EPA I.D. NUMBER *(copy from Item 1 of Form 1)*

VA0089893

Please print or type in the unshaded areas only.

Form Approved.
OMB No. 2040-0086.
Approval expires 8-31-98.

FORM 2C NPDES

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER *(list)*	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER *(name)*
	1. DEG.	1. DEG.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	
001	36	41	47	78	54	37	Poplar Creek (tributary to Dan River)

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures. See Attached Figure 2

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO. *(list)*	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION *(list)*	b. AVERAGE FLOW *(include units)*	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
001	Filter Backwash	0.040 MGD	Dechlorination	N/A	
			Discharge	4-A	
	Sedimentation Basin Cleanout	0.40 MG/event	Dechlorination	N/A	
		(~4 events/basin/yr)	Discharge	4-A	
	See attached sheet for more detailed description.				

OFFICIAL USE ONLY *(effluent guidelines sub-categories)*

 CONTINUED ON REVERSE

Halifax County Service Authority
Leigh Street Filter Plant
VPDES Permit Application
Section II.B

The Halifax County Service Authority Leigh Street Filter Plant has two sources of effluent – filter backwash water and settling basin clean out.

Filter backwashing generates approximately 0.040 MGD of water that currently is discharged to Poplar Creek. This water consists of drinking water and a small amount of solids that are removed from the filters. Filters are washed on average 20 days out of the month. The backwash water is dechlorinated with sodium bisulfite prior to discharge.

The cleanout of the sedimentation basins generates wastewater that is released on a quarterly basis from the manual cleaning of two sedimentation basins at the plant. The volume is estimated at approximately 0.40 MG per basin cleaning. Discharge takes place over an estimated 2- to 3-hour period of time. It is estimated that approximately two thirds of the solids originate from the Dan River and are returned during this discharge: the remainder of the solids are aluminum hydroxide solids. The cleanout discharge is also dechlorinated with sodium bisulfite prior to discharge.

CONTINUED FROM THE FRONT

Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

[X] YES *(complete the following table)* [ ] NO *(go to Section III)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(s) CONTRIBUTING FLOW *(list)*	3. FREQUENCY a. DAYS PER WEEK *(specify average)*	3. FREQUENCY b. MONTHS PER YEAR *(specify average)*	4 FLOW a. FLOW RATE *(in MGD)* 1. LONG TERM AVERAGE	4 FLOW a. FLOW RATE *(in MGD)* 2. MAXIMUM DAILY	4 FLOW b. TOTAL VOLUME *(specify with units)* 1. LONG TERM AVERAGE	4 FLOW b. TOTAL VOLUME *(specify with units)* 2. MAXIMUM DAILY	4 FLOW c. DURATION *(in days)*
001	Filter Backwashing	5	12	0.04	0.08	0.04 MGD	0.08 MG (2 washes)	0.02
	Sedimentation Basin Cleanout (2 Basins)	< 1	4	0.40 MG per cleaning	unknown	3.2 MG/YR	0.40 MGD	0.13

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

[ ] YES *(complete Item III-B)* [X] NO *(go to Section IV)*

B. Are the limitations in the applicable effluent guideline expressed in terms of production *(or other measure of operation)*?

[ ] YES *(complete Item III-C)* [X] NO *(go to Section IV)*

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of you level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	2. AFFECTED OUTFALLS *(list outfall numbers)*

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

[ ] YES *(complete the following table)* [X] NO *(go to Item IV-B)*

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS a. NO.	2. AFFECTED OUTFALLS b. SOURCE OF DISCHARGE	3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE a. REQUIRED	4. FINAL COMPLIANCE DATE b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs *(or other environmental projects which may affect your discharges)* you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate you actual or planned schedules for construction.

[ ] MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

 CONTINUED ON PAGE 3

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CONTINUED FROM PAGE 2

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding - Complete one set of tables for each outfall - Annotate the outfall number in the space provided.
NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in you possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
NONE			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

[X] YES *(list all such pollutants below)* [ ] NO *(go to Item VI-B)*

Bromodichloromethane Bromoform Chloroform Dibromochloromethane	Byproduct of disinfection of drinking water with chlorine, levels are well below drinking water standards.

CONTINUED ON REVERSE

CONTINUED FROM THE FRONT

BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

[X] YES *(identify the test(s) and describe their purposes below)* [ ] NO *(go to Section VIII)*

See attached test summary sheet

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

[X] YES *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* [ ] NO *(go to Section IX)*

A. NAME	B. ADDRESS	C. TELEPHONE	D. POLLUTANTS ANALYZED *(list)*
Air, Water, & Soil Laboratories, Inc.	2109 North Hamilton Street Richmond, VA 23230	866-358-8297	Volatiles
ProChem Analytical	6040 North Fork Road Elliston, VA 24087	540-268-9884	All reported parameters except pH, temperature and total residual chlorine (done by WTP).

