

14-1275

CONSENT

2013 Compliance Maintenance Annual Report (CMAR)

The annual CMAR is a permit required document put together to assist municipalities and the DNR in determining the strengths and weaknesses of the sewage treatment facility, land application program, and sanitary collection system and lift stations. This mandatory report has been submitted for many years.

The effluent discharged from the WWTF in February and March did not meet the BOD requirements of the permit and points were assessed to the report. All suspended solid and phosphorus limits were met in 2013. Traditionally these cold weather months are challenging due to the effects of the low temperature on the biomass at the plant. This is not uncommon for fixed film plants in northern climates.

One bypasses of untreated sewage was documented and reported in 2013. This related to a broken pipe and sewer leak into the storm sewer. This line was televised and capped off in concrete.

There was 1 daily violation for chlorine residual.

Several points were also assessed for elevated molybdenum result in our biosolids. This concentration has been not been found in the past and has not been found in the bi monthly tests run since. The concentration is only above the threshold for "high quality" level sludge and is not above the ceiling concentration for land application.

Overall the report shows that the plant in most cases, is able to exceed effluent permit requirements at this time. As the plant ages and equipment fails or becomes obsolete we will attempt to repair or replace controls and equipment to maintain plant reliability and permit required removal efficiency. Cold weather operations remain difficult and meeting limits in the dead of winter is challenging to say the least. Planning is on going for future improvements in the plant that will allow us to maintain reliable service in the future.

The CMAR was reviewed and approved by the WWTF Board at their meeting on May 13th. The last step in the submittal process is to have a resolution number placed on it so I can e-file the report. The City Council needs to accept the report and "place on file" so I can report the resolution number on the last page of the document and validate the report. If you have any questions do not hesitate to call.

Brian

Brian Helminger
(920) 686-3551

Public Infr
6-16-14

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Influent Flow and Loading

Questions								
1.	Monthly average flows and (C)BOD loadings.							
	InFluent No.701	Influent Monthly Average Flow, MGD	X	Influent Monthly Average (C)BOD Concentration mg./l	X	8.34	=	Influent Monthly Average(C) BOD Loading, pounds/day
	January	5.610	X	349	X	8.34	=	16352
	February	5.337	X	379	X	8.34	=	16891
	March	6.784	X	325	X	8.34	=	18375
	April	10.10	X	165	X	8.34	=	13937
	May	6.592	X	281	X	8.34	=	15433
	June	6.007	X	282	X	8.34	=	14104
	July	6.410	X	293	X	8.34	=	15677
	August	5.674	X	350	X	8.34	=	16583
	September	5.044	X	420	X	8.34	=	17688
	October	5.634	X	574	X	8.34	=	26970
	November	7.203	X	399	X	8.34	=	23966
	December	5.321	X	393	X	8.34	=	17456
2.	Maximum month design flow and design (C)BOD loading.							
		Design	X	%	=	% of Design		
	Max Month Design Flow, MGD	19	x	90	=	17.1		
			x	100	=	19		
	Design (C)BOD, lbs./day	37500	x	90	=	33750		
			x	100	=	37500		

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Influent Flow and Loading (Continued)

3.	Number of times the flow and (C)BOD exceeded 90% or 100% of design, points earned, and score:																																																																																																						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 15%;">Months of Influent Flow</th> <th style="width: 15%;">Number of times flow was greater than 90% of design</th> <th style="width: 15%;">Number of times flow was greater than 100% of design</th> <th style="width: 15%;">Number of times (C)BOD was greater than 90% of design</th> <th style="width: 15%;">Number of times (C)BOD was greater than 100% of design</th> </tr> </thead> <tbody> <tr><td>January</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>February</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>March</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>April</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>May</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>June</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>July</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>August</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>September</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>October</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>November</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr><td>December</td><td>1</td><td>0</td><td>0</td><td>0</td><td>0</td></tr> <tr> <td colspan="2">Points per each exceedance</td> <td>2</td> <td>1</td> <td>3</td> <td>2</td> </tr> <tr> <td colspan="2">Exceedances</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td colspan="2">Points</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td colspan="2">Total Number of Points</td> <td colspan="3"></td> <td>0</td> </tr> </tbody> </table>		Months of Influent Flow	Number of times flow was greater than 90% of design	Number of times flow was greater than 100% of design	Number of times (C)BOD was greater than 90% of design	Number of times (C)BOD was greater 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 each exceedance		2	1	3	2	Exceedances		0	0	0	0	Points		0	0	0	0	Total Number of Points					0
	Months of Influent Flow	Number of times flow was greater than 90% of design	Number of times flow was greater than 100% of design	Number of times (C)BOD was greater than 90% of design	Number of times (C)BOD was greater than 100% of design																																																																																																		
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4.	Was the influent flow meter calibrated in the last year?																																																																																																						
	<p> <input checked="" type="radio"/> Yes Enter last calibration date, MM/DD/YYYY 06/28/2013 </p> <p> <input type="radio"/> No -explain </p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>																																																																																																						
5.	Sewer Use Ordinance																																																																																																						
	<p>5.1 Did your community have a sewer use ordinance that limited or prohibited the discharge of excessive conventional pollutants ((C)BOD, SS, or pH) or toxic substances to the sewer from industries, commercial users, hauled waste, or residences?</p> <p> <input checked="" type="radio"/> Yes </p> <p> <input type="radio"/> No </p> <p>If No, please describe:</p>																																																																																																						

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Influent Flow and Loading (Continued)

	<div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 10px;"></div> <p>5.2 Was it necessary to enforce?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p>If Yes, please describe:</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 10px;"></div>
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6.	<p>Septage Receiving</p> <p>6.1 Did you have requests to receive septage at your facility?</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 33%;">Septic Tanks</th> <th style="width: 33%;">Holding Tanks</th> <th style="width: 33%;">Grease Traps</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="radio"/> Yes <input type="radio"/> No</td> <td><input checked="" type="radio"/> Yes <input type="radio"/> No</td> <td><input checked="" type="radio"/> Yes <input type="radio"/> No</td> </tr> </tbody> </table> <p>6.2 Did you receive septage at your facility? If yes, indicate volume in gallons</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 33%;">Septic Tanks</th> <th style="width: 33%;">Holding Tanks</th> <th style="width: 33%;">Grease Traps</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="radio"/> Yes <input type="radio"/> No</td> <td><input checked="" type="radio"/> Yes <input type="radio"/> No</td> <td><input type="radio"/> Yes <input checked="" type="radio"/> No</td> </tr> <tr> <td>1,934,600 gal</td> <td>2,110,000 gal</td> <td>0 gal</td> </tr> </tbody> </table> <p>6.2.1 If yes to any of the above, please explain if plant performance is affected when receiving any of these wastes</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>The WWTF is operating well under hydraulic and organic design capacities. Acceptance of hauled waste is limited or eliminated during high flow events due to storms and rain.</p> </div>	Septic Tanks	Holding Tanks	Grease Traps	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	Septic Tanks	Holding Tanks	Grease Traps	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	1,934,600 gal	2,110,000 gal	0 gal
Septic Tanks	Holding Tanks	Grease Traps														
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1,934,600 gal	2,110,000 gal	0 gal														

