Sheboygan Wastewater Treatment Plant

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Influent Flow and Loading

1. Monthly Average Flows and BOD Loadings

1.1 Verify the following monthly flows and BOD loadings to your facility.

Influent No. 701	Influent Monthly Average Flow, MGD	x	Influent Monthly Average BOD Concentration mg/L	х	8.34	=	Influent Monthly Average BOD Loading, lbs/day
January	9.3492	Х	178	х	8.34	=	13,870
February	10.8328	Х	153	Х	8.34	=	13,806
March	18.2868	Х	84	Х	8.34	11	12,769
April	14.8130	Х	114	Х	8.34	=	14,114
May	11.1612	х	154	Х	8.34	=	14,325
June	9.3563	Х	191	Х	8.34	=	14,932
July	8.9662	Х	191	Х	8.34	=	14,278
August	9.8261	х	180	Х	8.34	=	14,728
September	8.4818	Х	208	х	8.34	=	14,705
October	9.4929	х	181	Х	8.34	=	14,330
November	9.1485	Х	184	х	8.34	=	14,034
December	9.0084	х	185	х	8.34	=	13,890

2. Maximum Monthly Design Flow and Design BOD Loading

2.1 Verify the design flow and loading for your facility.

Design	Design Factor	Х	%	=	% of Design
Max Month Design Flow, MGD	25.2	х	90	=	22.68
		Х	100	=	25.2
Design BOD, lbs/day	27940	Х	90	=	25146
,		Х	100	=	27940

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

			Number of times flow was greater	BOD was greater	Number of times 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	Ö	0		
Points per ea	ach	2	1	3	2		
Exceedances	nces 0		0	0	0		
Points		0	0 0 0		0		
Total Numb	Total Number of Points 0						

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3. Flow Meter		
3.1 Was the influent flow meter calibrated in the last year?		
Yes		
2023-08-01		
O No		
If No, please explain:		
4. Sewer Use Ordinance		
4.1 Did your community have a sewer use ordinance that limited or prohi		f
excessive conventional pollutants ((C)BOD, SS, or pH) or toxic substance	s to the sewer from	
industries, commercial users, hauled waste, or residences? • Yes		
o No		
If No, please explain:		
4.2 Was it necessary to enforce the ordinance? O Yes		
• No		
If Yes, please explain:		
Triby product explains		
5. Septage Receiving		
5.1 Did you have requests to receive septage at your facility?		
Septic Tanks Holding Tanks Grease Traps		
◆ Yes		
o No o No • No		
5.2 Did you receive septage at your facility? If yes, indicate volume in ga	llons.	
Septic Tanks ● Yes 140.917 gallons		
1,0,01,		
O No		
Holding Tanks ● Yes 6,211,888 gallons		
5		
O No		
Grease Traps O Yes gallons		
• No		
5.2.1 If yes to any of the above, please explain if plant performance is a	affected when receivin	na
any of these wastes.	micocca which receives	'9
Plant performance was unaffected as a result of receiving these wastes		
6. Pretreatment	siocolide quality conce	arne
6.1 Did your facility experience operational problems, permit violations, to or hazardous situations in the sewer system or treatment plant that were		:1115,
commercial or industrial discharges in the last year?		
o Yes		
● No		
If yes, describe the situation and your community's response.		
N/A		
6.2 Did your facility accept hauled industrial wastes landfill leachate, etc.	. 2	

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Yes

o No

If yes, describe the types of wastes received and any procedures or other restrictions that were in place to protect the facility from the discharge of hauled industrial wastes.

We received industrial dairy wastes and process was unaffected.

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

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0

Effluent Quality and Plant Performance (BOD/CBOD)

1. Effluent (C)	ROD	Results
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1.1 Verify the following monthly average effluent values, exceedances, and points for BOD or CBOD

Outfall No. 001	Monthly Average	90% of Permit Limit	Effluent Monthly Average (mg/L)	Months of Discharge	Permit Limit Exceedance	90% Permit Limit		
	Limit (mg/L)	> 10 (mg/L)		with a Limit		Exceedance		
January	25	22.5	2	1	0	0		
February	25	22.5	2	1	0	0		
March	25	22.5	3	1	0	0		
April	25	22.5	3	1	0	0		
May	25	22.5	3	1	0	0		
June	25	22.5	4	1	0	0		
July	25	22.5	3	1	0	0		
August	25	22.5	2	1	0	0		
September	25	22.5	4	1	0	0		
October	25	22.5	2	1	0	0		
November	25	22.5	2	1	0	0		
December	25	22.5	2	1	0	0		
		* Eq	uals limit if limit is	<= 10				
Months of d	ischarge/yr			12				
Points per e	ach exceedance	•	7	3				
Exceedance	S		-		0	0		
Points	Points 0							
Total number of points 0								