IX. 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 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.

A. NAME AND OFFICIAL TITLE *(type or print)*	B. PHONE NO. *(area code & no.)*
William E. Jones, Executive Director	434-476-4272 X241
C. SIGNATURE: William E Jones	D. DATE SIGNED: 6-25-08

Halifax County Service Authority
Leigh Street Filter Plant
VA0089893
VII. Summary of Biological Toxicity Testing Data
Outfall 001

Date	Discharge Type	Test	Results		
			LC_{50} (%)	NOAEC	TU_A (100/NOAEC)
December 2004	Filter Backwash	*Ceriodaphnia* , Acute	>100%	100%	1.0
June 2005[1]	Sedimentation Basin Cleanout	*Ceriodaphnia* , Acute	>100%	100%	1.0
		Fathead Minnow, *Acute*	>100%	100%	1.0
December 2005	Sedimentation Basin Cleanout[4]	*Ceriodaphnia* , Acute	<10%	<10%	>10.0
		Fathead Minnow, *Acute*	>100%	10%[2] (or 100%)	10[2] (or 1.0)
December 2005	Filter Backwash	*Ceriodaphnia* , Acute	>100%	100%	1.0
March 2006	Sedimentation Basin Cleanout	*Ceriodaphnia* , Acute	18.3%[3]	<10%[3]	>10.0[3]
			>100%[3]	100%[3]	1.0[3]
		Fathead Minnow, *Acute*	>100%	100%	1.0
December 2006	Filter Backwash	*Ceriodaphnia* , Acute	>100%	10%	10.0
June 2007	Sedimentation Basin Cleanout	*Ceriodaphnia* , Acute	<10%	<10%	>10.0
		Fathead Minnow, *Acute*	>100%	100%	<1.0
September 2007	Sedimentation Basin Cleanout	*Ceriodaphnia* , Acute	<10%	<10%	>10.0
		Fathead Minnow, *Acute*	>100%	100%	<1.0
December 2007	Filter Backwash	*Ceriodaphnia* , Acute	>100%	56%	1.8
May 2008	Sedimentation Basin Cleanout	*Ceriodaphnia* , Acute	>100%	56%	1.8
		Fathead Minnow, *Acute*	>100%	32%	3.1

(1) Testing repeated in December 2005 due to exceedance of sample holding time

(2) Fathead minnow survival data exhibited a non-continuous dose-dependent toxicity response at 18% effluent concentration which had one mortality in each replicate leading to a statistically significant toxicity effect at this concentration, as such, the NOAEC was defined at 10% effluent based on statistical significance. The NOAEC may be defined at 100% effluent based on biological significance.

(3) Non continuous dose reponse observed in Ceriodaphnia test; results calculated using known test organism survival data (LC_{50} = 18.3%, NOAEC = 40%, Tu_a = >10) and test organism survival in 100% effluent (LC_{50} > 100%, NOAEC = 100%, Tu_a = 1.0)

(4) As noted in several of the sedimentation basin test reports, the elevated solids content appeared to physically interfere with *Ceriodaphnia* movement and complicated visual determination of test organism survival. Limited comparative testing indicated removal of the solids by laboratory filtration eliminated the test organism mortalities.

PLEASE PRINT C. /PE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets *(use the same format)* instead of completing these pages.
SEE INSTRUCTIONS

EPA I.D. NUMBER *(Copy from Item 1 of Form 1)*
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V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 001

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE *(if available)* (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE *(if available)* (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	3. UNITS *(specify if blank)* a. CONCEN-TRATION	b. MASS	4. INTAKE *(optional)* a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO OF ANALYSES
a. Biochemical Oxygen Demand (BOD)	<2	<3	NA	NA	NA	NA	1	mg/L	kg/d			
b. Chemical Oxygen Demand (COD)	<20	<30	NA	NA	NA	NA	1	mg/L	kg/d			
c. Total Organic Carbon (TOC)	2.91	4.41	NA	NA	NA	NA	1	mg/L	kg/d			
d. Total Suspended Solids (TSS)	83,440	126,328	83,440	126,328	7,563	1,403	63	mg/L	kg/d			
e. Ammonia *(as N)*	<0.10	<0.15	NA	NA	NA	NA	1	mg/L	kg/d			
f. Flow	VALUE 0.4 MGD		VALUE 0.4 MGD		VALUE 0.049 MGD		83	MGD	NA	VALUE		
g. Temperature *(winter)*	VALUE 14°C		VALUE 14°C		VALUE 10.3°C		4	Degrees Centigrade		VALUE		
h. Temperature *(Summer)*	VALUE 23°C		VALUE 23°C		VALUE 22.5°C		2	Degrees Centigrade		VALUE		
I. pH	MINIMUM 6.1	MAXIMUM 7.0	MINIMUM 6.1	MAXIMUM 7.0			63	STANDARD UNITS				