7.	<p>Pretreatment</p> <p>7.1 Did your facility experience operational problems, permit violations, biosolids quality concerns or hazardous situations in the sewer system or treatment plant that were attributable to commercial or industrial discharges in the last year?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p>If Yes, describe the situation and your community's response:</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 10px;"></div> <p>7.2 Did your facility accept hauled industrial wastes, landfill leachate, etc?</p> <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p>If yes, describe the types of wastes received and any procedures or other restrictions that were in place to protect the plant from the discharge of hauled industrial wastes.</p>
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COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Influent Flow and Loading (Continued)

	We accept landfill leachate and high strength waste as long as the analytical data does not exceed local limits of Chapter 25 of the Municipal Code.
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Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Effluent Quality and Plant Performance ((C)BOD)

Questions							
1.	Monthly average effluent values, exceedances, and points for (C)BOD:						
	Outfall No.001	Monthly Average C(BOD) Limit (mg/L)	90% of Permit Limit >10 (mg/L)*	Effluent Monthly Average C(BOD) (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance	90% Permit Limit Exceedance
	January	30	27	17	1	0	0
	February	30	27	32	1	1	1
	March	30	27	40	1	1	1
	April	30	27	18	1	0	0
	May	30	27	21	1	0	0
	June	30	27	13	1	0	0
	July	30	27	15	1	0	0
	August	30	27	16	1	0	0
	September	30	27	17	1	0	0
	October	30	27	24	1	0	0
	November	30	27	20	1	0	0
	December	30	27	13	1	0	0
	* Equals limit if limit is <=10						
	Months of Discharge/yr				12		
	Points per each exceedance with 12 months of discharge:					7	3
	Exceedances					2	2
	Points					14	6
	Total Number of Points						20
	<p>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 $12/6 = 2.0$</p>						
2.	If any violations occurred, what action was taken to regain compliance?						
	<p>The attached growth biology becomes sluggish and effluent suffers during the winter months. We maximize recirculation and wetting rates in order to extract the best treatment possible from the facility. The permit limit was not met despite removing over 91% and 87% of influent BOD for the months of February and March.</p>						
3.	Was the effluent flow meter calibrated in the last year?						

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Effluent Quality and Plant Performance ((C)BOD) (Continued)

	<p><input type="radio"/> Yes - enter last calibration date, MM/DD/YYYY: <input style="width: 100px; height: 20px;" type="text"/></p> <p><input checked="" type="radio"/> No - explain:</p> <p style="border: 1px solid black; padding: 2px;">Meter taken out of service in 2009.</p>
4.	<p>What problems, if any, were experienced over the last year that threatened treatment?</p> <p style="border: 1px solid black; padding: 5px; margin-top: 10px;">Cold weather and low influent temperatures are constant winter season challenges at this facility.</p>
5.	<p>Other Monitoring and Limits</p> <p>5.1 At any time in the past year was there an exceedance of a permit limit for any other pollutants such as metals, pH, residual chlorine, or fecal coliform?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>If Yes, please describe:</p> <p style="border: 1px solid black; padding: 2px;">There was one daily chlorine residual violation in 2013.</p>
	<p>5.2 At any time in the past year was there an effluent acute or chronic whole effluent toxicity (WET) test?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>If Yes, please describe:</p> <p style="border: 1px solid black; padding: 2px;">All permit required WET tests were performed and retests were analyzed when necessary.</p>
	<p>5.3 If the biomonitoring (WET) test did not pass, were steps taken to identify and/or reduce source(s) of toxicity?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA</p> <p>Please explain unless not applicable:</p> <p style="border: 1px solid black; padding: 2px;">We eliminated the acceptance of a waste from a hauler that was believed to be exerting toxicity specifically to the daphnia in the toxicity testing.</p>

Total Points Generated	20
Score ((100 - Total Points Generated))	80
Section Grade	C

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Effluent Quality and Plant Performance (Total Suspended Solids)

Questions

1. Monthly average effluent values, exceedances, and points for TSS:

Outfall No.001	Monthly Average TSS Limit (mg/L)	90% of Permit Limit >10 (mg/L)*	Effluent Monthly Average TSS (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance	90% Permit Limit Exceedance
January	30	27	7	1	0	0
February	30	27	8	1	0	0
March	30	27	10	1	0	0
April	30	27	6	1	0	0
May	30	27	5	1	0	0
June	30	27	4	1	0	0
July	30	27	4	1	0	0
August	30	27	4	1	0	0
September	30	27	9	1	0	0
October	30	27	9	1	0	0
November	30	27	8	1	0	0
December	30	27	9	1	0	0

* Equals limit if limit is <=10

Months of Discharge/yr	12		
Points per each exceedance with 12 months of discharge:		7	3
Exceedances		0	0
Points		0	0
Total Number of Points			0

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 $12/6 = 2.0$

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Effluent Quality and Plant Performance (Phosphorus)

Questions					
1.	Monthly average effluent values, exceedances, and points 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	0.9	1	0
	February	1	0.8	1	0
	March	1	0.8	1	0
	April	1	0.6	1	0
	May	1	0.6	1	0
	June	1	0.6	1	0
	July	1	0.6	1	0
	August	1	0.6	1	0
	September	1	0.6	1	0
	October	1	0.6	1	0
	November	1	0.5	1	0
	December	1	0.6	1	0
	Months of Discharge/yr			12	
	Points per each exceedance with 12 months of discharge:				10
	Exceedances				0
	Total Number of Points				0
	<p>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 $12/6 = 2.0$</p>				
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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Biosolids Quality and Management

	Questions	Points						
1.	<p>Biosolids Use/Disposal:</p> <p>1.1 How did you use or dispose of your biosolids?(Check all that apply)</p> <p> <input checked="" type="checkbox"/> Land Applied Under Your Permit <input type="checkbox"/> Publicly Distributed Exceptional Quality Biosolids <input type="checkbox"/> Hauled to Another Permitted Facility <input type="checkbox"/> Landfilled <input type="checkbox"/> Incinerated <input type="checkbox"/> Other </p> <p>NOTE:If you do not remove biosolids from your system annually, please describe your system type such as lagoons, reed beds, recirculating sand filters, etc, and if biosolids were land applied last year, please also check top box above.</p> <p>1.1.1 If you checked Other, Please describe:</p> <div style="border: 1px solid black; height: 20px; width: 400px; margin-left: 20px;"></div>							
2.	<p>Land Application Site:</p> <table border="1" style="width: 100%; margin: 10px 0;"> <tr> <td colspan="2" style="text-align: center;">Last Year's Approved and Active Land Application Sites</td> </tr> <tr> <td style="width: 50%;">2.1.1 How many acres did you have?</td> <td style="width: 50%;">2.1.2 How many acres did you use?</td> </tr> <tr> <td style="text-align: center;">7290.70 acres</td> <td style="text-align: center;">397.2 acres</td> </tr> </table> <p>2.2 If you did not have enough acres for your land application needs, what action was taken?</p> <div style="border: 1px solid black; height: 20px; width: 400px; margin-left: 20px;"></div>	Last Year's Approved and Active Land Application Sites		2.1.1 How many acres did you have?	2.1.2 How many acres did you use?	7290.70 acres	397.2 acres	
Last Year's Approved and Active Land Application Sites								
2.1.1 How many acres did you have?	2.1.2 How many acres did you use?							
7290.70 acres	397.2 acres							
	<p>2.3 Did you overapply nitrogen on any of your approved land application sites you used last year?</p> <p> <input type="radio"/> Yes(30 points) <input checked="" type="radio"/> No </p>	0						
	<p>2.4 Have all the sites you used last year for land application been soil tested in the previous 4 years?</p> <p> <input checked="" type="radio"/> Yes <input type="radio"/> No (10 points) <input type="radio"/> N/A </p>	0						
3.	<p>Biosolids Metals</p> <p>Number of biosolids outfalls in your WPDES permit = 2</p> <p>3.1 For each outfall tested, verify the biosolids metal quality values for your facility during the last calendar year</p>							
BIOSOLIDS METALS CHARACTERISTICS								

