

### AGENDA FOR PUBLIC WORKS COMMISSION

#### A Public Works Commission meeting will be held on Wednesday, May 24, 2023 at <u>5:30 PM</u> in the Council Chambers at City Hall, 819 Superior Avenue, Tomah, WI.

Join Zoom Meeting https://us06web.zoom.us/j/2708608080?pwd=ZTZ0cmILVEFEb1dzVDNwdi91UHFYQT09

Meeting ID: 270 860 8080 Passcode: 206751 One tap mobile +13092053325,,2708608080#,,,,\*206751# US

#### Call to Order - Roll Call

#### **Approve Minutes**

#### April 2023 Minutes

#### **Discussion Items**

- 1. Airport Update
- 2. Compliance Maintenance Annual Report
- 3. Discussion and recommendation on a fee for pool permits
- 4. Project Updates
- 5. Building Code/Violation Report
- 6. Payment of Monthly Water & Sewer Bills
- 7. Departmental Reports
- 8. Director's Report

#### Adjourn

**NOTICE**: It is possible that a quorum of members of other governmental bodies of the municipality may be in attendance at the above-stated meeting to gather information. No action will be taken by any governmental body at the above-stated meeting other than the governmental body specifically referred to above in this notice. Please note that, upon reasonable notice, efforts will be made to accommodate the needs of disabled individuals through appropriate aids and services. For additional information or to request this service, contact Becki Weyer, City Clerk, at 819 Superior Avenue, Tomah, WI 54660.

### MINUTES FOR PUBLIC WORKS COMMISSION

A Public Works Commission was held on **Wednesday, April 26, 2023 at** <u>5:30 PM</u> in the Council Chambers at City Hall, 819 Superior Avenue, Tomah, WI.

Join Zoom Meeting https://us06web.zoom.us/j/2708608080?pwd=ZTZ0cmlLVEFEb1dzVDNwdi91UHFYQT09

Meeting ID: 270 860 8080 Passcode: 206751 One tap mobile +13092053325,,2708608080#,,,,\*206751# US

#### Call to Order - Roll Call

John Glynn (P), Dean Peterson (P), Lamont Kiefer (P), Brian Rice (A), Kerwin Greeno (P), Mayor Mike Murray (P), Nicole Hart (A). Quorum Present. Also present, Director Kirk Arity, Brandy Leis, Joe Kube and Mark Rezin.

#### **Approve Minutes**

April 2023 Minutes 1<sup>st</sup> by MM, 2<sup>nd</sup> by DP. All ayes. Motion approved.

#### **Discussion Items**

- 1) Elect Chair and Vice Chair
  - a. 1<sup>st</sup> by JG, 2<sup>nd</sup> by DP to nominate Lamont Kiefer as Chairman. All ayes. Motion approved.
  - b. 1<sup>st</sup> by MM, 2<sup>nd</sup> by DP to nominate John Glynn as Vice Chairman. All ayes. Motion approved.
  - c. 1<sup>st</sup> by DP, 2<sup>nd</sup> by KG to close nominations. All ayes. Motion approved.
- 2) Airport Update
  - a. Partnering with Sparta for fuel. Blacktopping around T-hangars. Steve Austin was present and advised there is a land line in the flight office and asked if that could be eliminated. He also stated that he works with Volk Field tower quite often and wanted it known how great they are and how much they are appreciated, Director Arity said he would pass that information on to them.
- 3) Street Closure: 100 Block of E. Council
  - a. Director Arity spoke with Rick Eagan about why he wanted the Street closed and he thought it would be safer for those crossing the street to the bathrooms and they would like more room for food trucks.
  - b. The committee stated there are crosswalks there for pedestrians to use and suggested food trucks to be parked along Superior Ave. There is also a financial aspect for the City, to pay overtime wages and it is hard to always have the manpower. They suggest if there are more concerns or issues in the future that it should be brought back.
  - c. 1<sup>st</sup> by MM, 2<sup>nd</sup> by DP to deny closure of E Council. All ayes. Motion approved.
- 4) Driveway Permit: 240 Alyssa
  - a. 1<sup>st</sup> by DP, 2<sup>nd</sup> by MM to approve the driveway permit. All ayes. Motion approved.
- 5) Resolution for Standard Airport Lease
  - a. 1<sup>st</sup> by LK, 2<sup>nd</sup> by DP to approve Resolution. All ayes. Motion approved.

Minutes will be approved at May PWC meeting.

- 6) Project Updates
  - a. Departments are working on locates for TDS and Brightspeed every day.
- 7) Payment of Monthly Water & Sewer Bills
  - a) Sewer- 1<sup>st</sup> by MM, 2<sup>nd</sup> by DP to approve sewer bills as presented. All ayes. Motion approved.
  - b) Water-1<sup>st</sup> by MM, 2<sup>nd</sup> by DP to approve water bills as presented. All ayes. Motion approved.
- 8) Departmental Reports
  - a. Sewer- Power outage for 4 hours, generator worked great. Helped at Fire Station with setting the new siren pole, water was filling hole so brought jet vac to help. Sucking out storm sewers with jet vac. Put a camera in the Glendale sewers and they look good. Working on five-year permit. Will be pumping out pool for Parks and Rec in the next couple weeks. Took 62 loads of sludge out in two days. Average daily is 1.6 million, had 4 days of 2.1.
  - b. Water- 1.3 million a day, skewed due to flushing. Have been doing directional flushing since April 18<sup>th</sup>. Looks like it is helping as the water is better color. Better quality of water means less chemicals need to be used. Send PFAS samples in March for EPA, will be a long time before hear results. Sent PFAS samples in for DNR, should know in roughly three weeks. Nate Waege represented the water department at Career Day in Wyville. DNR annual inspection will be on Tuesday.
  - c. Public Works- Helping at Rec Park with last phase of the rodeo grounds. Patching up streets and fixing plow marks in alleys. Cleaned up the airport dump site. Replacing street signs and straightening them out. The department will have chainsaw training next month. Crack sealing will start next week if the weather is good.
- 9) Directors Report
  - a. Working with Chamber on directional signage. Five-year capital improvement plan used \$8 million for a starting off point on a new Public Works shop. Project is projected for 2028.

#### Adjourn 1<sup>st</sup> by MM, 2<sup>nd</sup> by DP at 6:01 PM. All ayes. Motion approved.

Submitted by: Kim Lambert

Resolution No.

### COMPLIANCE MAINTENANCE RESOLUTION

RESOLVED that the City of Tomah informs the Department of Natural Resources that the following actions were taken by the City Council:

Review of the 2022 Compliance Maintenance Annual Report, which is attached to this Resolution.

Monitor the operation of the wastewater treatment facility to maintain permit compliance.

Implement and complete a Capacity, Management, Operation and Management (CMOM) program once the DNR drafts a final ruling.