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

			occurred						

N.	/ A
1.7	/ PA

2. Flow Meter Calibration

2.1 Was the effluent flow meter calibrated in the last year?

o Yes

Enter last calibration date (MM/DD/YYYY)

No.

If No, please explain:

We do not have an effluent flowmeter.

- 3. Treatment Problems
- 3.1 What problems, if any, were experienced over the last year that threatened treatment?

There were no issues with treatment during 2023.

- 4. Other Monitoring and Limits
- 4.1 At any time in the past year was there an exceedance of a permit limit for any other pollutants such as chlorides, pH, residual chlorine, fecal coliform, or metals?
- Yes
- O No

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If '	Yes.	please	explain:
------	------	--------	----------

Residual chlorine on July 2, 2023.

- 4.2 At any time in the past year was there a failure of an effluent acute or chronic whole effluent toxicity (WET) test?
- o Yes
- No

If Yes, please explain:

- 4.3 If the biomonitoring (WET) test did not pass, were steps taken to identify and/or reduce source(s) of toxicity?
- o Yes
- o No
- N/A

Please explain unless not applicable:

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

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Effluent Quality and Plant Performance (Total Suspended Solids)

1. Effluent Total Suspended Solids Results

1.1 Verify the following monthly average effluent values, exceedances, and points for TSS:

		, ,		,				
Outfall No. 001	Monthly Average Limit (mg/L)	90% of Permit Limit >10 (mg/L)	Effluent Monthly Average (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance	90% Permit Limit Exceedance		
January	30	27	4	1	0	0		
February	30	27	4	1	0	0		
March	30	27	5	1	0	0		
April	30	27	5	1	0	0		
May	30	27	4	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	4	1	0	0		
October	30	27	4	1	0	0		
November	30	27	2	1	0	0		
December	30	27	3	1	0	0		
·		* Eq	uals limit if limit is	<= 10				
Months of D	ischarge/yr			12				
Points per each exceedance with 12 months of discharge: 7								
Exceedance	S		0	0				
Points 0								
Total Num	otal Number of Points 0							
NOTE: E.		dia di company		LL LL		. 1		

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?

N/A

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

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Effluent Quality and Plant Performance (Ammonia - NH3)

1. Effluent Ammonia Results

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

Outfall No.	Monthly	Weekly	Effluent	Monthly	Effluent	Effluent	Effluent	Effluent	Weekly
001	Average	Average	Monthly	Permit	Weekly	Weekly	Weekly	Weekly	Permit
	NH3	NH3	Average	Limit	Average	Average	Average	Average	Limit
	Limit	Limit	NH3	Exceed	for Week	for Week	_	for Week	Exceed
	(mg/L)	(mg/L)	(mg/L)	ance	1	2	3	4	ance
January	23	23	1.542	0	1.371	1.4	2.529	1.143	0
February	23	23	1.636	0	.857	2.129	1.971	1.586	0
March	23	23	1.368	0	1.486	.714	1.186	1.929	0
April	23	23	.528	0	1.057	.4	.571	.149	0
May									0
June									0
July									0
August									0
September									0
October									0
November	23	23	.243	0	.08	.086	.214	.493	0
December	23	23	.819	0	.757	.641	.751	1.177	0
Points per e	ach excee	dance of I	Monthly av	erage:					10
Exceedance	Exceedances, Monthly:						0		
Points:							0		
Points per each exceedance of weekly average (when there is no monthly average):							2.5		
Exceedances, Weekly:							0		
Points:							····		0
Total Num	ber of Po	ints							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?