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Biosolids Quality and Management (Continued)

Outfall:003 - Cake Sludge

Parameter	80% of Limit	H.Q. Limit	Ceiling Limit	mg/kg on a dry weight basis												Times Exceeded				
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	80% Value	High Quality	Ceiling		
arsenic		41	75	0		0		0		0		0		0		0		0	0	0
cadmium		39	85	0		0		0		0		0		0		0		0	0	0
copper		1500	4300	0		0		0		0		0		0		0		0	0	0
lead		300	840	0		0		0		0		0		0		0		0	0	0
mercury		17	57	0		0		0		0		0		0		0		0	0	0
molybdenum	60		75	0		0		0		0		0		0		0		0	0	0
nickel	336		420	0		0		0		0		0		0		0		0	0	0
selenium	80		100	0		0		0		0		0		0		0		0	0	0
zinc		2800	7500	0		0		0		0		0		0		0		0	0	0

Outfall:002 - Liquid Sludge

Parameter	80% of Limit	H.Q. Limit	Ceiling Limit	mg/kg on a dry weight basis												Times Exceeded				
				Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	80% Value	High Quality	Ceiling		
arsenic		41	75	4.4		7.6		28		28.6		9.4			31.6		0	0	0	0
cadmium		39	85	.59		1.1		.19		1.07		1.8			1.13		0	0	0	0
copper		1500	4300	573		646		64		668		731			677		0	0	0	0
lead		300	840	26		29		46		37.4		29			21		0	0	0	0
mercury		17	57	1.2		.89		.96		1.34		.59			9		0	0	0	0
molybdenum	60		75	16		15		21		73.8		18			6.3	1	0	0	0	0
nickel	336		420	45		49		48		56.2		61			64	0	0	0	0	0
selenium	80		100	3.7		2.8		5.4		5.6		2.4			1.8	0	0	0	0	0
zinc		2800	7500	1245		1136		133		1470		1345			1523		0	0	0	0

	<p>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 = 10</p>	10												
	<table border="1" style="margin: auto;"> <thead> <tr> <th colspan="3">Exceedance Points</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">○</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0 Points</td> </tr> <tr> <td style="text-align: center;">●</td> <td style="text-align: center;">1-2</td> <td style="text-align: center;">10 Points</td> </tr> <tr> <td style="text-align: center;">○</td> <td style="text-align: center;">> 2</td> <td style="text-align: center;">15 Points</td> </tr> </tbody> </table>	Exceedance Points			○	0	0 Points	●	1-2	10 Points	○	> 2	15 Points	
Exceedance Points														
○	0	0 Points												
●	1-2	10 Points												
○	> 2	15 Points												
	<p>3.1.2 If you exceeded the high quality limits, did you cumulatively track the metals loadings at each land application site? (check applicable box)</p>	0												
	<p>● Yes ○ No (10 points)</p>													

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Biosolids Quality and Management (Continued)

	<input type="radio"/> NA. Did not exceed limits or no HQ limit applies (0 points) <input type="radio"/> NA. 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	0																
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">Exceedance Points</th> </tr> <tr> <td style="text-align: center;"><input checked="" type="radio"/></td> <td style="text-align: center;">0</td> <td style="text-align: center;">0 Points</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;">1</td> <td style="text-align: center;">10 Points</td> </tr> <tr> <td style="text-align: center;"><input type="radio"/></td> <td style="text-align: center;">> 1</td> <td style="text-align: center;">15 Points</td> </tr> </table>	Exceedance Points			<input checked="" type="radio"/>	0	0 Points	<input type="radio"/>	1	10 Points	<input type="radio"/>	> 1	15 Points					
Exceedance Points																		
<input checked="" type="radio"/>	0	0 Points																
<input type="radio"/>	1	10 Points																
<input type="radio"/>	> 1	15 Points																
	3.1.4 Were biosolids land applied which exceeded the ceiling limit?	0																
	<input type="radio"/> Yes(20 points) <input checked="" type="radio"/> No (0 points)																	
	3.1.5 If any metal limit (high quality or ceiling) was exceeded at any time, what action was taken? Has the source of the metals been identified?																	
	<div style="border: 1px solid black; padding: 5px; width: fit-content;"> There was no molybdenum source identified and from all appearances the July molybdenum value is an anomaly. </div>																	
4.	Pathogen Control(per outfall):																	
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Outfall Number:</td> <td>002</td> </tr> <tr> <td>Biosolids Class:</td> <td>B</td> </tr> <tr> <td>Bacteria Type and Limit</td> <td>F</td> </tr> <tr> <td>Sample Dates:</td> <td>01/01/2013 12:00:00 AM - 02/28/2013 12:00:00 AM</td> </tr> <tr> <td>Density:</td> <td>621</td> </tr> <tr> <td>Sample Concentrator Amount:</td> <td>CFU/G TS</td> </tr> <tr> <td>Process:</td> <td></td> </tr> <tr> <td>Process Description:</td> <td></td> </tr> </table>	Outfall Number:	002	Biosolids Class:	B	Bacteria Type and Limit	F	Sample Dates:	01/01/2013 12:00:00 AM - 02/28/2013 12:00:00 AM	Density:	621	Sample Concentrator Amount:	CFU/G TS	Process:		Process Description:		
Outfall Number:	002																	
Biosolids Class:	B																	
Bacteria Type and Limit	F																	
Sample Dates:	01/01/2013 12:00:00 AM - 02/28/2013 12:00:00 AM																	
Density:	621																	
Sample Concentrator Amount:	CFU/G TS																	
Process:																		
Process Description:																		

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Biosolids Quality and Management (Continued)

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit	F
Sample Dates:	03/01/2013 12:00:00 AM - 04/30/2013 12:00:00 AM
Density:	2309
Sample Concentrator Amount:	CFU/G TS
Process:	
Process Description:	

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit	F
Sample Dates:	09/01/2013 12:00:00 AM - 10/31/2013 12:00:00 AM
Density:	251
Sample Concentrator Amount:	CFU/G TS
Process:	
Process Description:	

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit	F
Sample Dates:	11/01/2013 12:00:00 AM - 12/31/2013 12:00:00 AM
Density:	243
Sample Concentrator Amount:	CFU/G TS
Process:	
Process Description:	

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Biosolids Quality and Management (Continued)