Passed by a \_\_\_\_\_\_ vote of the Tomah City Council on June 20, 2023.

Mike Murray, Mayor

Rebecca Weyer, City Clerk

### STAFF COMMITTEE PREPARATION REPORT

#### Agenda Item:

**Compliance Maintenance Annual Report** 

# Summary and background information: (Appropriate documents attached)

The Waste Water Treatment Facility has a yearly audit called the Compliance Maintenance Annual Report (CMAR). A requirement with this report calls for a resolution from the City Council, confirming the report has been reviewed by the City of Tomah.

#### **Fiscal Note:**

None

#### **Recommendation:**

I recommend approval of the CMAR and forward that approval on to the City Council for resolution approval.

Director of Public Works Kirk Arity

5/14/23

Date

### Tomah Wastewater Treatment Facility

Last Updated: Reporting For: 5/9/2023 **2022** 

### **Influent Flow and Loading**

1. Monthly Average Flows a	and BOD Loadings
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1.1 Verify the following monthly flows and BOD loadings to your facility.

Influent No. 701	Influent Monthly Average Flow, MGD	×	Influent Monthly Average BOD Concentration mg/L	×	8.34	I	Influent Monthly Average BOD Loading, lbs/day
January	1.0606	х	342	х	8.34	=	3,028
February	1.0545	x	388	x	8.34	=	3,416
March	1.1495	х	321	х	8.34	=	3,080
April	1.2214	х	293	x	8.34	=	2,988
May	1.3197	x	304	х	8.34	П	3,346
June	1.3865	x	300	X	8.34	Ш	3,474
July	1.1568	x	317	x	8.34	=	3,056
August	1.0937	x	333	x	8.34	=	3,039
September	1.1025	х	320	х	8.34	Ξ	2,942
October	1.0611	x	423	х	8.34	Ш	3,743
November	1.0741	х	349	x	8.34	=	3,125
December	1.0842	х	350	x	8.34	11	3,165

2. Maximum Monthly Design Flow and Design BOD Loading 2.1 Verify the design flow and loading for your facility.

Design	Design Factor	x	%	=	% of Design
Max Month Design Flow, MGD	3.3	x	90	=	2.97
		x	100	=	3.3
Design BOD, lbs/day	4500	X	90	=	4050
		X	100	=	4500

2.2 Verify the number of times the flow and BOD exceeded 90% or 100% of design, points earned, and score:

	Months	Number of times	Number of times	Number of times	Number of times
	of	flow was greater	flow was greater	BOD was greater	BOD was greater
	Influent	than 90% of	than 100% of	than 90% of design	than 100% of design
January	1	0	0	0	0
February	1	0	0	0	0
March	1	0	0	. 0	0
April	1	0	0	0	0
May	1	0	0	0	0
June	1	0	0	0	0
July	1	0	0	0	0
August	1	0	0	0	0
September	1	0	0	0	0
October	1	0	0	0	0
November	1	0	0	0	0
December	1	0	0	0	0
Points per e	ach	2	1	3	2
Exceedances	5	0	0	0	0
Points		0	0	0	. 0
Total Numb	per of Po	oints			0

omah Wastewate	r Treatment Faci	lity	Last Updated: 5/9/2023	Reporting Fo 2022
● Yes		prated in the last year? ation date (MM/DD/YYYY)		
O No If No, please expl	ain:			
excessive conventi	nunity have a sewe onal pollutants ((C rcial users, hauled	er use ordinance that limited C)BOD, SS, or pH) or toxic su waste, or residences?		
4.2 Was it necessa o Yes • No	ry to enforce the c	ordinance?		
If Yes, please ex	plain:			
5. Septage Receivin	Ig			
5.1 Did you have r Septic Tanks	equests to receive Holding Tanks	septage at your facility? Grease Traps		
• Yes	• Yes	o Yes		
o No	O No	● No		
5.2 Did you receive Septic Tanks • Yes	e septage at your 1	facility? If yes, indicate volur 	me in gallons.	
0 No Holding Tanks		=		
o Yes ● No	1,893,875	gallons		
Grease Traps O Yes		gallons		
<ul> <li>No</li> <li>5.2.1 If yes to an any of these wast</li> </ul>		ase explain if plant performa	ance is affected when rece	eiving
	t things went well.			
	tions in the sewer	ational problems, permit viol system or treatment plant t n the last year?		oncerns,
• No	he situation and y	our community's response.		
	y accept hauled in	dustrial wastes, landfill leach	nate, etc.?	
m 2.				

omah Wastewater Treatment Facility	Last Updated: 5/9/2023	Reporting For <b>2022</b>
o Yes ● No		
If yes, describe the types of wastes received and any procedures in place to protect the facility from the discharge of hauled indus		t were

Total Points Generated		
Score (100 - Total Points Generated)	100	
Section Grade	A	

### Tomah Wastewater Treatment Facility

Last Updated:	Reporting	For:
5/9/2023	2022	

### Effluent Quality and Plant Performance (BOD/CBOD)

1	Effluent	(C)	Reculte
1.	CINCENC		Results

1.1 Verify the following monthly average effluent values, exceedances, and points for BOD or CBOD

Outfall No.	Monthly	90% of	Effluent Monthly	Months of	Permit Limit	90% Permit
001	Average	Permit Limit	Average (mg/L)	Discharge	Exceedance	Limit
	Limit (mg/L)	> 10 (mg/L)	_	with a Limit		Exceedance
January	25	22.5	8	1	0	0
February	25	22.5	12	1	0	0
March	25	22.5	11	1	0	0
April	25	22.5	7	1	0	0
May	15	13.5	6	1	0	0
June	15	13.5	5	1	0	0
July	13	11.7	6	1	0	0
August	13	11.7	4	1	0	0
September	15	13.5	5	1	0	0
October	15	13.5	5	1	0	0
November	25	22.5	5	1	0	0
December	25	22.5	6	1	0	0
		* Eq	uals limit if limit is	<= 10	••••••••••••••••••••••••••••••••••••••	
Months of d	ischarge/yr			12		
Points per e	ach exceedanc	e with 12 mor	ths of discharge		7	3
Exceedance	S				0	0
Points					0	0
Total num	ber of points					0
of the year	, the multiplica	ation factor is	ample: For a wast 12/6 = 2.0 on was taken to re			niy 6 months
	••••••••••••••••••••••••••••••••••••••					
	er Calibration					
<ul> <li>2.1 Was the</li> <li>● Yes</li> </ul>	Enter		ed in the last year n date (MM/DD/Y) ]			
	Enter	last calibratio				
• Yes	Enter 2022	last calibratio				
• Yes • No	Enter 2022	last calibratio				
• Yes • No If No, pleas . Treatmen	Enter 2022 se explain: nt Problems	last calibratio -08-12	n date (MM/DD/Y)	/YY) 		
• Yes • No If No, pleas . Treatmen 3.1 What pr	Enter 2022 se explain: nt Problems roblems, if any	last calibratio -08-12 , were experie		/YY) 	eatened treatm	ient?
• Yes • No If No, pleas . Treatmen 3.1 What pr	Enter 2022 se explain: nt Problems	last calibratio -08-12 , were experie	n date (MM/DD/Y)	/YY) 	eatened treatm	ent?
• Yes • No If No, pleas •. Treatmen 3.1 What pr The warm •. Other Mor 4.1 At any t	Enter 2022 se explain: of Problems oblems, if any days with colo nitoring and Lir time in the pas	last calibratio -08-12 , were experie d nights nits t year was the	n date (MM/DD/Y)	(YY) year that three of a permit lin		

