Connecticut Department of
ENERGY &
ENVIRONMENTAL
PROTECTION

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NPDES PERMIT MINOR MODIFICATION

issued to

Permittee:
Town of Putnam
126 Church Street
Putnam, Connecticut 06260

Location Address:
Town of Putnam WPCA
124 Quinebaug Avenue
Putnam, Connecticut 06260

Facility ID: 116-001 **Permit ID:** CT0100960

Permit Expires: May 9, 2017

Receiving Stream: Quinebaug River

Design Flow Rate: 2.91MGD

This permit modification is issued in accordance with section 22a-430 of Chapter 446k, Connecticut General Statutes ("CGS"), section 22a-430-4(p)(5) of the Regulations of Connecticut State Agencies ("RCSA") adopted thereunder, as amended, and Section 402(b) of the Clean Water Act, as amended 33 USC 1251, et. seq., and pursuant to an approval dated September 26, 1973, by the Administrator of the United States Environmental Protection Agency for the State of Connecticut to administer a N.P.D.E.S. permit program.

Town of Putnam, shall comply with all conditions of Permit No. CT0100960 issued on May 5, 2012 with the following modification:

Sampling and reporting of chlorine residual and fecal coliform is no longer required. The Permittee shall report U.V. intensity on both the MOR and DMR. Monthly monitoring for Total Phosphorus is included from November 1st through March 31st. A copy of Table A including the changes is attached.

The Commissioner reserves the right to make appropriate revisions to the permit in order to establish any appropriate effluent limitations, schedules of compliance, or other provisions which may be authorized under the Clean Water Act or the Connecticut General Statutes or regulations adopted thereunder, as amended. The permit as modified or renewed under this paragraph may also contain any other requirements of the Clean Water Act or Connecticut General Statutes or regulations adopted thereunder which are then applicable.

All other terms and conditions of Permit No. CT0100960 issued on May 5, 2012 shall continue in full force and effect.

This modification is hereby issued on the December 5, 2012

Betsey Wingfield
Bureau Chief
Bureau of Water Protection and Land Reuse

BW/jdh
Sent RRR
cc: Stan Daniels, Putnam WPCF

TABLE A

Discharge Serial Number (DSN): **001-1**	Monitoring Location: **1**
Wastewater Description: **Sanitary Sewage**	
Monitoring Location Description: **Final Effluent**	
Allocated Zone of Influence (ZOI): **44.7 cfs**	In-stream Waste Concentration (IWC): **9.2 %**

PARAMETER	Units	FLOW/TIME BASED MONITORING				INSTANTANEOUS MONITORING			REPORT FORM	Minimum Level Analysis See Section 6
		Average Monthly Limit	Maximum Daily Limit	Sample Freq.	Sample type	Instantaneous Limit or Required Range[2]	Sample Freq.	Sample Type		
Alkalinity	mg/l	NA	NA	NR	NA	------	Monthly	Grab	MOR	
Biochemical Oxygen Demand (5 day), See remark C	mg/l	30	50	3/week	Daily Composite	NA	NR	NA	DMR/MOR	
Escherichia coli May 1st through September 30th	Colonies per100 ml	NA	576	NR	NA	see remarks (A) and (B) below	3/week	Grab	DMR/MOR	
Flow, Average Daily [1]	MGD	------	------	Continuous[2]	Daily flow	NA	NR	NA	DMR/MOR	
Nitrogen, Nitrate (total as N)	mg/l	NA	------	Monthly	Daily Composite	NA	NR	NA	MOR	
Nitrogen, Nitrite (total as N)	mg/l	NA	------	Monthly	Daily Composite	NA	NR	NA	MOR	
Nitrogen, Total Kjeldahl	mg/l	NA	------	Monthly	Daily Composite	NA	NR	NA	MOR	
Nitrogen, Total	mg/l	NA	------	Monthly	Daily Composite	NA	NR	NA	MOR	
Oxygen, Dissolved	mg/l	NA	NA	NR	NA	------	Work Day	Grab	MOR	
pH	S.U.	NA	NA	NR	NA	6 - 9	Work Day	Grab	DMR/MOR	
Phosphate, Ortho	mg/l	NA	------	Monthly	Daily Composite	NA	NR	NA	MOR	
Phosphorus, Total (April 1st to October 31st) [3] (November 1st to March 31st)	mg/l	1.09 NA	2.18 ------	Weekly Monthly	Daily Composite	NA	NR	NA	DMR/MOR MOR	
Phosphorus, Total (April 1st through October 31st)	lbs/day	------	NA	Weekly	Daily Composite	NA	NA	NA	MOR	
Phosphorus, Total Average Seasonal Load Cap [4]	lbs/day	------	NA	Weekly	Daily Composite	NA	NA	NA	DMR	
Solids, Settleable	ml/l	NA	NA	NA	NA	------	Work Day	Grab	MOR	
Solids, Total Suspended, See remark C	mg/l	30	50	3/week	Daily Composite	NA	NA	NA	DMR/MOR	
Temperature	°F	NA	NA	NR	NA	------	Work Day	Grab	MOR	
Turbidity	NTU	NA	NA	NA	NA	------	Work Day	Grab	MOR	

UV Intensity May 1st through October 31st	mW/cm^2	NA	NA	NA	NA	≥6.10	4/Work Day	Grab	DMR/MOR	
UV Transmittance May 1st through October 31st	%	NA	NA	NA	NA	------	4/Work Day	Grab	MOR	

TABLE A – CONDITIONS

Footnotes:

[1] The permittee shall record and report on the monthly operating report the minimum, maximum and total flow for each day of discharge and the average daily flow for each sampling month. The permittee shall report, on the discharge monitoring report, the average daily flow and maximum daily flow for each sampling month.

[2] The instantaneous limits in this column are maximum limits except for UV Intensity which is a minimum limit.

[3] During the period beginning after the implementation of phosphorus removal but no later than 1095 days after permit issuance, lasting until expiration, the discharge shall also not exceed and shall otherwise conform to the specific terms and conditions listed.

[4] During the period beginning after the implementation of phosphorus removal but no later than 1095 days after permit issuance, lasting until expiration, the discharge shall not exceed the total phosphorus Average Seasonal Load as follows: When the total phosphorus Average Seasonal Load in the effluent exceeds the permitted Average Seasonal Load Cap of 8.41 pounds of total phosphorus/day for any two consecutive calendar years or any two of three consecutive calendar years, the permittee shall develop and submit for the review any approval of the Commissioner a plan to reduce future Total Phosphorus in the effluent. This plan shall be submitted by September 30th of the year following the requirement of the report and upon approval of the plan by the Commissioner the permittee shall implement the recommended improvement in accordance with the approval schedule.

Remarks:

(A) The geometric mean of the Escherichia coli bacteria values for the effluent samples collected in a period of seven (7) consecutive days during the period from May 1st through September 30th shall not exceed 126 per 100 milliliters.

(B) The Escherichia coli bacteria values for any single effluent sample collected during the period from May 1st through September 30th shall not exceed 576 per 100 milliliters.

(C) The Average Weekly discharge Limitation for BOD_5 and Total Suspended Solids shall be 1.5 times the Average Monthly Limit listed above.