	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Outfall Number:</td><td>003</td></tr> <tr><td>Biosolids Class:</td><td>B</td></tr> <tr><td>Bacteria Type and Limit</td><td>F</td></tr> <tr><td>Sample Dates:</td><td>01/01/2013 12:00:00 AM - 12/31/2013 12:00:00 AM</td></tr> <tr><td>Density:</td><td>573</td></tr> <tr><td>Sample Concentrator Amount:</td><td>CFU/G TS</td></tr> <tr><td>Process:</td><td></td></tr> <tr><td>Process Description:</td><td></td></tr> </table>	Outfall Number:	003	Biosolids Class:	B	Bacteria Type and Limit	F	Sample Dates:	01/01/2013 12:00:00 AM - 12/31/2013 12:00:00 AM	Density:	573	Sample Concentrator Amount:	CFU/G TS	Process:		Process Description:			
Outfall Number:	003																		
Biosolids Class:	B																		
Bacteria Type and Limit	F																		
Sample Dates:	01/01/2013 12:00:00 AM - 12/31/2013 12:00:00 AM																		
Density:	573																		
Sample Concentrator Amount:	CFU/G TS																		
Process:																			
Process Description:																			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Outfall Number:</td><td>003</td></tr> <tr><td>Biosolids Class:</td><td>B</td></tr> <tr><td>Bacteria Type and Limit</td><td>F</td></tr> <tr><td>Sample Dates:</td><td>05/01/2013 12:00:00 AM - 06/30/2013 12:00:00 AM</td></tr> <tr><td>Density:</td><td>275</td></tr> <tr><td>Sample Concentrator Amount:</td><td>CFU/G TS</td></tr> <tr><td>Process:</td><td></td></tr> <tr><td>Process Description:</td><td></td></tr> </table>	Outfall Number:	003	Biosolids Class:	B	Bacteria Type and Limit	F	Sample Dates:	05/01/2013 12:00:00 AM - 06/30/2013 12:00:00 AM	Density:	275	Sample Concentrator Amount:	CFU/G TS	Process:		Process Description:			
Outfall Number:	003																		
Biosolids Class:	B																		
Bacteria Type and Limit	F																		
Sample Dates:	05/01/2013 12:00:00 AM - 06/30/2013 12:00:00 AM																		
Density:	275																		
Sample Concentrator Amount:	CFU/G TS																		
Process:																			
Process Description:																			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Outfall Number:</td><td>003</td></tr> <tr><td>Biosolids Class:</td><td>B</td></tr> <tr><td>Bacteria Type and Limit</td><td>F</td></tr> <tr><td>Sample Dates:</td><td>07/01/2013 12:00:00 AM - 08/31/2013 12:00:00 AM</td></tr> <tr><td>Density:</td><td>573</td></tr> <tr><td>Sample Concentrator Amount:</td><td>CFU/G TS</td></tr> <tr><td>Process:</td><td></td></tr> <tr><td>Process Description:</td><td></td></tr> </table>	Outfall Number:	003	Biosolids Class:	B	Bacteria Type and Limit	F	Sample Dates:	07/01/2013 12:00:00 AM - 08/31/2013 12:00:00 AM	Density:	573	Sample Concentrator Amount:	CFU/G TS	Process:		Process Description:			
Outfall Number:	003																		
Biosolids Class:	B																		
Bacteria Type and Limit	F																		
Sample Dates:	07/01/2013 12:00:00 AM - 08/31/2013 12:00:00 AM																		
Density:	573																		
Sample Concentrator Amount:	CFU/G TS																		
Process:																			
Process Description:																			
	<p>4.1 If exceeded Class B limit or did not meet the process criteria at the time of land application(40 Points)</p>																		
	<p>4.1.1 Was the limit exceeded or the process criteria not met at any time?</p> <p style="margin-left: 40px;"> <input type="radio"/> Yes <input checked="" type="radio"/> No </p> <p>If yes, what action was taken?</p>																		

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Biosolids Quality and Management (Continued)

5.	Vector Attraction Reduction(per outfall):0											
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%;">Outfall Number:</td> <td>002</td> </tr> <tr> <td>Method Date:</td> <td>02/28/2013 12:00:00 AM</td> </tr> <tr> <td>Option Used To Satisfy Requirement:</td> <td>INJ</td> </tr> <tr> <td>Limit (if applicable):</td> <td></td> </tr> <tr> <td>Results (if applicable):</td> <td></td> </tr> </table>	Outfall Number:	002	Method Date:	02/28/2013 12:00:00 AM	Option Used To Satisfy Requirement:	INJ	Limit (if applicable):		Results (if applicable):		
Outfall Number:	002											
Method Date:	02/28/2013 12:00:00 AM											
Option Used To Satisfy Requirement:	INJ											
Limit (if applicable):												
Results (if applicable):												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%;">Outfall Number:</td> <td>002</td> </tr> <tr> <td>Method Date:</td> <td>04/30/2013 12:00:00 AM</td> </tr> <tr> <td>Option Used To Satisfy Requirement:</td> <td>INJ</td> </tr> <tr> <td>Limit (if applicable):</td> <td></td> </tr> <tr> <td>Results (if applicable):</td> <td></td> </tr> </table>	Outfall Number:	002	Method Date:	04/30/2013 12:00:00 AM	Option Used To Satisfy Requirement:	INJ	Limit (if applicable):		Results (if applicable):		
Outfall Number:	002											
Method Date:	04/30/2013 12:00:00 AM											
Option Used To Satisfy Requirement:	INJ											
Limit (if applicable):												
Results (if applicable):												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%;">Outfall Number:</td> <td>002</td> </tr> <tr> <td>Method Date:</td> <td>10/31/2013 12:00:00 AM</td> </tr> <tr> <td>Option Used To Satisfy Requirement:</td> <td>INJ</td> </tr> <tr> <td>Limit (if applicable):</td> <td></td> </tr> <tr> <td>Results (if applicable):</td> <td></td> </tr> </table>	Outfall Number:	002	Method Date:	10/31/2013 12:00:00 AM	Option Used To Satisfy Requirement:	INJ	Limit (if applicable):		Results (if applicable):		
Outfall Number:	002											
Method Date:	10/31/2013 12:00:00 AM											
Option Used To Satisfy Requirement:	INJ											
Limit (if applicable):												
Results (if applicable):												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%;">Outfall Number:</td> <td>002</td> </tr> <tr> <td>Method Date:</td> <td>12/31/2013 12:00:00 AM</td> </tr> <tr> <td>Option Used To Satisfy Requirement:</td> <td>INJ</td> </tr> <tr> <td>Limit (if applicable):</td> <td></td> </tr> <tr> <td>Results (if applicable):</td> <td></td> </tr> </table>	Outfall Number:	002	Method Date:	12/31/2013 12:00:00 AM	Option Used To Satisfy Requirement:	INJ	Limit (if applicable):		Results (if applicable):		
Outfall Number:	002											
Method Date:	12/31/2013 12:00:00 AM											
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Outfall Number:	003											
Method Date:	12/31/2013 12:00:00 AM											
Option Used To Satisfy Requirement:	INJ											
Limit (if applicable):												
Results (if applicable):												
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%;">Outfall Number:</td> <td>003</td> </tr> </table>	Outfall Number:	003									
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COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Biosolids Quality and Management (Continued)