PART B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly,

1. POLLUTANT AND CAS NO. *(if available)*	2. MARK "X" a. BELIEVED PRESENT	b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCEN-TRATION	b. MASS	5. INTAKE *(optional)* a. LONG TERM (1) CONCENTRATION	(2) MASS	b. NO OF ANAL-YSES
a. Bromide (24959-67-9)		X												
b. Chlorine, Total Residual		X	<0.01	<0.02	<0.01	<0.02	<0.01	<0.002	852	mg/L	kg/d			
c. Color		X												
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)	X		0.193	0.292	NA	NA	NA	NA	1	mg/L	kg/d			
f. Nitrate-Nitrite *(as N)*		X												

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. BELIEVED PRESENT	b. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO OF ANALYSES
			(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
g. Nitrogen, Total Organic (as N)		X												
h. Oil and Grease		X												
i. Phosphorus (as P), Total (7723-14-0)		X												
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium 226, Total		X												
k. Sulfate (as SO_4) (14808-79-8)	X		40.6	61.5	NA	NA	NA	NA	1	mg/L	kg/d			
l. Sulfide (as S)		X												
m. Sulfite (as SO_3) (14265-45-3)		X												
n. Surfactants		X												
o. Aluminum, Total (7429-90-5)	X		1.04	1.58	NA	NA	NA	NA	1	mg/L	kg/d			
p. Barium, Total (7440-39-3)		X												
q. Boron, Total (7440-42-8)		X												
r. Cobalt, Total (7440-48-4)		X												
s. Iron, Total (7439-89-6)		X												
t. Magnesium, Total (7439-95-4)		X												
u. Molybdenum, Total (7439-98-7)		X												
v. Manganese, Total (7439-96-5)		X												
w. Tin, Total (7440-31-5)		X												
x, Titanium, Total (7440-32-6)		X												

CONTINUE ON PAGE V-3

EPA I.D. NUMBER (Copy from Item 1 of 1)	OUTFALL NUMBER
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CONTINUED FROM PAGE 3 OF FORM 2-C

PART C- If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least on analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2, 4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b you must briefly describe the reaons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table (all 7 pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (If available)		c. LONG TERM AVRG. VALUE (If available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X												
2M. Arsenic, Total (7440-38-2)			X												
3M. Beryllium, Total (7440-41-7)			X												
4M. Cadmium, Total (7440-43-9)			X	<0.001	<0.002	NA	NA	NA	NA	1	mg/L	g/d			
5M. Chromium, Total (7440-47-3)			X	<0.005	<0.008	NA	NA	NA	NA	1	mg/L	g/d			
6M. Copper, Total (7440-50-8)			X	<0.005	<0.008	NA	NA	NA	NA	1	mg/L	g/d			
7M. Lead, Total (7439-92-1)			X	<0.005	<0.008	NA	NA	NA	NA	1	mg/L	g/d			
8M. Mercury, Total (7439-97-6)			X	<0.0002	<0.0003	NA	NA	NA	NA	1	mg/L	g/d			
9M. Nickel, Total (7440-02-0)			X												
10M. Selenium, Total (7782-49-2)			X												
11M. Silver, Total (7440-22-4)			X												
12M. Thallium, Total (7440-28-0)			X												
13M. Zinc, Total (7440-66-6)		X		<0.005	<0.008	NA	NA	NA	NA	1	mg/L	g/d			
14M. Cyanide, Total (57-12-5)			X												
15M. Phenols, Total			X												
DIOXIN															
2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)			X												

CONTINUE ON REVERSE

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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	G/D	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
2V. Acrylonitrile (107-13-1)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
3V. Benzene (71-43-2)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
4V. Bis (Chloromethyl) Ether (542-88-1)	Not Required														
5V. Bromoform (75-25-2)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
6V. Carbon Tetrachloride (56-23-5)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
7V. Chlorobenzene (108-90-7)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
8V. Chlorodibromomethane (124-48-1)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
9V. Chloroethane (75-00-3)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
10V. 2-Chloroethylvinyl Ether (110-75-8)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
11V. Chloroform (67-66-3)		X		91.8	139.1	NA	NA	NA	NA	1	ug/L	g/d			
12V. Dichlorobromomethane (75-27-4)		X		15.6	23.6	NA	NA	NA	NA	1	ug/L	g/d			
13V. Dichlorodifluoromethane (75-71-8)	Not Required														
14V. 1,1-Dichloroethane (75-34-3)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
15V. 1,2-Dichloroethane (107-06-2)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
16V. 1,1-Dichloroethylene (75-35-4)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
17V. 1,2-Dichloropropane (78-87-5)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
18V. 1,3-Dichloropropylene (542-75-6)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
19V. Ethylbenzene (100-41-4)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
20V. Methyl Bromide (74-83-9)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
21V. Methyl Chloride (74-87-3)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			