N/A

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

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Effluent Quality and Plant Performance (Phosphorus)

1. Effluent Phosphorus Results

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

Total Number of	Points			0
Exceedances				0
	exceedance with 1	2 months of dischar	ge:	10
Months of Discharg	je/yr		12	
December	.9	0.229	1	0
November	.9	0.227	1	0
October	.9	0.408	1	0
September	.9	0.445	1	0
August	.9	0.321	1	0
July	.9	0.428	1	0
June	.9	0.323	1	0
May	.9	0.382	1	0
April	.9	0.307	1	0
March	.9	0.324	1	0
February	.9	0.369	1	0
January	.9	0.309	1	0
	phosphorus Limit (mg/L)	Average phosphorus (mg/L)	Discharge with a Limit	Exceedance
Outfall No. 001	Monthly Average	Effluent Monthly	Months of	Permit Limit

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?

N/A

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

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Biosolids Quality and Management

1. Biosolids Use/Disposal
1.1 How did you use or dispose of your biosolids? (Check all that apply) ☐ Land applied under your permit
☑ Publicly Distributed Exceptional Quality Biosolids
☐ 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:
Biosolids are sold to an outside contractor for use as a soil conditioner.

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	- EQ	Dried	Slud	ge -	Silo						·						
Parameter	80% of Limit	H.Q. Limit	Ceiling Limit	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	80% Value	High Quality	Ceiling
Arsenic		41	75	6.8		2.7		5.8		6.9		4.6		5.1			0	0
Cadmium		39	85	.82		.57		.63		.7		.63		.56			0	0
Copper		1500	4300	370		300		330		360		310		330			0	0
Lead		300	840	22		21		21		21		19		24			0	0
Mercury		17	57	2.3		.41		.31		.42		.31		.39			0	0
Molybdenum	60		75	11		11		10		12		13		12		0		0
Nickel	336		420	23		25		20		27		25		31		0		0
Selenium	80		100	<11		<6.1		5.1		6.6		4		<2.9		0		0
Zinc		2800	7500	660		560		540		680		580		590			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 Points) • 0
- 0 1-2 (10 Points)
- \circ > 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)
- o 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)
- (10 Points) 01
- \circ > 1 (15 Points)
- 3.1.4 Were biosolids land applied which exceeded the ceiling limit?
- Yes (20 Points)
- No (0 Points)

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Has the source of the metals been i	dentified?	0
4. Pathogen Control (per outfall): 4.1 Verify the following information. under the Options header in the left-	If any information is incorrect, use the Report Issue button side menu.	
Outfall Number:	004	
Biosolids Class:	A	
Bacteria Type and Limit:	Fecal Coliform	
Sample Dates:	01/01/2023 - 02/28/2023	
Density:	1	
Sample Concentration Amount:	MPN/G TS	
Requirement Met:	Yes	
Land Applied:	Yes	
Process:	Heat Drying	
Process Description:	Biosolids dried using heat drying process	
Outfall Number:	004	
Biosolids Class:	A	
Bacteria Type and Limit:	Fecal Coliform	
Sample Dates:	03/01/2023 - 04/30/2023	
Density:	2	
Sample Concentration Amount:	MPN/G TS	
Requirement Met:	Yes	
Land Applied:	Yes	
Process:	Heat Drying	
Process Description:	Biosolids dried using heat drying process	
Outfall Number:	004	
Biosolids Class:	A	
Bacteria Type and Limit:	Fecal Coliform	
Sample Dates:	05/01/2023 - 06/30/2023	
Density:	4	
Sample Concentration Amount:	MPN/G TS	
Requirement Met:	Yes	
Land Applied:	Yes	
Process:	Heat Drying	
Process Description:	Biosolids dried using heat drying process	