Tomah Wastewater Treatment Facility	Last Updated: 5/9/2023	Reporting For: 2022
If Yes, please explain:		
4.2 At any time in the past year was there a failure of an effluent acute or toxicity (WET) test? o Yes	chronic whole ef	fluent
• No		
If Yes, please explain:		
4.3 If the biomonitoring (WET) test did not pass, were steps taken to ident source(s) of toxicity? O Yes	ify and/or reduc	e
O No		
• N/A		
Please explain unless not applicable:		

Total Points Generated	
Score (100 - Total Points Generated)	100
Section Grade	A

Готаh	Wastewater	Treatment	Facility
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Last Updated:	Reporting	For
5/9/2023	2022	

#### Effluent Quality and Plant Performance (Total Suspended Solids)

1. Effluent Total Suspended Solids Results	
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1.1 Verify the following monthly average effluent values, exceedances, and points for TSS:

Total Num	ber of Points					0
Points					0	0
Exceedance	S				0	0
Points per	each exceed	ance with 12	months of disch	arge:	7	3
Months of D	ischarge/yr			12		
		* Eq	uals limit if limit is	<= 10		
December	25	22.5	6	1	0	0
November	25	22.5	4	1	0	0
October	15	13.5	5	1	0	0
September	15	13.5	7	1 1 1 1	0	0
August	15	13.5	5		0	0
July	15	13.5	7		0	0
June	15	13.5	6		0	0
May	15	13.5	6	1	0	0
April	25	22.5	6	1	0	0
March	25	22.5	9	1	0	0
February	25	22.5	6	1	0	0
January	25	22.5	4	1	0	0
001	Average Limit (mg/L)	Permit Limit >10 (mg/L)	Average (mg/L)	Discharge with a Limit	Exceedance	Limit Exceedance
Outfall No.	Monthly	90% of	Effluent Monthly		Permit Limit	90% Permit

NOTE: For systems that discharge intermittently to state waters, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge.

Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is 12/6 = 2.0

1.2 If any violations occurred, what action was taken to regain compliance?

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

### Tomah Wastewater Treatment Facility

Effluent Q	Quality and	Plant Performance	(Ammonia -	NH3)
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1. Effluent Ammonia Results

1.1 Verify the following monthly and weekly average effluent values, exceedances and points for ammonia

		<b></b>		· · · · · · · · · · · · · · · · · · ·		r	· · · · · · · · · · · · · · · · · · ·		
Outfall No.	Monthly	Weekly	Effluent	Monthly	Effluent	Effluent	Effluent	Effluent	Weekly
001			Monthly	Permit Limit	Weekly	Weekly	Weekly	Weekly	Permit
	Limit	Limit	NH3 Average Limit NH3		Average	Average	Average	Average for Week	Limit Exceed
	(mg/L)	(mg/L)	(mg/L)	Exceed ance		2	3	4	ance
January	9.4		.162	0					
February	9.4		2.507	0					
March	9.4		.405	0					
April	7.3		.089	0					
May	7.3		.019	0					
June	4.7		0	0					
July	4.7		0	0					
August	4.7		0	0					
September	4.7		0	0					
October	9.4		.045	0					
November	9.4		.018	0					
December	9.4		.178	0					
Points per e	ach excee	dance of N	1onthly av	verage:					10
Exceedance	s, Monthly	/:							0
Points:									0
Points per e	ach excee	dance of w	veekly ave	erage (wh	en there is	s no montl	nly averag	e):	2.5
Exceedance	s, Weekly	*							0
Points:								0	
Total Number of Points 0								0	
NOTE: Limit exceedances are considered for monthly OR weekly averages but not both. When a monthly average limit exists it will be used to determine exceedances and generate points. This will be true even if a weekly limit also exists. When a weekly average limit exists and a monthly limit does not exist, the weekly limit will be used to determine exceedances and generate points. 1.2 If any violations occurred, what action was taken to regain compliance?									

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

Last Updated: Reporting For: 5/9/2023 2022

#### **Tomah Wastewater Treatment Facility**

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E	ffluent Quality	and Plant Perfe	ormance (Phosph	norus)	
1	. Effluent Phosphor 1.1 Verify the follow		e effluent values, exce	eedances, and point	s for Phosphorus
	Outfall No. 001	Monthly Average phosphorus Limit (mg/L)	Effluent Monthly Average phosphorus (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance
	January	1	0.195	. 1	0
	February	1	0.273	1	0
	March	1	0.404	1	0
	April	1	0.251	1	0

0.229

0.192

0.409

0.328

0.355

0.353

0.240

0.280

1 1

1

1

1

1

1

1

1

#### 12 Months of Discharge/yr Points per each exceedance with 12 months of discharge: Exceedances

#### **Total Number of Points**

May

June

July

August

September

October

November

December

NOTE: For systems that discharge intermittently to waters of the state, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge.

Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is 12/6 = 2.0

1.2 If any violations occurred, what action was taken to regain compliance?

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

Last Updated: Reporting For: 5/9/2023 2022

0

0

0

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0

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0

0

10

0

0

0

#### 

	1. Biosolids Use/Disposal
I	1.1 How did you use or dispass of your biasolide? (Cha

1.1 How did you use or dispose of your biosolids? (Check all that apply)

□ Land applied under your permit

 $\boxtimes$  Publicly Distributed Exceptional Quality Biosolids

 $\Box$  Hauled to another permitted facility

Landfilled

Incinerated

Other

NOTE: If you did not remove biosolids from your system, please describe your system type such as lagoons, reed beds, recirculating sand filters, etc.