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CONTINUED FROM PAGE V-4

EPA I.D. NUMBER (Copy from Item 1 of Page 1)	OUTFALL NUMBER
VA0089893	001

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)			X	<20	<30	NA	NA	NA	NA	1	ug/L	g/d			
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
24V. Tetrachloroethylene (127-18-4)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
25V. Toluene (108-88-3)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
27V. 1,1,1-Trichloroethane (71-55-6)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
28V. 1,1,2-Trichloroethane (79-00-5)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
29V. Trichloroethylene (79-01-6)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
30V. Trichlorofluoromethane (75-69-4)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
31V. Vinyl Chloride (75-01-4)			X	<10	<15	NA	NA	NA	NA	1	ug/L	g/d			
GC/MS FRACTION - ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X												
2A. 2,4-Dichlorophenol (120-83-2)			X												
3A. 2,4-Dimethylphenol (105-67-9)			X												
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X												
5A. 2,4-Dinitrophenol (51-28-5)			X												
6A. 2-Nitrophenol (88-75-5)			X												
7A. 4-Nitrophenol (100-02-7)			X												
8A. P-Chloro-M-Cresol (59-50-7)			X												
9A. Pentachlorophenol (87-86-5)			X												
10A. Phenol (108-95-2)			X												
11A. 2,4,6-Trichlorophenol (88-06-2)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - BASE NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X												
2B. Acenaphtylene (208-96-8)			X												
3B. Anthracene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo *(a)* Anthracene (56-55-3)			X												
6B. Benzo *(a)* Pyrene (50-32-8)			X												
7B. 3,4-Benzo-fluoranthene (205-99-2)			X												
8B. Benzo *(ghi)* Perylene (191-24-2)			X												
9B. Benzo *(k)* Fluoranthene (207-08-9)			X												
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)			X												
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)			X												
12B. Bis *(2-Chloroiso-propyl)* Ether (102-60-1)			X												
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)			X												
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)			X												
15B. Butyl Benzyl Phthalate (85-68-7)			X												
16B. 2-Chloro-napthalene (91-58-7)			X												
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X												
18B. Chrysene (218-01-9)			X												
19B. Dibenzo *(a,h)* Anthracene (53-70-3)			X												
20B. 1,2-Dichloro-benzene (95-50-1)			X												
21B. 1,3-Dichloro-benzene (541-73-1)			X												

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EPA I.D. NUMBER (Copy from Item 1 of Form 1)	OUTFALL NUMBER
VA0089893	001

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - BASE NEUTRAL COMPOUNDS *(continued)*															
22B. 1,4-Dichlorobenzene (106-46-7)			X												
23B. 3,3'-Dichlorobenzidine (91-94-1)			X												
24B. Diethyl Phthalate (84-66-2)			X												
25B. Dimethyl Phthalate (131-11-3)			X												
26B. Di-N-Butyl Phthalate (84-74-2)			X												
27B. 2,4-Dinitrotoluene (121-14-2)			X												
28B. 2,6-Dinitrotoluene (606-20-2)			X												
29B. Di-N-Octyl Phthalate (117-84-0)			X												
30B. 1,2-Diphenylhydrazine *(as Azobenzene)* (122-66-7)			X												
31B. Fluoranthene (206-44-0)			X												
32B. Fluorene (86-73-7)			X												
33B. Hexachlorobenzene (118-74-1)			X												
34B. Hexachlorobutadiene (87-68-3)			X												
35B. Hexachlorocyclopentadiene (77-47-4)			X												
36B. Hexachloroethane (67-72-1)			X												
37B. Indeno *(1,2,3-cd)* Pyrene (193-39-5)			X												
38B. Isophorone (78-59-1)			X												
39B. Naphthalene (91-20-3)			X												
40B. Nitrobenzene (98-95-3)			X												
41B. N-Nitrosodimethylamine (62-75-9)			X												
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X												

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - BASE NEUTRAL COMPOUNDS *(continued)*															
43B. N-Nitrosodiphenylamine (86-30-6)			X												
44B. Phenanthrene (85-01-8)			X												
45B. Pyrene (129-00-0)			X												
46B. 1,2,4-Trichlorobenzene (120-82-1)			X												
GC/MS FRACTION - PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (319-85-7)			X												
4P. γ-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α-Endosulfan (115-29-7)			X												
12P. β-Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												

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EPA I.D. NUMBER (Copy from Item 1 of Page 1)	OUTFALL NUMBER
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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION - PESTICIDES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												