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Outfall Number:	004
Biosolids Class:	A A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	07/01/2023 - 08/31/2023
Density:	3
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
Process Description.	biosonas aried using heat arying process
Outfall Number:	004
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	09/01/2023 - 10/31/2023
Density:	1
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
Outfall Number:	004
Biosolids Class:	Α
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	11/01/2023 - 12/31/2023
·	11,01,2023
Density:	1
Density: Sample Concentration Amount:	
Density:	1
Density: Sample Concentration Amount:	1 MPN/G TS
Density: Sample Concentration Amount: Requirement Met:	1 MPN/G TS Yes Yes Heat Drying
Density: Sample Concentration Amount: Requirement Met: Land Applied:	1 MPN/G TS Yes Yes
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number: Biosolids Class:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process 005 A
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number: Biosolids Class: Bacteria Type and Limit:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process 005 A Fecal Coliform
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number: Biosolids Class: Bacteria Type and Limit: Sample Dates:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process 005 A Fecal Coliform 01/01/2023 - 02/28/2023
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number: Biosolids Class: Bacteria Type and Limit: Sample Dates: Density:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process 005 A Fecal Coliform 01/01/2023 - 02/28/2023 1
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number: Biosolids Class: Bacteria Type and Limit: Sample Dates: Density: Sample Concentration Amount:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process 005 A Fecal Coliform 01/01/2023 - 02/28/2023 1 MPN/G TS
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number: Biosolids Class: Bacteria Type and Limit: Sample Dates: Density: Sample Concentration Amount: Requirement Met:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process 005 A Fecal Coliform 01/01/2023 - 02/28/2023 1 MPN/G TS Yes
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number: Biosolids Class: Bacteria Type and Limit: Sample Dates: Density: Sample Concentration Amount: Requirement Met: Land Applied:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process O05 A Fecal Coliform 01/01/2023 - 02/28/2023 1 MPN/G TS Yes Yes
Density: Sample Concentration Amount: Requirement Met: Land Applied: Process: Process Description: Outfall Number: Biosolids Class: Bacteria Type and Limit: Sample Dates: Density: Sample Concentration Amount: Requirement Met:	1 MPN/G TS Yes Yes Heat Drying Biosolids dried using heat drying process 005 A Fecal Coliform 01/01/2023 - 02/28/2023 1 MPN/G TS Yes

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Outfall Number:	005
Biosolids Class:	Α
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	01/01/2023 - 12/31/2023
Density:	2
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	01/01/2023 - 12/31/2023
Density:	1
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	01/01/2023 - 12/31/2023
Density:	2
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	01/01/2023 - 12/31/2023
Density:	1
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process

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Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	01/01/2023 - 12/31/2023
Density:	2
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
O to U N	
Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	01/01/2023 - 12/31/2023
Density:	1
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	No
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	03/01/2023 - 04/30/2023
Density:	2
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	05/01/2023 - 06/30/2023
Density:	2
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process

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Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	07/01/2023 - 08/31/2023
Density:	2
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
6 .6	
Outfall Number:	005
Biosolids Class:	Α
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	09/01/2023 - 10/31/2023
Density:	1
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Heat Drying
Process Description:	Biosolids dried using heat drying process
Outfall Number:	005
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	11/01/2023 - 12/31/2023
Density:	11

Heat Drying Process: Biosolids dried using heat drying process Process Description: 4.2 If exceeded Class B limit or did not meet the process criteria at the time of land application. 4.2.1 Was the limit exceeded or the process criteria not met at the time of land application?

MPN/G TS

Yes

Yes

If yes, what action was taken?

Sample Concentration Amount:

Requirement Met:

• Yes (40 Points)

and Applied:

- 5. Vector Attraction Reduction (per outfall):
- 5.1 Verify the following information. If any of the information is incorrect, use the Report Issue button under the Options header in the left-side menu.

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	J/ 29/ 2024	202
Outfall Number:	004	
Method Date:	01/23/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	7
Land Applied:	Yes	
Limit (if applicable):	>90	
Results (if applicable):	96.8	
Outfall Number:	004	
Method Date:	03/27/2023	-
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	\dashv
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	>90	\dashv
Results (if applicable):	95.3	
		 -
Outfall Number:	004	
Method Date:	05/15/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	_
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	>90	
Results (if applicable):	96.8	
Outfall Number:	004	
Method Date:	07/31/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	>90	
Results (if applicable):	98.1	
Outfall Number:	004	
Method Date:	09/18/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	>90	
Results (if applicable):	98.2	

Sheboygan Wastewater Treatment Plant

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Outfall Number:	004
Method Date:	11/06/2023
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	>90
Results (if applicable):	97.2

Outfall Number:	005
Method Date:	01/23/2023
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	>90
Results (if applicable):	97.3

Outfall Number:	005
Method Date:	07/31/2023
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>90
Results (if applicable):	93.9

Outfall Number:	005
Method Date:	11/06/2023
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>90
Results (if applicable):	97.2

Outfall Number:	005
Method Date:	05/15/2023
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids
Requirement Met:	Yes
Land Applied:	No
Limit (if applicable):	>90
Results (if applicable):	98