1.1.1 If you checked Other, please describe:

#### 3. Biosolids Metals

Number of biosolids outfalls in your WPDES permit:

3.1 For each outfall tested, verify the biosolids metal quality values for your facility during the last calendar year.

Outfall No	. 005	- SLI	JDGE															
Parameter	80% of Limit	H.Q. Limit	Ceiling Limit	Jan	Feb	Mar	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	80% Value	High Quality	Ceiling
Arsenic		41	75	3.1			3			3.4			З				0	0
Cadmium		39	85	.15			.4			.56			.62				0	0
Copper		1500	4300	165			167			216	:		267				0	0
Lead		300	840	6.6			10.7			16.8			12.4				0	0
Mercury		17	57	.11			.11			.28			.18				0	0
Molybdenum	60		75	3			2.8			2.7			3.8			0		0
Nickel	336		420	20.2			13			16.6			17.2			0		0
Selenium	80		100	<3			2.5			<2.6			3.4			0		0
Zinc		2800	7500	203			155			286			305				0	0

3.1.1 Number of times any of the metals exceeded the high quality limits OR 80% of the limit for molybdenum, nickel, or selenium = 0

Exceedence Points

• 0 (0 Points)

0 1-2 (10 Points)

o > 2 (15 Points)

3.1.2 If you exceeded the high quality limits, did you cumulatively track the metals loading at each land application site? (check applicable box)

o Yes

No (10 points)

• N/A - Did not exceed limits or no HQ limit applies (0 points)

0 N/A - Did not land apply biosolids until limit was met (0 points)

3.1.3 Number of times any of the metals exceeded the ceiling limits = 0 Exceedence Points

- 0 (0 Points)
- 0 1 (10 Points)
- 0 > 1 (15 Points)

3.1.4 Were biosolids land applied which exceeded the ceiling limit?

o Yes (20 Points)

No (0 Points)

omah Wastewater Treatment Fac	ility	Last Updated: 5/9/2023	Reporting <b>2022</b>	
3.1.5 If any metal limit (high qualit Has the source of the metals been i	y or ceiling) was exceeded at any time dentified?	e, what action wa		C
L I. Pathogen Control (per outfall):				-
4.1 Verify the following information.	If any information is incorrect, use the	ne Report Issue b	outton	
under the Options header in the left-	side menu.			
Outfall Number:	005			
Biosolids Class:	Α			
Bacteria Type and Limit:	Fecal Coliform	1		
Sample Dates:	01/01/2022 - 03/31/2022			
Density:	9			
Sample Concentration Amount:	MPN/G TS			
Requirement Met:	Yes			
Land Applied:	No			
Process:	Pasteurization			
Process Description:	Ground frozen			
Outfall Number:	005	*******		
Biosolids Class:	А			
Bacteria Type and Limit:	Fecal Coliform	ו		
Sample Dates:	01/01/2022 - 12/31/2022			
Density:	9			ĺ
Sample Concentration Amount:	MPN/G TS			
Requirement Met:	Yes			
Land Applied:	No			
Process:	Pasteurization			
Process Description:	We don't land apply, Farmers do	that		
Outfall Number:	005			
Biosolids Class:	A			
Bacteria Type and Limit:	Fecal Coliform	٦		
Sample Dates:	04/01/2022 - 06/30/2022			
Density:	9			
Sample Concentration Amount:	MPN/G TS			
Requirement Met:	Yes			
Land Applied:	No			
Process:	Pasteurization			
Process Description:	We haul to farmers, and they ap	ply		

	5/9/2023	<u> </u>
Outfall Number:	005	
Biosolids Class:	Α	_
Bacteria Type and Limit:	Fecal Coliform	
Sample Dates:	07/01/2022 - 09/30/2022	_
Density:	9	
Sample Concentration Amount:	MPN/G TS	
Requirement Met:	Yes	_
Land Applied:	Νο	
Process:	Pasteurization	_
Process Description:	We haul to farmers, and they apply	
Dutfall Number:	005	
Biosolids Class:	A	
Bacteria Type and Limit:	Fecal Coliform	
Sample Dates:	10/01/2022 - 12/31/2022	0
Density:	9	
Sample Concentration Amount:	MPN/G TS	
Requirement Met:	Yes	
Land Applied:	No	
Process:	Pasteurization	
4.2.1 Was the limit exceeded or the pr o Yes (40 Points)	We haul to farmers, and they apply meet the process criteria at the time of land applicat rocess criteria not met at the time of land application	
4.2 If exceeded Class B limit or did not 4.2.1 Was the limit exceeded or the pr	meet the process criteria at the time of land application	
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr</li> <li>o Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>. Vector Attraction Reduction (per outfa</li> <li>5.1 Verify the following information. If a</li> </ul>	meet the process criteria at the time of land application rocess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr</li> <li>Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>Vector Attraction Reduction (per outfa</li> <li>5.1 Verify the following information. If a button under the Options header in the</li> </ul>	meet the process criteria at the time of land application rocess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the provide of the p</li></ul>	meet the process criteria at the time of land application occess criteria not met at the time of land application application (in the information is incorrect, use the Report Is left-side menu.	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr</li> <li>Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>Vector Attraction Reduction (per outfa</li> <li>5.1 Verify the following information. If a button under the Options header in the</li> <li>Outfall Number:</li> <li>Method Date:</li> </ul>	meet the process criteria at the time of land application rocess criteria not met at the time of land application and application any of the information is incorrect, use the Report Is left-side menu. 005	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr</li> <li>Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>Vector Attraction Reduction (per outfa</li> <li>5.1 Verify the following information. If a button under the Options header in the</li> <li>Outfall Number:</li> <li>Method Date:</li> <li>Option Used To Satisfy Requirement:</li> </ul>	meet the process criteria at the time of land application occess criteria not met at the time of land application application any of the information is incorrect, use the Report Is left-side menu.	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr</li> <li>Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>Vector Attraction Reduction (per outfa</li> <li>5.1 Verify the following information. If a button under the Options header in the</li> <li>Outfall Number:</li> <li>Method Date:</li> <li>Option Used To Satisfy Requirement:</li> <li>Requirement Met:</li> </ul>	meet the process criteria at the time of land application rocess criteria not met at the time of land application and application any of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr</li> <li>Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>Vector Attraction Reduction (per outfa</li> <li>5.1 Verify the following information. If a button under the Options header in the</li> <li>Outfall Number:</li> <li>Method Date:</li> <li>Option Used To Satisfy Requirement:</li> <li>Requirement Met:</li> <li>Land Applied:</li> </ul>	meet the process criteria at the time of land application focess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge Yes	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr</li> <li>Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>Vector Attraction Reduction (per outfation of the following information. If a button under the Options header in the Outfall Number:</li> <li>Method Date:</li> <li>Option Used To Satisfy Requirement:</li> <li>Requirement Met:</li> <li>Land Applied:</li> <li>Limit (if applicable):</li> </ul>	meet the process criteria at the time of land application focess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge Yes	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr <ul> <li>Yes (40 Points)</li> </ul> </li> <li>No <ul> <li>If yes, what action was taken?</li> </ul> </li> <li>Vector Attraction Reduction (per outfation under the Options header in the Options header in the Outfall Number: <ul> <li>Method Date:</li> <li>Option Used To Satisfy Requirement:</li> <li>Requirement Met:</li> <li>Land Applied:</li> <li>Limit (if applicable):</li> </ul> </li> </ul>	meet the process criteria at the time of land application focess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge Yes	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr <ul> <li>Yes (40 Points)</li> <li>No</li> </ul> </li> <li>If yes, what action was taken? <ul> <li>Vector Attraction Reduction (per outfa</li> </ul> </li> <li>5.1 Verify the following information. If a button under the Options header in the Outfall Number: <ul> <li>Method Date:</li> <li>Option Used To Satisfy Requirement:</li> <li>Requirement Met:</li> <li>Land Applied:</li> <li>Limit (if applicable):</li> </ul> </li> <li>Outfall Number:</li> </ul>	meet the process criteria at the time of land application focess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge Yes No 005	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the provide of Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>Vector Attraction Reduction (per outfation). If a pout on under the Options header in the Dutfall Number:</li> <li>Method Date:</li> <li>Dottfall Number:</li> <li>Applied:</li> <li>Limit (if applicable):</li> <li>Dutfall Number:</li> <li>Method Date:</li> <li>Dutfall Number:</li> </ul>	meet the process criteria at the time of land application ocess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge Yes No 005 12/31/2022	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr o Yes (40 Points) <ul> <li>No</li> </ul> </li> <li>If yes, what action was taken? </li> <li>Vector Attraction Reduction (per outfation under the Options header in the Dutfall Number: <ul> <li>Method Date:</li> <li>Option Used To Satisfy Requirement:</li> <li>Requirement Met:</li> <li>Land Applied:</li> <li>Limit (if applicable):</li> </ul> </li> <li>Dutfall Number:</li> <li>Method Date:</li> <li>Dutfall Number:</li> </ul>	meet the process criteria at the time of land application occess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge Yes No 005 12/31/2022 pH Adjustment of Sludge	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the provide of Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> <li>Vector Attraction Reduction (per outfation of the provide of th</li></ul>	meet the process criteria at the time of land application forcess criteria not met at the time of land application and of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge Yes No 005 12/31/2022 pH Adjustment of Sludge Yes	?
<ul> <li>4.2 If exceeded Class B limit or did not</li> <li>4.2.1 Was the limit exceeded or the pr</li> <li>• Yes (40 Points)</li> <li>• No</li> <li>If yes, what action was taken?</li> <li></li></ul>	meet the process criteria at the time of land application occess criteria not met at the time of land application all): any of the information is incorrect, use the Report Is left-side menu. 005 03/31/2022 pH Adjustment of Sludge Yes No 005 12/31/2022 pH Adjustment of Sludge	?

