******	
	REPORTD										
	REQRMNT									*******	

ADDITIONAL PERMIT REQUIREMENTS OR COMMENTS

BYPASSES AND OVERFLOWS	TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)

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PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE			
TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY

THIS REPORT IS REQUIRED BY LAW (33 U. S. C. § 1318 40 CFR 122.41(l)(4)(i)). FAILURE TO REPORT OR FAILURE TO REPORT TRUTHFULLY CAN RESULT IN CIVIL PENALTIES NOT TO EXCEED $10,000 PER DAY OF VIOLATION: OR IN CRIMINAL PENALTIES NOT TO EXCEED $25,000 PER DAY OF VIOLATION OR BY IMPRISONMENT FOR NOT MORE THAN FIVE YEARS, OR BOTH.

GENERAL INSTRUCTIONS

1. Complete this form in permanent ink or indelible pencil.
2. Be sure to enter the dates for the first and last day of the period covered by the report on the form in the space marked "Monitoring Period".
3. For those parameters where the "permit requirement" spaces are blank or a limitation appears, provide data in the "reported" spaces in accordance with your permit.
4. Enter the average and, if appropriate, maximum quantities and units in the "reported" spaces in the columns marked "Quantity or Loading". KG/DAY = Concentration(mg/l) x Flow(MGD) x 3.785.
5. Enter maximum, minimum, and/or average concentrations and units in the "reported" spaces in the columns marked "Quality or Concentration".
6. Enter the number of samples which do not comply with the maximum and /or minimum permit requirements in the "reported" space in the column marked "No. Ex.".
7. Enter the actual frequency of analysis for each parameter (number of times per day, week, month) in the "reported" space in the column marked "Frequency of Analysis".
8. Enter the actual type of sample collected for each parameter in the "reported" space in the column marked "Sample Type".
9. Enter additional required data or comments in the space marked "additional permit requirements or comments".
10. Record the number of bypasses during the month, the total flow in million gallons and BOD5 in kilograms in the proper columns in the section marked "Bypasses and Overflows".
11. The operator in responsible charge of the facility should review the form and sign in the space provided. If the plant is required to have a licensed operator, the operator's certificate number should be reported in the space provided.
12. The principal executive officer should then review the form and sign in the space provided and provide a telephone number where he/she can be reached.
13. You are required to sample at the frequency and type indicated in your permit.
14. Send the completed form to your Dept. of Environmental Quality Regional Office by the 10th of each month.
15. You are required to retain a copy of the report for your records.
16. Where violations of permit requirements are reported, attach a brief explanation in accordance with the permit requirements describing causes and corrective actions taken. Reference each violation by date.
17. If you have any questions, contact the Dept. of Environmental Quality Regional Office.