Sheboygan Wastewater Treatment Plant

	J/ 23/ 2024	
Outfall Number:	005	
Method Date:	09/18/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	No	
Limit (if applicable):	>90	
Results (if applicable):	97.5	
Outfall Number:	005	\neg
Method Date:	03/27/2023	7
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	No	
Limit (if applicable):	>90	
Results (if applicable):	96.3	
Outfall Number:	005	
Method Date:	01/23/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	7
Land Applied:	No	
Limit (if applicable):	>90	
Results (if applicable):	97.3	
Outfall Number:	005	
Method Date:	03/27/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	>90	
Results (if applicable):	96.3	
Outfall Number:	005	\neg
Method Date:	05/15/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	>90	
Results (if applicable):	98	

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Outfall Number:	005	
Method Date:	07/31/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	>90	
Results (if applicable):	93.9	
Outfall Number:	005	
Method Date:	09/18/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	>90	
Results (if applicable):	97.5	
Outfall Number:	005	
Method Date:	11/06/2023	
Option Used To Satisfy Requirement:	Drying With Unstabilized Solids	
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):		
Ellinic (ii applicable):	>90	
	>90 97.2	
Results (if applicable): 5.2 Was the limit exceeded or the proce o Yes (40 Points) • No If yes, what action was taken?		
Results (if applicable): 5.2 Was the limit exceeded or the proce or Yes (40 Points) No If yes, what action was taken? 6. Biosolids Storage 6.1 How many days of actual, current be facility have either on-site or off-site? >= 180 days (0 Points) 150 - 179 days (10 Points) 120 - 149 days (20 Points) 90 - 119 days (30 Points) < 90 days (40 Points) N/A (0 Points)	ess criteria not met at the time of land application?	nt
Results (if applicable): 5.2 Was the limit exceeded or the proce or Yes (40 Points) No If yes, what action was taken? 6. Biosolids Storage 6.1 How many days of actual, current befacility have either on-site or off-site? >= 180 days (0 Points) 150 - 179 days (10 Points) 120 - 149 days (20 Points) 90 - 119 days (30 Points) < 90 days (40 Points)	ess criteria not met at the time of land application?	
Results (if applicable): 5.2 Was the limit exceeded or the proce or Yes (40 Points) No If yes, what action was taken? 6. Biosolids Storage 6.1 How many days of actual, current befacility have either on-site or off-site? >= 180 days (0 Points) 150 - 179 days (10 Points) 120 - 149 days (20 Points) 90 - 119 days (30 Points) > 90 days (40 Points) N/A (0 Points) N/A (0 Points) 1. Issues	ess criteria not met at the time of land application?	

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

Sheboygan Wastewater Treatment Plant

_ast Updated: 5/29/2024

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Staffing and Preventative Maintenance (All Treatment Plants)

1. Plant Staffing 1.1 Was your wastewater treatment plant adequately staffed last year? ◆ Yes ◆ No If No, please explain: Could use more help/staff for: 1.2 Did your wastewater staff have adequate time to properly operate and maintain the plant and fulfill all wastewater management tasks including recordkeeping? ◆ Yes ◆ No	
If No, please explain:	
 2. Preventative Maintenance 2.1 Did your plant have a documented AND implemented plan for preventative maintenance on major equipment items? Yes (Continue with question 2) □□ No (40 points)□□ If No, please explain, then go to question 3: 2.2 Did this preventative maintenance program depict frequency of intervals, types of lubrication, and other tasks necessary for each piece of equipment? Yes No (10 points) 2.3 Were these preventative maintenance tasks, as well as major equipment repairs, recorded and filed so future maintenance problems can be assessed properly? Yes Paper file system Computer system Both paper and computer system No (10 points) 	0
 3. O&M Manual 3.1 Does your plant have a detailed O&M and Manufacturer Equipment Manuals that can be used as a reference when needed? Yes No 	
 4. Overall Maintenance /Repairs 4.1 Rate the overall maintenance of your wastewater plant. Excellent Very good Good Fair Poor Describe your rating: While the Plant is over 40 years old, it is well-maintained and operates well. 	

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Score (100 - Total Points Generated)	
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Operator Certification and Education

- 1. Operator-In-Charge
- 1.1 Did you have a designated operator-in-charge during the report year?
- Yes (0 points)
- o No (20 points)

Name:

0

TYLER J HOFFMANN

Certification No:

36909

- 2. Certification Requirements
- 2.1 In accordance with Chapter NR 114.56 and 114.57, Wisconsin Administrative Code, what level and subclass(es) were required for the operator-in-charge (OIC) to operate the wastewater treatment plant and what level and subclass(es) were held by the operator-in-charge?