	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Method Date:</td> <td>06/30/2013 12:00:00 AM</td> </tr> <tr> <td>Option Used To Satisfy Requirement:</td> <td>INJ</td> </tr> <tr> <td>Limit (if applicable):</td> <td></td> </tr> <tr> <td>Results (if applicable):</td> <td></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Outfall Number:</td> <td>003</td> </tr> <tr> <td>Method Date:</td> <td>08/31/2013 12:00:00 AM</td> </tr> <tr> <td>Option Used To Satisfy Requirement:</td> <td>INJ</td> </tr> <tr> <td>Limit (if applicable):</td> <td></td> </tr> <tr> <td>Results (if applicable):</td> <td></td> </tr> </table>	Method Date:	06/30/2013 12:00:00 AM	Option Used To Satisfy Requirement:	INJ	Limit (if applicable):		Results (if applicable):		Outfall Number:	003	Method Date:	08/31/2013 12:00:00 AM	Option Used To Satisfy Requirement:	INJ	Limit (if applicable):		Results (if applicable):			
Method Date:	06/30/2013 12:00:00 AM																				
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Method Date:	08/31/2013 12:00:00 AM																				
Option Used To Satisfy Requirement:	INJ																				
Limit (if applicable):																					
Results (if applicable):																					
	<p>5.1 If the limit or criteria was exceeded at the time of land application, 40 point</p> <p>5.1.1 Was the limit exceeded or the process criteria not met at any time?</p> <p> <input type="radio"/> Yes <input checked="" type="radio"/> No </p> <p>If yes, what action was taken?</p> <div style="border: 1px solid black; height: 20px; width: 400px; margin-top: 5px;"></div>	0																			
6.	Biosolids Storage:0																				
	<p>6.1 How many days of actual, current biosolids storage capacity did your wastewater treatment facility have either on-site or off-site?</p> <p> <input checked="" type="radio"/> >+ 180 days (0 points) <input type="radio"/> 150 - 179 days (10 points) <input type="radio"/> 120 - 149 days (20 points) <input type="radio"/> 90 - 119 days (30 points) <input type="radio"/> < 90 days (40 points) <input type="radio"/> Not Applicable (0 points) </p>	0																			
	<p>6.2 If you check Not Applicable above, explain why.</p> <div style="border: 1px solid black; height: 20px; width: 400px; margin-top: 5px;"></div>																				
7.	Issues:																				
	<p>7.1 Describe any outstanding biosolids issues with treatment, use or overall mgt?</p>																				

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Biosolids Quality and Management (Continued)

	Due to frequent rains and wet field conditions the lagoons did not get emptied in 2013.		
--	---	--	--

Total Points Generated	10
Score (100 - Total Points Generated)	90
Section Grade	B

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Staffing and Preventative Maintenance (All Treatment Plants)

	Questions	Points
1.	<p>Was your wastewater treatment plant adequately staffed last year?</p> <p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p> <p>If No, please describe:</p> <div style="border: 1px solid black; height: 20px; width: 65%; margin-bottom: 10px;"></div> <p>Could use more help/staff for:</p> <div style="border: 1px solid black; height: 20px; width: 65%;"></div>	
2.	<p>Did your wastewater staff have adequate time to properly operate and maintain the plant and fulfill all wastewater management tasks including recordkeeping?</p> <p> <input checked="" type="radio"/> Yes <input type="radio"/> No. Explain </p> <div style="border: 1px solid black; height: 20px; width: 65%; margin-top: 10px;"></div>	
3.	<p>Did your plant have a <u>documented AND implemented</u> plan for preventative maintenance on major equipment items?</p> <p> <input checked="" type="radio"/> Yes (Continue with questions below) <input type="radio"/> No (40 points and go to question 6) </p> <p>If No, explain:</p> <div style="border: 1px solid black; height: 20px; width: 65%; margin-top: 10px;"></div>	0
4.	<p>Did this preventative maintenance program depict frequency of intervals, types of lubrication, and other tasks necessary for each piece of equipment?</p> <p> <input checked="" type="radio"/> Yes <input type="radio"/> No (10 points) </p>	0
5.	<p>Were these preventative maintenance tasks, as well as major equipment repairs, recorded and filed so future maintenance problems can be assessed properly?</p> <p> <input checked="" type="radio"/> Yes <input type="radio"/> (Paper file system) <input type="radio"/> (Computer program) <input checked="" type="radio"/> (Both Paper and Computer) <input type="radio"/> No (10 points) </p>	0
6.	<p>Did your plant have a detailed O&M Manual that was used as a reference when needed?</p>	

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Staffing and Preventative Maintenance (All Treatment Plants) (Continued)

	<input checked="" type="radio"/> Yes <input type="radio"/> No	
7.	Rate the overall maintenance of your wastewater plant.	
	<input type="radio"/> Excellent <input checked="" type="radio"/> Very Good <input type="radio"/> Good <input type="radio"/> Fair <input type="radio"/> Poor	
	Describe your rating: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> All work orders and preventative maintenance is completed. A stack filter pump was removed and rebuilt, along with several VFD's that reached the end of their useful life being replaced. </div>	

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Operator Certification and Education

Questions	Points
<p>1. Did you have a designated operator-in-charge during the report year?</p> <p> <input checked="" type="radio"/> Yes (0 point) <input type="radio"/> No (20 points) </p> <p>Name: <input type="text" value="BRIAN M HELMINGER"/></p> <p>Certification No: <input type="text" value="28032"/></p>	0
<p>2. In accordance with Chapter NR 114.08 and 114.09, Wisconsin Administrative Code, what grade and subclass(es) were required for the operator-in-charge to operate the wastewater treatment plant and what grade and subclass(es) were held by the operator-in-charge?</p> <p>Required: <input type="text" value="4 - ABEFGHIJ; A - PRIMARY SETTLING; B - TRICKLING FILTER/RBC; E - DISINFECTION; F - ANAEROBIC DIGESTION; G - MECHANICAL SLUDGE; H - FILTRATION; I - PHOSPHORUS REMOVAL; J - LABORATORY"/></p> <p>Held: <input type="text" value="4 - ABCEFGHIJ; T - D; 4 - A=PRIMARY SETTLING GRADE 4; B=TRICKLING FILTER/RBC GRADE 4; C=ACTIVATED SLUDGE GRADE 4; E=DISINFECTION GRADE 4; F=ANAEROBIC DIGESTION GRADE 4; G=MECHANICAL SLUDGE GRADE 4; H=FILTRATION GRADE 4; I=PHOSPHORUS REMOVAL GRADE 4; J=LABORATORY GRADE 4; T - D=PONDS/AEREATED LAGOONS GRADE T"/></p>	
<p>3. Was the operator-in-charge certified at the appropriate level to operate this plant?</p> <p> <input checked="" type="radio"/> Yes (0 point) <input type="radio"/> No (20 points) </p>	0
<p>4. In the event of the loss of your designated operator-in-charge, did you have a contingency plan to ensure the continued proper operation & maintenance of the plant that includes one or more of the following options (check all that apply):</p> <p> 4.1 <input checked="" type="checkbox"/> one or more additional certified operators on staff 4.2 <input type="checkbox"/> an arrangement with another certified operator 4.3 <input type="checkbox"/> an arrangement with another community with a certified operator 4.4 </p>	0

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
5/13/2014

Reporting Year: 2013

Operator Certification and Education (Continued)

	<input type="checkbox"/>	an operator on staff who has an operator-in-training certificate for your plant and is expected be certified within one year	
4.5	<input type="checkbox"/>	a consultant to serve as your certified operator	
4.6	<input type="checkbox"/>	None of the above (20 points)	
Explain:		The Assistant Superintendent and Chemist are both fully certified at the Grade 4 level for this facility.	
5.	If you had a designated operator-in-charge, was the operator-in-charge earning continuing education credits at the following rates?		
	Grades T, 1, and 2: <input type="radio"/> Averaging 6 or more CEUs per year <input type="radio"/> Averaging less than 6 CEUs per year Grades 3 and 4: <input checked="" type="radio"/> Averaging 8 or more CEUs per year <input type="radio"/> Averaging less than 8 CEUs per year Not applicable: <input type="radio"/> See Question 1.		