omah Wastewater Treatment Facility		Updated: ⁄2023	Reporting 2022	
Outfall Number:	005			
Method Date:	06/30/2022			
Option Used To Satisfy Requirement:	pH Adjustment of Sludge			
Requirement Met:	Yes			
Land Applied:	No			
Limit (if applicable):				
Results (if applicable):				
Outfall Number:	005			
Method Date:	09/30/2022			
Option Used To Satisfy Requirement:	pH Adjustment of Sludge			
Requirement Met:	Yes			
Land Applied:	No			
Limit (if applicable):				
Results (if applicable):			]	0
Outfall Number:	005			
Method Date:	12/31/2022			
Option Used To Satisfy Requirement:	pH Adjustment of Sludge			
Requirement Met:	Yes			
Land Applied:	No			
Limit (if applicable):				
Results (if applicable):				
<ul> <li>5.2 Was the limit exceeded or the proce</li> <li>Yes (40 Points)</li> <li>No</li> <li>If yes, what action was taken?</li> </ul>	ss criteria not met at the time of land app	olication?		
<ul> <li>b. Biosolids Storage</li> <li>6.1 How many days of actual, current bifacility have either on-site or off-site?</li> <li>&gt;= 180 days (0 Points)</li> <li>150 - 179 days (10 Points)</li> <li>120 - 149 days (20 Points)</li> <li>90 - 119 days (30 Points)</li> <li>&lt; 90 days (40 Points)</li> <li>&lt; N/A (0 Points)</li> <li>6.2 If you checked N/A above, explain vertice</li> </ul>	osolids storage capacity did your wastew	ater treat	ment	0
7. Issues 7.1 Describe any outstanding biosolids i No issues	ssues with treatment, use or overall man	agement:		

Tomah Wastewater Treatment Facility	Last Updated:	Reporting For:
	5/9/2023	2022

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

Tomah Wastewater Treatment Facility	Last Updated: Report 5/9/2023 <b>20</b>	ing Foi <b>22</b>
Staffing and Preventative Maintenance (All Trea	tment Plants)	
<ul> <li>1. Plant Staffing</li> <li>1.1 Was your wastewater treatment plant adequately staffed</li> <li>Yes</li> <li>No</li> <li>If No, please explain:</li> </ul>	last year?	
Could use more help/staff for:		 
<ul> <li>1.2 Did your wastewater staff have adequate time to properly fulfill all wastewater management tasks including recordkeepin</li> <li>Yes</li> <li>No</li> <li>If No, please explain:</li> </ul>		
<ul> <li>2. Preventative Maintenance</li> <li>2.1 Did your plant have a documented AND implemented plan major equipment items?</li> <li>Yes (Continue with question 2) □□</li> <li>No (40 points)□□</li> <li>If No, please explain, then go to question 3:</li> </ul>	n for preventative maintenance on	
<ul> <li>2.2 Did this preventative maintenance program depict freque and other tasks necessary for each piece of equipment?</li> <li>Yes</li> <li>No. (10 pointe)</li> </ul>	ncy of intervals, types of lubrication,	 0
<ul> <li>No (10 points)</li> <li>2.3 Were these preventative maintenance tasks, as well as m filed so future maintenance problems can be assessed properl</li> <li>Yes</li> </ul>		d
<ul> <li>o Paper file system</li> <li>o Computer system</li> <li>o Both paper and computer system</li> <li>o No (10 points)</li> </ul>		
<ul> <li>3. O&amp;M Manual</li> <li>3.1 Does your plant have a detailed O&amp;M and Manufacturer E as a reference when needed?</li> <li>Yes</li> </ul>	quipment Manuals that can be used	
<ul> <li>o No</li> <li>4. Overall Maintenance /Repairs</li> <li>4.1 Rate the overall maintenance of your wastewater plant.</li> </ul>		
<ul> <li>Excellent</li> <li>Very good</li> <li>Good</li> <li>Fair</li> <li>Poor</li> </ul>		
Describe your rating: Everybody that stops says we have the best-looking plant f	for its age.	
Item 2.		]