Sub	SubClass Description	WWTP	OIC		
Class	Γ	Advanced	OIT	Basic	Advanced
A1 \	Suspended Growth Processes	X			X
A2	Attached Growth Processes		Х		
A3	Recirculating Media Filters				
A4	Ponds, Lagoons and Natural				
A5	Anaerobic Treatment Of Liquid		Х		
В	Solids Separation	X			X
С	Biological Solids/Sludges	X			X
P	Total Phosphorus	Х			X
N	Total Nitrogen		Х		
D	Disinfection	X			X
L	Laboratory	Х			Х
U	Unique Treatment Systems				
SS	Sanitary Sewage Collection	Χ	NA	Х	NA

- 2.2 Was the operator-in-charge certified at the appropriate level and subclass(es) to operate this plant? (Note: Certification in subclass SS is required 5 years after permit reissuance.)
- Yes (0 points)
- No (20 points)
- 2.3 For wastewater treatment facilities with a registered or certified laboratory, is at least one operator that works in the laboratory certified at the basic level in the laboratory (L) subclass?
- Yes
- N/A Wastewater treatment facility does not have a registered or certified laboratory
- 2.4 For wastewater treatment facilities that own and operate a sanitary sewage collection system, has at least one operator been designated the OIC for sanitary sewage collection system and certified at the basic level in the sanitary sewage collection system (SS) subclass?
- Yes
- o No
- N/A Owner of the Wastewater treatment facility does not own and operate a sanitary sewage collection system
- 3. Succession Planning
- 3.1 In the event of the loss of your designated operator-in-charge, did you have a contingency plan to ensure the continued proper operation and maintenance of the plant that includes one or more of the following options (check all that apply)?
- ☑ One or more additional certified operators on staff

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 □ An arrangement with another certified operator □ An arrangement with another community with a certified operator □ An operator on staff who has an operator-in-training certificate for you be certified within one year □ A consultant to serve as your certified operator □ None of the above (20 points) If "None of the above" is selected, please explain: 	r plant and is exp	pected to
 4. Continuing Education Credits 4.1 If you had a designated operator-in-charge, was the operator-in-charge Education Credits at the following rates? OIT and Basic Certification: O Averaging 6 or more CECs per year. O Averaging less than 6 CECs per year. Advanced Certification: Averaging 8 or more CECs per year. O Averaging less than 8 CECs per year. 	ge earning Contir	nuing

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Score (100 - Total Points Generated)	100	
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_						,	

1. Provider of Financial Infor	mation	
Name:	Validada Varianda	
	Kaitlyn Krueger	
Telephone:	920-459-3440	(XXX) XXX-XXXX
L.	920-439-3440	
E-Mail Address (optional):		
	kaitlyn.Krueger@sheboyganwi.go	ov
_		
treatment plant AND/OR col • Yes (0 points) □□ • No (40 points)	ner revenues sufficient to cover (D&M expenses for your wastewater
If No, please explain:		
	irge System or other revenue so	urce(s) last reviewed and/or revised?
Year: 2023		o
0-2 years ago (0 points)3 or more years ago (20		
O N/A (private facility)	points)LLL	
	personnt (o. g., CMED required go	are goted Depletoment Fund etc.) or
		gregated Replacement Fund, etc.) or nent for your wastewater treatment
plant and/or collection syste	:m?	
Yes (0 points)		
o No (40 points)		
	BLIC MUNICIPAL FACILITIES SHA	ALL COMPLETE QUESTION 3]
3. Equipment Replacement F		and and/or revised?
Year:	nt Replacement Fund last review	ed and/or revised?
2023		
• 1-2 years ago (0 points)[, ⊐□	
o 3 or more years ago (20		
o N/A		
If N/A, please explain:		
3.2 Equipment Replacemen	t Fund Activity	
	ported on Last Year's CMAR	\$ 1,975,199.60
3.2.2 Adjustments - if nece	•	\$ 0.00
audit correction, withdrawal making up previous shortfal	of excess funds, increase	Ţ <u> </u>
3.2.3 Adjusted January 1st		\$ 1,975,199.60
3.2.4 Additions to Fund (e.g		
earned interest, etc.)		+ \$ 200,482.00

Sheboygan Wastewater Treatment Plant

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3.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 3.2.6.1 below*)

411,122.00

3.2.6 Ending Balance as of December 31st for CMAR Reporting Year

1,764,559.60

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 from 3.2.5 above.

