Woodruff

VIRGINIA DEQ REGISTRATION STATEMENT
GENERAL VPDES PERMIT FOR DOMESTIC SEWAGE DISCHARGES OF LESS THAN OR EQUAL TO 1,000 GALLONS PER DAY

Please Type or Print All Information

1. Name of Facility/Residence Murphy's Trailer Park WWTP "A"

   Address of Facility 213671 Wigwam Circle (Street) Carrollton (City) VA (State) 23314 (Zip)

2. Facility owner(s) JAF5 LLC (Last Name) (First Name) (M.I.)

   Scott (Last Name) Janice (First Name) (M.I.)

   Address of Owner 502 Pagan Rd (Street) Smithfield (City) VA (State) 23430 (Zip)

   Phone Number(s) 757-739-6241 (Home) (Work)

   Is or will the owner be the occupant of the facility? Yes ☐ No ☑

3. Name of water body receiving the discharge Upland stream/ditch into Ballard Creek to James River

   Is the discharge point on a stream that usually flows during dry weather? Yes ☑ No ☐

4. Amount of discharge (gallons per day) on a monthly average 975 Gpd

5. Are any pollutants other than domestic sewage to be discharged? Yes ☐ No ☑

   If yes, please explain _____

6. How will the discharge be disinfected? Chlorination ☐ Ultraviolet Radiation ☑ Other ☐

7. Is there another discharge point covered by a VPDES permit located within 500 feet of the discharge point identified in this Registration Statement? Yes ☐ No ☑

8. Are central sewage facilities available to this facility? Yes ☐ No ☑

9. Does this facility currently have a VPDES permit? Yes ☐ No ☑

   If yes, please provide permit number _____

   Has the facility been built and begun to discharge? Yes ☐ No ☑

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10. The owner of any proposed treatment works or any treatment works which has not previously been issued a valid VPDES permit must submit the following attachments with this registration statement:
    a. A topographic map which indicates the discharge point, the location of the property to be served by the treatment works, and the location of any wells, springs, and other water bodies, or downstream residences within ½ mile downstream from the discharge;
    b. A site diagram of the existing or proposed sewage treatment works, including the property boundaries, the location of the facility/residence to be served, the individual sewage treatment units, the receiving water body, and the discharge line location; and
    c. A notification from the Virginia Department of Health that an onsite sewage disposal system permit has been applied for and that the Virginia Department of Health has determined that there is no technology available to serve that parcel of land with an onsite system.

11. Has a valid maintenance contract been obtained by the owner of any existing treatment works?
    Yes ☑ No ☐

    If yes, provide the name of the contract provider Environmental Services of VA. Lic #1934000209

    and the expiration date of the current contract 8/30/2013

If no, has an exception to the maintenance contract been requested and granted in accordance with Section 12 below? Yes ☐ No ☐

A valid maintenance contract shall provide for the following:

a. Performance of all testing required in accordance with 9 VAC 25-110-80, Part I A and periodic inspections of the treatment works;

b. A written notification to the owner within 24 hours whenever the contract provider becomes aware that maintenance or repair of the owner's treatment works is necessary. The owner is responsible for prompt maintenance and repair of the treatment works including all costs associated with the maintenance and repair. Immediately upon receipt of notice that repair or maintenance is required, the owner shall begin emergency pump and haul of all sewage generated in the dwelling if full and complete repairs cannot be accomplished within 48 hours;

c. A log of the following items will be maintained by the contract provider:
   (1) Results of all tests and sampling;
   (2) Alarm activation incidents;
   (3) Maintenance, corrective, or repair activities performed;
   (4) Recommended repair or replacement items; and
   (5) Copies of all reports prepared by the contract provider.

d. An inspection will be conducted by the contract provider within 48 hours after notification by the owner that a problem may be occurring; and

e. A minimum of twenty-four months of consecutive coverage under the maintenance contract.

12. The owner of any existing treatment works may request an exception to the maintenance contract requirement by submitting an Operation and Maintenance Plan to the DEQ for review and approval. Has an Operation and Maintenance Plan been approved by the DEQ previously? Yes ☐ No ☐

If yes, provide the date of approval of the Operation and Maintenance Plan _____

Have any changes been made to the Operation and Maintenance Plan? Yes ☐ No ☐

If yes, explain the changes _____

At a minimum, the Operation and Maintenance Plan shall contain the following information:

a. An up-to-date Operation and Maintenance Manual for the treatment works;

b. A log of maintenance performed on the plant, including, but not limited to, the following:
   (1) The date and amount of disinfection chemicals added to the chlorinator.
   (2) If dechlorination is used, the date and amount of any dechlorination chemicals that are added.
   (3) The date and time of equipment failure(s) and the date and time the equipment was restored to service.
   (4) The date and approximate volume of sludge removed;

c. Dated receipts for chemicals purchased, equipment purchased, and maintenance performed; and

d. An effluent monitoring plan in accordance with the requirements of 9 VAC 25-110-80 Part I A, including all sample collection, preservation, and analysis procedures.

13. **Certification**: "I hereby grant to duly authorized agents of the Department of Environmental Quality, upon presentation of credentials, permission to enter the property where the treatment works is located for the purpose of determining compliance with or the suitability of coverage under the General Permit. 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."

Signature(s): Janice Scott Date: Sept. 10, 2012

_____ Date: _____

For Department of Environmental Quality Use Only

Accepted/Not Accepted by: _____ Date: _____

Basin _____ Subbasin _____ Stream Class _____ Section _____

Special Standards _____

(8/2006)