Tomah Wastewater Treatment Facility	Last Updated:	Reporting For:
	5/9/2023	2022

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

		Last Updat 5/9/2023	ed: Reportir 202	•		
Operator	· Certification and Educat	tion			<u></u>	
1.1 Did yc • Yes (0 • No (20 Name: BR Certificat 2. Certifica 2.1 In acc and subcl	D points) RANDY L LEIS	5 and 114.57, Wisco erator-in-charge (OI	nsin Administ C) to operate	the wastew		0
Sub	SubClass Description	WWTP		OIC		1
Class		Advanced	OIT	Basic	Advanced	
A1	Suspended Growth Processes	Х			X	
A2	Attached Growth Processes					
A3	Recirculating Media Filters					
A4	Ponds, Lagoons and Natural					
A5	Anaerobic Treatment Of Liquid					
В	Solids Separation	X			X	0
С	Biological Solids/Sludges	Х			X	
Р	Total Phosphorus	Х			X	
N	Total Nitrogen		X			
D	Disinfection	Х			X	
L	Laboratory	Х			Х	
U	Unique Treatment Systems					
SS	Sanitary Sewage Collection	X	NA	NA	X	
	. ,				perate this	
3.1 In the to ensure of the foll ⊠ One o □ An arr □ An ope be cert □ A cons □ None If "None	tion Planning e event of the loss of your design the continued proper operation lowing options (check all that app r more additional certified operat rangement with another certified rangement with another commun erator on staff who has an operat tified within one year sultant to serve as your certified of the above (20 points) of the above" is selected, please	and maintenance of oly)? tors on staff operator nity with a certified of cor-in-training certifi operator	the plant tha	t includes o	ne or more	0
4.1 If you	ing Education Credits 1 had a designated operator-in-cl 1 Credits at the following rates?	harge, was the oper	ator-in-charge	e earning Co	ontinuing	

Tomah Wastewater Treatment Facility	Last Updated: 5/9/2023	Reporting For: 2022
<ul> <li>OIT and Basic Certification:</li> <li>Averaging 6 or more CECs per year.</li> <li>Averaging less than 6 CECs per year.</li> <li>Advanced Certification:</li> <li>Averaging 8 or more CECs per year.</li> <li>Averaging less than 8 CECs per year.</li> </ul>		

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

Tomah Wastewater Tre	atment Facility	Last Updated: Repo 5/9/2023	orting For: <b>2022</b>
Financial Managem	ent	······································	
1. Provider of Financial	Information		
Name:	Samantha Linehan		
Telephone:	(608)374-7431	 (XXX) XXX-XXXX	
E-Mail Address			
(optional):	slinehan@tomahonline.com		
<ul> <li>2. Treatment Works Ope</li> <li>2.1 Are User Charges of treatment plant AND/OI</li> <li>Yes (0 points) □□</li> <li>No (40 points)</li> <li>If No, please explain:</li> </ul>	or other revenues sufficient to cover O&M	expenses for your wastewater	
2.2 When was the User Year: 2022 • 0-2 years ago (0 poi o 3 or more years ago o N/A (private facility)	-	(s) last reviewed and/or revised	l? 0
financial resources avai plant and/or collection s • Yes (0 points)	ecial account (e.g., CWFP required segrega lable for repairing or replacing equipment system?		
O NO (40 points)	[PUBLIC MUNICIPAL FACILITIES SHALL C	OMPLETE OUESTION 31	
<ul> <li>3. Equipment Replacem</li> <li>3.1 When was the Equiverant Year:</li> <li>2022</li> <li>1-2 years ago (0 poir or 3 or more years ago</li> </ul>	ent Funds ipment Replacement Fund last reviewed a  nts)□□		
o N/A If N/A, please explain	<u>:</u>		
3.2 Equipment Replace	•	. []	
3.2.2 Adjustments - if	e Reported on Last Year's CMAR necessary (e.g. earned interest, awal of excess funds, increase ortfall, etc.)	\$ 2,341,652.00 \$ 0.00	
3.2.3 Adjusted January 3.2.4 Additions to Fund earned interest, etc.)	<ul> <li>1st Beginning Balance</li> <li>d (e.g. portion of User Fee,</li> <li>+</li> </ul>	\$ 2,341,652.00 \$ 8,681.00	

Tomah Wastewater Treatment Facility	Last Update 5/9/2023	d: Reporting F 2022	For:
3.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 3.2.6.1 below*)-\$	0.	00	
3.2.6 Ending Balance as of December 31st for CMAR Reporting Year	2,350,333.	00	
All Sources: This ending balance should include all Equipment Replacement Funds whether held in a bank account(s), certificate(s) of deposit, etc.			
3.2.6.1 Indicate adjustments, equipment purchases, and/or major repairs	s from 3.2.5 a	bove.	
3.3 What amount should be in your Replacement Fund? \$ 1,800,0		1	0
Please note: If you had a CWFP loan, this amount was originally based or Assistance Agreement (FAA) and should be regularly updated as needed. instructions and an example can be found by clicking the SectionInstruct header in the left-side menu.	Further calcu ions link unde	Ilation r Info	
<ul> <li>3.3.1 Is the December 31 Ending Balance in your Replacement Fund above greater than the amount that should be in it (#3.3)?</li> <li>Yes</li> </ul>	/e, (#3.2.6) e	equal to, or	
o No If No, please explain.			
<ul> <li>4. Future Planning</li> <li>4.1 During the next ten years, will you be involved in formal planning for u or new construction of your treatment facility or collection system?</li> <li>Yes - If Yes, please provide major project information, if not already lise o No</li> </ul>			
Project Project Description #		Approximate Construction Year	
1 Phosphorous trading plan	\$33,100,000		
2 Replace grit and bar screen	\$400,000	2023	ł
3 Rehab Final Clarifiers	\$200,000	2024	
4 Replace UV system 5 Replace sewer main on ET.	\$225,000 \$400,000	2024	
6 Replace Polymer system	\$70,000	2025	
5. Financial Management General Comments	II	· · · · · · · · · · · · · · · · · · ·	
ENERGY EFFICIENCY AND USE			
<ul><li>6. Collection System</li><li>6.1 Energy Usage</li><li>6.1.1 Enter the monthly energy usage from the different energy sources:</li></ul>			
COLLECTION SYSTEM PUMPAGE: Total Power Consumed			
Number of Municipally Owned Pump/Lift Stations: 7			