In April 2023, one of our three aeration blowers was destroyed by fire, for which we received a \$200,482 insurance payment. One of the two remaining blowers was nearing the end of its expected life, and the other was performing inconsistently. Our City Council adopted an emergency resolution to purchase two APG Neuros turbo blowers to bring us into compliance with the aeration capacity required by our DNR permit. As an unbudgeted purchase, the equipment and engineering were taken from the emergency replacement fund,

3.3 What amount should be in your Replacement Fund?

1,957,842,32

Please note: 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 SectionInstructions link under Info header in the left-side menu.

- 3.3.1 Is the December 31 Ending Balance in your Replacement Fund above, (#3.2.6) equal to, or greater than the amount that should be in it (#3.3)?
- o Yes
- No

If No, please explain.

As explained above, the engineering and equipment costs in 2023 (as well as installation costs in 2024) were taken from the Equipment Replacement Fund, which will be made whole by the use of fund balance in 2024.

4. Future Planning

- 4.1 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?
- Yes If Yes, please provide major project information, if not already listed below. □□ o No

Project #	Project Description		Approximate Construction Year
	Upgrade administrative building HVAC system, including mechanical equipment, electrical service, and controls.	\$550,000	2024
2	Replace the badly corroded beams supporting a 48" influent pipe in anaerobic basins with stainless steel. Seal expansion joints and repair spalled concrete.	\$830,000	2024
	Sanitary Sewer Lining Projects. The city of Sheboygan is setting aside money annually to line sanitary sewers in conjunction with street replacement projects over the next five years. The estimated cost is the total cost of the work over the next five years.	\$5,000,000	2028
4	Replacement aeration blower.	\$375,000	2025
	Update 6th and Pershing Lift Station. The lift station will be painted and the controls and electrical will be upgraded.	\$125,000	2024
6	Paint Indiana Lift Station. The lift station cans will be cleaned and painted.	\$24,000	2024
	Bleach and Bisulfite Tank Replacement, bring ventilation and sprinkler system up to current codes, expand bisulfite containment area, replace doors and eyewash station.	\$505,000	2024

Number of Municipally Owned Pump/Lift Stations:

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8 Upgrade the Plant laboratory with new cupboards, cabinets, and fume hood, as well as new electrical, mechanical and plumbing systems.	\$575,000	2025
9 Ferric Chloride Tank Replacement	\$150,000	2025
Grit System Modifications. Baffles will be installed in the Pista grit chamber to improve both low and high flow performance.	\$125,000	2024
11 Replace heat exchangers for the anaerobic digesters.	\$400,000	2024
12 Final Effluent Pumping system replacement	\$75,000	2024
Install fine screens and conveyor in the wet well, to augment the screens already in place downstream of the raw pumps. A \$50,000 study is anticipated in 2025.	\$2,000,000	2028
14 Study old digester area for possible demolition or re-use.	\$50,000	2025
North Avenue lift station controls and PLC (programmable logic controls) upgrade	\$50,000	2025
16 Replace administrative building roof.	\$550,000	2026
17 Paint North Avenue lift station	\$100,000	2025
18 Indiana Avenue lift station isolation wet well	\$450,000	2026
19 Kentucky Avenue lift station upgrade	\$3,400,000	2027
20 Replace Influent building roof.	\$450,000	2027
Complete small storm sewer projects to reduce I/I (\$50,000 budgeted per year for the next five years).	\$250,000	2028
22 Install VFDs on Influent Pumps 2, 3, 4	\$127,500	2027
23 Replace Influent Building HVAC, remove old boilers.	\$400,000	2027
Replace Shoreline Interceptor, a 60" concrete pipe between the Kentucky Ave. pump station and the WWTP.	\$12,000,000	2025
Install Southside Interceptor, a 48" line serving a business park, interstate corridor and expansive housing development in southwest Sheboygan.	\$31,000,000	2026
Financial Management General Comments	1 00.0	
Rates have been adequate to support the plant and capital project plans. comprehensive review of fund balance and rates in this critical area.	Ehlers will cond	duct a
ENERGY EFFICIENCY AND USE		
Collection System 5.1 Energy Usage 6.1.1 Enter the monthly energy usage from the different energy sources:		
COLLECTION SYSTEM PUMPAGE: Total Power Consumed		