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Financial Management

	Questions	Points						
1.	Person Providing This Financial Information <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Name:</td> <td style="border: 1px solid black; padding: 2px;">Brian Helminger</td> </tr> <tr> <td>Telephone:</td> <td style="border: 1px solid black; padding: 2px;">(920) 686-3550</td> </tr> <tr> <td>E-Mail Address(optional):</td> <td style="border: 1px solid black; padding: 2px;">bhelminger@manitowoc.org</td> </tr> </table>	Name:	Brian Helminger	Telephone:	(920) 686-3550	E-Mail Address(optional):	bhelminger@manitowoc.org	
Name:	Brian Helminger							
Telephone:	(920) 686-3550							
E-Mail Address(optional):	bhelminger@manitowoc.org							
2.	Are User Charge or other Revenues sufficient to cover O&M Expenses for your wastewater treatment plant AND/OR collection system ? <input checked="" type="radio"/> Yes (0 points) <input type="radio"/> No (40 points) If No, please explain: <div style="border: 1px solid black; height: 20px; width: 60%; margin-top: 5px;"></div>	0						
3.	When was the User Charge System or other revenue source(s) last reviewed and/or revised? Year: 2013 <input checked="" type="radio"/> 0-2 years ago (0 points) <input type="radio"/> 3 or more years ago (20 points) <input type="radio"/> Not Applicable (Private Facility)	0						
4.	Did you have a special account (e.g., CWFPP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system? <input checked="" type="radio"/> Yes <input type="radio"/> No (40 points)	0						
REPLACEMENT FUNDS(PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 5)								
5.	Equipment Replacement Funds 5.1 When was the Equipment Replacement Fund last reviewed and/or revised? Year: 2013 <input checked="" type="radio"/> 1-2 years ago (0 points) <input type="radio"/> 3 or more years ago (20 points) <input type="radio"/> Not Applicable Explain: <div style="border: 1px solid black; height: 20px; width: 60%; margin-top: 5px;"></div>	0						
	5.2 What amount is in your Replacement Fund? <p style="text-align: center;">Equipment Replacement Fund Activity</p>							
	5.2.1 Ending Balance Reported on Last Year's CMAR:	\$8542921						

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Financial Management (Continued)

	5.2.2 Adjustments if necessary (e.g., earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	+	\$409,905.00
	5.2.3 Adjusted January 1st Beginning Balance		\$8,952,826.00
	5.2.4 Additions to Fund (e.g., portion of User Fee, earned interest, etc.)	+	\$0.00
	5.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 5.2.5.1 below*)	-	\$0.00
	5.2.6 Ending Balance as of December 31st for CMAR Reporting Year		\$8,952,826.00
(All Sources: This ending balance should include all Equipment Replacement Funds whether held in a bank account(s), certificate(s) of deposit, etc.) *5.2.5.1. Indicate adjustments, equipment purchases and/or major repairs from 5.2.5 above <div style="border: 1px solid black; padding: 5px; width: fit-content;"> Fund balance as reported on the CAFER report for the year ended 2013. </div>			

	5.3 What amount should be in your replacement fund?		\$7,058,091.00
(If you had a CWFP loan, this amount was originally based on the Financial Assistance Agreement (FAA) and should be regularly updated as needed. Further calculation instructions and an example can be found by clicking the HELP option button.)			

	5.3.1 Is the Dec. 31 Ending Balance in your Replacement Fund above (#5.2.6) equal to or greater than the amount that should be in it(#5.3)?		
	<input checked="" type="radio"/> Yes <input type="radio"/> No Explain:		
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>			

6. Future Planning

	6.1 During the next ten years, will you be involved in formal planning for upgrading, rehabilitating or new construction of your treatment facility or collection system?																				
	<input checked="" type="radio"/> Yes (If yes, please provide major project information, if not already listed below) <input type="radio"/> No																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Project Description</th> <th style="width: 20%;">Estimated Cost</th> <th style="width: 20%;">Approximate Construction Year</th> </tr> </thead> <tbody> <tr> <td>Lakeside Blvd liftstation upgrade- replace liftstation and relocate the existing forcemain</td> <td style="text-align: right;">\$373536.7</td> <td style="text-align: center;">2006</td> </tr> <tr> <td>2006 Sewer relay projects</td> <td style="text-align: right;">\$413660</td> <td style="text-align: center;">2006</td> </tr> <tr> <td>Sewer relay - Holly Drive - E. Magnolia to East Cedar Ave.</td> <td></td> <td></td> </tr> <tr> <td>Sewer relay - E. Magnolia Ave - to Memorial Drive - to Holly Drive</td> <td></td> <td></td> </tr> <tr> <td>Project total 2194 ft.</td> <td></td> <td></td> </tr> </tbody> </table>				Project Description	Estimated Cost	Approximate Construction Year	Lakeside Blvd liftstation upgrade- replace liftstation and relocate the existing forcemain	\$373536.7	2006	2006 Sewer relay projects	\$413660	2006	Sewer relay - Holly Drive - E. Magnolia to East Cedar Ave.			Sewer relay - E. Magnolia Ave - to Memorial Drive - to Holly Drive			Project total 2194 ft.		
Project Description	Estimated Cost	Approximate Construction Year																			
Lakeside Blvd liftstation upgrade- replace liftstation and relocate the existing forcemain	\$373536.7	2006																			
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COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Financial Management (Continued)

North 40th and Archer liftstation/forcemain/discharge reroute - Complete replacement of existing liftstation, replacement and upsize of under river forcemain, reroute of sewage flow via forcemain and gravity line.	\$2304764.6	2009
2006 Relining of Sewers WU-06-7 Reline of sanitary sewers consisting of: 4735 LF of 8" sanitary sewer, 210 LF of 10" sanitary sewer, 1255 LF of 18" sanitary sewer, and 1262 LF of 20" sanitary sewer.	\$295897	2006
2007 Relining of Sewers WU-07-7 Reline of sanitary sewers consisting of 3551 LF of 8" sanitary sewer and 1706 LF of 10" sanitary sewer.	\$118135	2007
2007 Sewer Relay projects - South 18th Street from Grand Ave to Dewey Street, Rankin from N 18th Street to North 21st, and North 11th from Waldo Blvd to School Street	\$244754	2007
WWTF SCADA upgrade - replacement computers and update of control software. Custom programming and addition of historical trending.	\$25573	2007
Replacement WWTF Utility/Plow truck	\$24349	2007
Chlorination system improvements - vacuum chlorine withdrawl manifold added and replacement gas leak detection equipment	\$6361	2007
Tertiary Filter Improvements - removal and disposal of existing media, remove and clean air scour laterals, repair and anchor air scour piping, replace main air supply connections, install new filtration media	\$172250	2008
South 35th & Meadow Lane Reroute of the 40th and Archer liftstation discharge flow. Installation of 1649 feet of 16 inch PVC forcemain and 1876 feet of 18 inch PVC sewer pipe with manholes and steel casing for rail road crossing.	\$229283	2008
2008 Sanitary Sewer Relay Project - Madison St to South 10th Street, South 8th Street to Madison Street Abandon existing and install a total of 1830 feet of 6" sanitary building sewer, 173 feet of 8" sanitary sewer, 90 feet of 10" sanitary sewer, and 833 feet of 15" sanitary sewer pipe.	\$84131.52	2008
2008 New and Relay Sanitary Sewer Wisconsin Ave, Hecker Road, and South 6th and Jay street projects Abandon and replace various sewers, replace manholes and casting and covers	\$77914.68	2008
2008 Re-lining of Sanitary Sewers Reline of 3079 feet of 8" sanitary sewer, 1554 feet of 12" sanitary sewer, and 2126 feet of 15" sanitary sewer	\$222302.25	2008
Replacement of Wastewater Utility passenger vehicle	\$17267	2009
2009 Relining sanitary sewers - Furnish and install 1234 feet CIPP 8" sewer, 3144 feet CIPP 10" sewer, and 279 feet of CIPP 12" sewer	\$124303	2009
South 10th Street Sanitary Sewer Relay - Remove, Supply, Install, Relay of 2658 feet 8" sewer, 1063 feet 10" sewer, 293 feet of 15" sewer and 45 feet of 18" sewer.	\$395787.81	2009
2009 New & Relay Sanitary Sewers - Reed Avenue - E. Crescent Drive - MacAurthur Drive - E. Linden Avenue - Arden Lane - S. 15th Street	\$285715.57	2009