nah Wastewater Treatment Facility		5/9/2023	2022	
	Electricity Consumed (kWh)	Natural Gas Consumed (therms)		
January	8,035			
February	7,915			
March	8,769			
April	7,680			
Мау	6,291			
June	6,148			
July	5,213			
August	4,956			
September	4,385			
October	3,972			
November	4,914			
December	7,916			
Total	76,194	0		
Average	6,350	0		
6.2.1 Indicat	lated Processes and Equip e equipment and practice tion or Screening Shaft Pumps	pment s utilized at your pump/lift stat	ions (Check all that a	apply):
5.2.1 Indicat Comminu Extended Flow Mete Pneumati SCADA S Self-Prim Submersi	e equipment and practice tion or Screening Shaft Pumps ering and Recording c Pumping ystem ing Pumps		ions (Check all that a	apply):
6.2.1 Indicat Comminu Extended Flow Mete Pneumati SCADA Sy Self-Prim Submersi Variable S Other:	e equipment and practice tion or Screening Shaft Pumps ering and Recording c Pumping ystem ing Pumps ble Pumps Speed Drives		ions (Check all that a	apply):
5.2.1 Indicat Comminu Extended Flow Mete Pneumati SCADA Sy Self-Prim Submersi Variable S Other: 5.2.2 Comme Ans an En No Yes	e equipment and practices tion or Screening Shaft Pumps ering and Recording c Pumping ystem ing Pumps ble Pumps Speed Drives		ions (Check all that a	apply):
6.2.1 Indicat Comminu Extended Flow Mete Pneumati SCADA Sy Self-Prim Submersi Variable S Other: 6.2.2 Comme 6.2.2 Comme Alas an En No Yes Year: By Whom:	e equipment and practices tion or Screening Shaft Pumps ering and Recording c Pumping ystem ing Pumps ble Pumps Speed Drives	s utilized at your pump/lift stati	ions (Check all that a	apply):

omah Was	tewater Tre	atment Facility	/		Last Upd 5/9/202	lated:Reporting23 <b>2022</b>
6.4 Future	Energy Relate	ed Equipment				
6.4.1 Wha pump/lift		cient equipment	or practices d	o you have plar	nned for the fut	ure for your
Eliminate	e one lift stati	on				
	Usage er the monthly	y energy usage Total Power Co			rces:	
	Electricity Consumed (kWh)	Total Influent Flow (MG)	Electricity Consumed/ Flow (kWh/MG)	Total Influent BOD (1000 lbs)	Electricity Consumed/ Total Influent BOD (kWh/1000lbs)	Natural Gas Consumed (therms)
January	81,000	32.88	2,464	93.87	863	4,860
February	78,000	29.53	2,641	95.65	815	4,241
March	99,000	35.63	2,779	95.48	1,037	3,353
April	98,000	36.64	2,675	89.64	1,093	2,198
May	107,000	40.91	2,615	103.73	1,032	269
June	99,000	41.60	2,380	104.22	950	1
July	84,000	35.86	2,342	94.74	887	0
August	84,000	33.90	2,478	94.21	892	0
	117,000	33.08	3,537	88.26	1,326	17
September	00.000	32.89	2,736	116.03	776	773
October	90,000			93.75	992	2,947
	93,000	32.22	2,886	93.75	332	2,947
October		32.22 33.61	2,886 2,737	93.75	938	4,528
October November	93,000		-			-

7.2 Energy Related Processes and Equipment

7.2.1 Indicate equipment and practices utilized at your treatment facility (Check all that apply):

□ Aerobic Digestion

□ Anaerobic Digestion

Biological Phosphorus Removal

- Coarse Bubble Diffusers
- $\boxtimes$  Dissolved O2 Monitoring and Aeration Control
- Effluent Pumping
- Fine Bubble Diffusers
- ☑ Influent Pumping
- oxtimes Mechanical Sludge Processing
- ☑ Nitrification
- SCADA System
- UV Disinfection
- ☑ Variable Speed Drives

Tomah Wastewater Treatment Facility	Last Updated: 5/9/2023	Reporting For: 2022
7.2.2 Comments:	A	
7.3 Future Energy Related Equipment		
7.3.1 What energy efficient equipment or practices do you have planned treatment facility?	for the future for	' your
New bar screen this year and new UV next year		
8. Biogas Generation		
<ul> <li>8.1 Do you generate/produce biogas at your facility?</li> <li>No</li> </ul>		
<ul> <li>O Yes</li> <li>If Yes, how is the biogas used (Check all that apply):</li> <li>□ Flared Off</li> <li>□ Building Heat</li> </ul>		
Process Heat     Generate Electricity     Other:		
9. Energy Efficiency Study		
<ul> <li>9.1 Has an Energy Study been performed for your treatment facility?</li> <li>No</li> </ul>		
○ Yes □ Entire facility		
Year:		
By Whom:		
Describe and Comment:		
□ Part of the facility		
Year:		
By Whom:		
Describe and Comment:		

Tomah Wastewater Treatment Facility	Last Updated:	Reporting For:
-	5/9/2023	2022

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

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Tomah Wastewater Treatment Facility	Last Updated: 5/9/2023	Reporting For 2022
Sanitary Sewer Collection Systems		
<ol> <li>Capacity, Management, Operation, and Maintenance (CMOM) Program</li> <li>1.1 Do you have a CMOM program that is being implemented?</li> <li>Yes</li> <li>No</li> </ol>		
If No, explain:		
<ul> <li>1.2 Do you have a CMOM program that contains all the applicable component of the applicable component of</li></ul>	onents and items	
<ul> <li>No (30 points)</li> <li>N/A</li> <li>If No or N/A, explain:</li> </ul>		
<ul> <li>1.3 Does your CMOM program contain the following components and iter components and items that apply)</li> <li>☑ Goals [NR 210.23 (4)(a)]</li> </ul>	ms? (check the	
Describe the major goals you had for your collection system last year: To provide uninterruptable service and try to eliminate infiltration.		
Did you accomplish them? ● Yes		
о No If No, explain:		
□		
Does this chapter of your CMOM include: Image: Organizational structure and positions (eg. organizational chart and Image: Does this chapter of your CMOM include: Image: D	position descripti	ons)
$oxed{\Delta}$ Person(s) responsible for reporting overflow events to the departme	ent and the public	
Legal Authority [NR 210.23 (4) (c)] What is the legally binding document that regulates the use of your sev Ordinance chapter 62 sewers	ver system?	
If you have a Sewer Use Ordin <u>ance or other similar</u> document, when we revised? (MM/DD/YYYY) 2017-01-09	as it last reviewed	and
Does your sewer use ordinance or other legally binding document addreed and a property inflow and infiltration	ess the following:	
oxtimes New sewer and building sewer design, construction, installation, tes oxtimes Rehabilitated sewer and lift station installation, testing and inspection	on	
⊠Sewage flows satellite system and large private users are monitored necessary ⊠ Fat, oil and grease control	i and controlled, a	S
$\boxtimes$ Enforcement procedures for sewer use non-compliance $\boxtimes$ Operation and Maintenance [NR 210.23 (4) (d)]		
Does your operation and maintenance program and equipment include $\square$ Equipment and replacement part inventories	the following:	
Up-to-date sewer system map A management system (computer database and/or file system) for a information for O&M activities, investigation and rehabilitation	collection system	