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Financial Management (Continued)

	Step Screens and Washer Compactors - removal of existing coarse bar screens(2) and replacement with Vulcan 1/8" fine step screens(2) each mated with Vulcan screenings washer/compactors	\$678715	2010
	2010 Relining Sanitary Sewers - furnish and install CIPP for 4359 feet of 8" sanitary sewer and 2090 feet of 10" sanitary sewer	\$155456.5	2010
	2010 Relay Sanitary Sewers - Macarther Drive, Iris Drive, E. Linden Avenue - Remove, replace, and restore 1556 feet of 8" sanitary sewer line	\$409346.4	2010
	Sanitary sewer capacity study	\$128200	2010
	2011 Relining of Sanitary Sewers - Furnish and install CIPP for 5028 feet of 8 inch lines, 921 feet of 10 inch sewer, 1398 feet of 15 inch sewer, and 622 feet of 20 inch sewer lines.	\$238180	2011
	2012 Relining of Sanitary Sewers - Furnish and install CIPP for 2077 feet of 8 inch lines, 961 feet of 10 inch sewer, 696 feet of 12 inch sewer, 870 feet of 15 inch sewer. Includes mobilization, traffic control, and lateral reinstatement.	\$138527	2012
	WWTF Operational Needs Review - Consultant to be hired to evaluate the existing facility and make recommendations for future capital projects based on current and anticipated future NPDES permit requirements. The RFP's from prospective consultants are due 7/3/12	\$54500	2012
	Hot water pipe replacement - WWTF Piping failed requiring replacement. Complete design, purchase, excavation, and replacement of supply and return underground hydronic piping from Building 800 to Building 100 and Building 930.	\$196777	2011
	Remove leaking existing membrane roof and insulation and replace with new insulation and built up asphaltic roofing system on the mid level roof of building 500 - Stack Filter building.	\$57000	2013
	2013 Relining of Sanitary Sewers - Furnish and install CIPP for 3324 feet of 8 inch lines, 101 feet of 10 inch lines, 1674 feet of 12 inch lines, 396 feet of 15 inch lines, and 722 feet of 21 inch sewer lines. Includes mobilization, traffic control, and lateral reinstatement.	\$242742	2013
	2013 Sanitary Sewer Construction Furnish and relay 737 ft of 8" sewer, 53 ft of 10" sewer, 24 ft of 12" sewer and 31 ft of 15" sewer.	\$146365.87	2013
	2014 Relining of Sanitary Sewers - Furnish and install CIPP for 9086 feet of 8 inch, 867 feet of 10 inch, 365 feet of 12 inch, to include mobilization, traffic control, and lateral reinstatement.	\$284,057.00	2014
7.	Financial Management General Comments:		
	Planning for a WWTF upgrade with design work to start second half 2015 and completion by mid 2018.		

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Financial Management (Continued)

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Financial Management (Continued)

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Sanitary Sewer Collection Systems

	Questions	Points
1.	Do you have a Capacity, Management, Operation & Maintenance (CMOM) requirement in your WPDES permit? <input type="radio"/> Yes <input checked="" type="radio"/> No	
2.	Did you have a <u>documented</u> (written records/files, computer files, video tapes, etc.) sanitary sewer collection system operation & maintenance or CMOM program last calendar year? <input checked="" type="radio"/> Yes (go to question 3) <input type="radio"/> No (30 points) (go to question 4)	0
3.	Check the elements listed below that are included in your Operation and Maintenance (O&M) or CMOM program.: <input type="checkbox"/> Goals: Describe the specific goals you have for your collection system: <input checked="" type="checkbox"/> Organization: Do you have the following written organizational elements (check only those that you have): <input checked="" type="checkbox"/> Ownership and governing body description <input checked="" type="checkbox"/> Organizational chart <input checked="" type="checkbox"/> Personnel and position descriptions <input type="checkbox"/> Internal communication procedures <input type="checkbox"/> Public information and education program <input checked="" type="checkbox"/> Legal Authority: Do you have the legal authority for the following (check only those that apply): <input checked="" type="checkbox"/> Sewer use ordinance Last Revised MM/DD/YYYY 01/20/2014 <input checked="" type="checkbox"/> Pretreatment/Industrial control Programs <input type="checkbox"/> Fat, Oil and Grease control <input checked="" type="checkbox"/> Illicit discharges (commercial, industrial) <input checked="" type="checkbox"/> Private property clear water (sump pumps, roof or foundation drains, etc) <input type="checkbox"/> Private lateral inspections/repairs <input type="checkbox"/> Service and management agreements <input type="checkbox"/> Maintenance Activities: details in Question 4 <input checked="" type="checkbox"/> Design and Performance Provisions: How do you ensure that your sewer system is designed and constructed properly? <input checked="" type="checkbox"/> State plumbing code <input checked="" type="checkbox"/> DNR NR 110 standards <input checked="" type="checkbox"/> Local municipal code requirements <input checked="" type="checkbox"/> Construction, inspection and testing <input checked="" type="checkbox"/> Others: <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Wisconsin Sewer and Water Standard Specifications</div>	

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Sanitary Sewer Collection Systems (Continued)

	<input type="checkbox"/> Overflow Emergency Response Plan: Does your emergency response capability include (check only those that you have): <ul style="list-style-type: none"> <input type="checkbox"/> Alarm system and routine testing <input type="checkbox"/> Emergency equipment <input type="checkbox"/> Emergency procedures <input type="checkbox"/> Communications/Notifications (DNR, Internal, Public, Media etc) <input checked="" type="checkbox"/> Capacity Assurance: How well do you know your sewer system? Do you have the following? <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Current and up-to-date sewer map <input type="checkbox"/> Sewer system plans and specifications <input checked="" type="checkbox"/> Manhole location map <input type="checkbox"/> Lift station pump and wet well capacity information <input checked="" type="checkbox"/> Lift station O&M manuals Within your sewer system have you identified the following? <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Areas with flat sewers <input checked="" type="checkbox"/> Areas with surcharging <input checked="" type="checkbox"/> Areas with bottlenecks or constrictions <input type="checkbox"/> Areas with chronic basement backups or SSO's <input checked="" type="checkbox"/> Areas with excess debris, solids or grease accumulation <input type="checkbox"/> Areas with heavy root growth <input type="checkbox"/> Areas with excessive infiltration/inflow (I/I) <input type="checkbox"/> Sewers with severe defects that affect flow capacity <input checked="" type="checkbox"/> Adequacy of capacity for new connections <input type="checkbox"/> Lift station capacity and/or pumping problems <input type="checkbox"/> Annual Self-Auditing of your O&M/CMOM Program to ensure above components are being implemented, evaluated, and re-prioritized as needed. <input type="checkbox"/> Special Studies Last Year (check only if applicable): <ul style="list-style-type: none"> <input type="checkbox"/> Infiltration/Inflow (I/I) Analysis <input type="checkbox"/> Sewer System Evaluation Survey (SSES) <input type="checkbox"/> Sewer Evaluation and Capacity Management Plan (SECAP) <input type="checkbox"/> Lift Station Evaluation Report <input type="checkbox"/> Others: 	
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4. Did your sanitary sewer collection system maintenance program include the following maintenance activities? Complete all that apply and indicate the amount maintained:

Cleaning	100	% of system/year
Root Removal	5	% of system/year
Flow Monitoring	0	% of system/year
Smoke Testing	0	% of system/year
Sewer Line Televising	7.5	% of system/year
Manhole Inspections	100	% of system/year

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Sanitary Sewer Collection Systems (Continued)

Lift Station O&M	<input type="text" value="14"/>	# per L.S./year
Manhole Rehabilitation	<input type="text" value="1"/>	% of manholes rehabed
Mainline Rehabilitation	<input type="text" value="1"/>	% of sewer lines rehabed
Private Sewer Inspections	<input type="text" value="0"/>	% of system/year
Private Sewer I/I Removal	<input type="text" value="0"/>	% of private services
Please include additional comments about your sanitary sewer collection system below:		
The 100% value reported above for cleaning applies to sewer pipes 12 inches in diameter and smaller. there 58 emergency sewer calls in 2013 which 49 ended up being blocked laterals and 9 were for blocked main lines. The manhole inspections are done in conjunction with sewer jetting operations.		

5. Provide the following collection system and flow information for the past year:

<input type="text" value="32.18"/>	Total Actual Amount of Precipitation Last Year
<input type="text" value="30.5"/>	Annual Average Precipitation (for your location)
<input type="text" value="189.75"/>	Miles of Sanitary Sewer
<input type="text" value="14"/>	Number of Lift Stations
<input type="text" value="0"/>	Number of Lift Station Failure
<input type="text" value="9"/>	Number of Sewer Pipe Failures
<input type="text" value="9"/>	Number of Basement Backup Occurrences
<input type="text" value="58"/>	Number of Complaints
<input type="text" value="6.309"/>	Average Daily Flow in MGD
<input type="text" value="10.102"/>	Peak Monthly Flow in MGD(if available)
<input type="text"/>	Peak Hourly Flow in MGD(if available)

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Sanitary Sewer Collection Systems (Continued)

LIST OF SANITARY SEWER OVERFLOWS (SSO) REPORTED				
	Date	Location	Cause	Estimated Volume (MG)
1.	08/29/2013 12:00:00 AM to 09/13/2013 12:00:00 AM	Stormwater outfall on South Water Street	Broken Sewer, Broken Sewer	0.17
<p>** If there were any SSO's that are not listed above, please contact the DNR and stop work on this section until corrected.</p> <p>What actions were taken, or are underway, to reduce or eliminate SSO occurrences in the future?</p> <div style="border: 1px solid black; padding: 5px;"> The sewer line that leaked was no longer active and was capped off and concreted shut the same day it was televised and verified. </div>				
PERFORMANCE INDICATORS				
0.00	Lift Station Failures(failures/ps/year)			
0.05	Sewer Pipe Failures(pipe failures/sewer mile/yr)			
0.01	Sanitary Sewer Overflows (number/sewer mile/yr)			
0.05	Basement Backups(number/sewer mile)			
0.31	Complaints (number/sewer mile)			
1.6	Peaking Factor Ratio (Peak Monthly:Annual Daily Average)			
0.0	Peaking Factor Ratio(Peak Hourly:Annual daily Average)			
6.	Was infiltration/inflow(I/I) significant in your community last year?			
	<input type="radio"/> Yes <input checked="" type="radio"/> No If Yes, please describe: <div style="border: 1px solid black; padding: 5px;"> I/I is present in the community but not to the extent to which it has caused overflows from the sewer system. </div>			
7.	Has infiltration/inflow and resultant high flows affected performance or created problems in your collection system, lift stations, or treatment plant at any time in the past year?			
	<input type="radio"/> Yes <input checked="" type="radio"/> No If Yes, please describe: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
8.	Explain any infiltration/inflow(I/I) changes this year from previous years?			
	<div style="border: 1px solid black; padding: 5px;"> The city has purchased 5 portable flowmeters to monitor questionable areas of the sewer system. </div>			
9.	What is being done to address infiltration/inflow in your collection system?			

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility

Last Updated:
6/11/2014

Reporting Year: 2013

Sanitary Sewer Collection Systems (Continued)

	There is an annual and consistent efforts made in televising, spot sewer repairs, root cutting, and jetting and flushing of sewers to maintain the system and minimize back ups.	
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Total Points Generated	0
Score (100 - Total Points Generated)	100
Section Grade	A

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility Last Updated: Reporting Year: 2013

WPDES No.0024601

GRADING SUMMARY				
SECTION	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Influent Loadings	A	4.0	3	12
Effluent Quality:BOD	C	2.0	10	20
Effluent Quality:TSS	A	4.0	5	20
Effluent Quality:P	A	4.0	3	12
Biosolids Mgt.	B	3.0	5	15
Prev.Maintenance.Staffing	A	4.0	1	4
Operator Certification	A	4.0	1	4
Financial Management	A	4.0	1	4
Collection Systems	A	4.0	3	12
TOTALS			32	103
GRADE POINT AVERAGE(GPA)=3.22		3.22		

Notes:

- A = Voluntary Range
- B = Voluntary Range
- C = Recommendation Range (Response Required)
- D = Action Range (Response Required)
- F = Action Range (Response Required)

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Manitowoc Wastewater Treatment Facility	Last Updated:	Reporting Year: 2013
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Resolution or Owner's Statement

NAME OF GOVERNING BODY OR OWNER	DATE OF RESOLUTION OR ACTION TAKEN
City of Manitowoc Common Council	6-16-14
RESOLUTION NUMBER	
14- 1275	
ACTIONS SET FORTH BY THE GOVERNING BODY OR OWNER RELATING TO SPECIFIC CMAR SECTIONS (Optional for grade A or B. Required for grade C, D, or F. Regardless of grade, required for Collection Systems if SSO's were reported):	
Influent Flow and Loadings: Grade=A	
Effluent Quality: BOD: Grade=C	
Effluent quality and the biomass on the fixed film process is greatly effected by cold weather and low influent temperatures. The same is true of any fixed film process in a northern climate.	
Effluent Quality: TSS: Grade=A	
Effluent Quality: Phosphorus: Grade=A	
Biosolids Quality and Management: Grade=B	
Staffing: Grade=A	
Operator Certification: Grade=A	
Financial Management: Grade=A	
Collection Systems: Grade=A	
ACTIONS SET FORTH BY THE GOVERNING BODY OR OWNER RELATING TO THE OVERALL GRADE POINT AVERAGE AND ANY GENERAL COMMENTS (Optional for G.P.A. greater than or equal to 3.00, required for G.P.A. less than 3.00) G.P.A. = 3.22	