Tomah Wastewater Treatn	nent Facility		Last Updated: 5/9/2023	Reporting <b>2022</b>	
<ul> <li>Capacity assessment</li> <li>Basement back assess</li> <li>Regular O&amp;M training</li> <li>Design and Performance</li> <li>What standards and proce the sewer collection system</li> </ul>	program sment and correction e Provisions [NR 210.2 edures are established m, including building DNR NR 110 Standar	tenance activities (see que 23 (4) (e)]□□ d for the design, constructi sewers and interceptor see ds and/or local Municipal C	on, and inspecti wers on private		
local municipal code re	equirements				
<ul> <li>Overflow Emergency Re Does your emergency res</li> <li>Responsible personne</li> <li>Response order, timin</li> <li>Public notification prof</li> <li>Training</li> <li>Emergency operation</li> <li>Annual Self-Auditing of</li> <li>Special Studies Last Yea</li> <li>Infiltration/Inflow (I/I</li> <li>Sewer System Evaluation</li> <li>Sewer Evaluation and</li> <li>Lift Station Evaluation</li> </ul>	ponse capability inclu l communication proc g and clean-up tocols protocols and implem your CMOM Program or (check only those th ) Analysis tion Survey (SSES) Capacity Managment	de: edures entation procedures [NR 210.23 (5)]□□ nat apply):			0
<ol> <li>Operation and Maintenan</li> <li>2.1 Did your sanitary sewe maintenance activities? Cor</li> </ol>	r collection system m			L	
Cleaning			intanica.		
Root removal	.001	% of system/year			
Flow monitoring	100	% of system/year			
Smoke testing	0	% of system/year			
Sewer line televising	25	% of system/year			
Manhole					
inspections	42	% of system/year			
Lift station O&M Manhole	13	# per L.S./year			
rehabilitation	.03	% of manholes rehabbed			
Mainline rehabilitation	.02	% of sewer lines rehabbe	d		
Private sewer inspections	0	% of system/year			
Private sewer I/I removal	0	% of private services			

Tomah Wastewater Treatment Facility	Last Updated: 5/9/2023	Reporting Fo 2022
River or water		
5	s evaluated or maintai	nea
Please include additional comments about your sanitary sewer colle	ection system below:	·
We replaced 950 feet of sewer.		
<ol> <li>Performance Indicators</li> <li>3.1 Provide the following collection system and flow information for t</li> <li>32 Total actual amount of precipitation last year in</li> </ol>		
32 Annual average precipitation (for your location		
55 Miles of sanitary sewer		
7 Number of lift stations		
0 Number of lift station failures		
0 Number of sewer pipe failures		
0 Number of basement backup occurrences		
4 Number of complaints		
1.1 Average daily flow in MGD (if available)		
1.6 Peak monthly flow in MGD (if available)		
Peak hourly flow in MGD (if available)		
3. <u>2 Performance ratios</u> for the past year:		
0.00 Lift station failures (failures/year)		
0.00 Sewer pipe failures (pipe failures/sewer mile/y	/r)	
0.00 Sanitary sewer overflows (number/sewer mile/	/yr)	
0.00 Basement backups (number/sewer mile)		
0.07 Complaints (number/sewer mile)		-
1.5 Peaking factor ratio (Peak Monthly:Annual Dail	ly Avg)	
0.0 Peaking factor ratio (Peak Hourly:Annual Daily	/ Avg)	
4. Overflows		
LIST OF SANITARY SEWER (SSO) AND TREATMENT FACILITY (TFO	) OVERFLOWS REPOR	TED **
Date Location		stimated Volume
None reported		
** If there were any SSOs or TFOs that are not listed above, please on this section until corrected.	contact the DNR and s	top work
5. Infiltration / Inflow (I/I)		
5.1 Was infiltration/inflow (I/I) significant in your community last year	ear?	
o Yes ● No		
If Yes, please describe:		
5.2 Has infiltration/inflow and resultant high flows affected performa your collection system, lift stations, or treatment plant at any time in		ms in
o Yes	i and publi your:	
• No		
Yes, please describe:		

Tomah Wastewater	Treatment Facility
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Last Updated: Reporting For:

5/9/2023 2022

5.3 Explain any infiltration/inflow (I/I) changes this year from previous years:

None

5.4 What is being done to address infiltration/inflow in your collection system?

Replace old sewers and putting in sump lines.

Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	А

Tomah Wastewater Treatment Facility	Last Updated:	Reporting For:
	5/9/2023	2022

#### **Grading Summary**

WPDES No: 0021318

SECTIONS	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Influent	A	4	3	12
BOD/CBOD	A	4	10	40
TSS	A	4	5	20
Ammonia	A	4	5	20
Phosphorus	A	4	3	12
Biosolids	A	4	5	20
Staffing/PM	A	4	1	4
OpCert	A	4	1	4
Financial	A	4	1	4
Collection	A	4	3	12
TOTALS			37	148
GRADE POINT AVERAGE (GPA) = 4.00				

Notes:

A = Voluntary Range (Response Optional)

B = Voluntary Range (Response Optional)

C = Recommendation Range (Response Required)

D = Action Range (Response Required)

F = Action Range (Response Required)

Tomah Wastewater	Treatment	Facility
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Last Updated:	Reporting For:
5/9/2023	2022

Name of Governing	
Body or Owner:	
City o	f Tomah Wastewater
Date of Resolution or	
Action Taken:	
Resolution Number:	
Date of Submittal:	
	ERNING BODY OR OWNER RELATING TO SPECIFIC CMAR
Influent Flow and Loadings: Grade =	r B. Required for grade C, D, or F):
	Λ
Effluent Quality: BOD: Grade = A	
Effluent Quality: TSS: Grade = A	
Effluent Quality: Ammonia: Grade =	A
Effluent Quality: Phosphorus: Grade	- A
Endent Quanty: Phosphorus. Grade	- A
Biosolids Quality and Management: C	irade = A
Staffing: Grade = A	
Operator Certification: Grade = A	
Financial Management: Grade = A	
Thancial Management. Grade – A	
Collection Systems: Grade = A	
(Regardless of grade, response requi	red for Collection Systems if SSOs were reported)
ACTIONS SET FORTH BY THE GOV	ENING BODY OR OWNER RELATING TO THE OVERALL
GRADE POINT AVERAGE AND ANY	
(Optional for G.P.A. greater than or ed	qual to 3.00, required for G.P.A. less than 3.00)
G.P.A. = 4.00	·