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	Electricity Consumed (kWh)	Natural Gas Consumed (therms)
January	65,250	295
February	56,797	449
March	100,462	379
April	73,865	258
May	57,298	32
June	53,264	1
July	43,290 ~	0
August	49,828	0
September	40,532	0
October	41,895	13
November	49,750	130
December	45,414	397
Total	677,645	1,954
Average	56,470	217

6.1.2 Comments: N/A 6.2 Energy Related Processes and Equipment 6.2.1 Indicate equipment and practices utilized at your pump/lift stations (Check all that apply): □ Comminution or Screening ☑ Flow Metering and Recording ☐ Pneumatic Pumping ☐ Self-Priming Pumps ☐ Submersible Pumps ☑ Variable Speed Drives ☐ Other: 6.2.2 Comments: N/A

6.3 Has an Energy Study been performed for your pump/lift stations? o No

Yes

Year:

2005

By Whom:

Focus on Energy

Describe and Comment:

We continue to work with Focus on Energy and the Department of Energy Better Plants Program to identify projects and improvements.

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6.4 Future Energy Related Equipment

6.4.1 What energy efficient equipment or practices do you have planned for the future for your pump/lift stations?

VFDs have been replaced at the North Ave. station. The generators at North Ave. and Kentucky Ave. receive annual contract maintenance and are in good condition. Replace controls at North Ave. Upgrade pumps and controls at Kentucky Ave. Replace pumps and controls at 6th & Pershing and Indian Meadows.

- 7. Treatment Facility
- 7.1 Energy Usage
- 7.1.1 Enter the monthly energy usage from the different energy sources:

TREATMENT PLANT: Total Power Consumed/Month

	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 '	553,500	289.83	1,910	429.97	1,287	9,914
February	538,200	303,32	1,774	386.57	1,392	17,317
March	625,500	566.89	1,103	395.84	1,580	25,281
April	642,600	444.39	1,446	423.42	1,518	19,132
May	621,000	346.00	1,795	444.08	1,398	14,274
June	693,000	280.69	2,469	447.96	1,547	9,228
July	587,700	277.95	2,114	442.62	1,328	5,210
August	589,500	304.61	1,935	456.57	1,291	7,490
September	510,300	254.45	2,006	441.15	1,157	7,926
October	551,700	294.28	1,875	444.23	1,242	5,215
November	575,100	274.46	2,095	421.02	1,366	10,729
December	370,800	279.26	1,328	430.59	861	4,083
Total	6,858,900	3,916.13		5,164.02		135,799
Average	571,575	326.34	1,821	430.34	1,331	11,317

7.1.2 Comments:			

7.2 Energy Related	Processes and	l 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
- ☑ Dissolved O2 Monitoring and Aeration Control
- ☐ Effluent Pumping
- ☑ Fine Bubble Diffusers
- ☑ Influent Pumping
- ☑ Mechanical Sludge Processing
- ✓ Nitrification

Last Updated: Reporting For: Sheboygan Wastewater Treatment Plant 5/29/2024 2023 ☐ UV Disinfection ☑ Variable Speed Drives ☑ Other: Process water system pumping. 7.2.2 Comments: 7.3 Future Energy Related Equipment 7.3.1 What energy efficient equipment or practices do you have planned for the future for your treatment facility? Two upcoming HVAC upgrades are planned to include energy-efficient VAV boxes and controls. The ability to turn down aeration blowers during low demand--and an upgrade to that system's controls--should make significant energy improvement. Replacing 3,200 aeration diffusers has shown energy savings. Installing VFDs on the three remaining raw pumps will allow them to run more efficiently. 8. Biogas Generation 8.1 Do you generate/produce biogas at your facility? o No Yes If Yes, how is the biogas used (Check all that apply): ☑ Flared Off ■ Building Heat ☑ Process Heat ☐ Generate Electricity ☐ Other: 9. Energy Efficiency Study 9.1 Has an Energy Study been performed for your treatment facility? O No Yes ☑ Entire facility Year: 2005 By Whom: Focus on Energy Describe and Comment: We are presently working with Focus on Energy and the Department of Energy Better Plants Program to identify projects and improvements. ☐ Part of the facility Year:

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By Whom: Describe and Comment:		
Total Points Generated		0

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

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Sanitary Sewer Collection Systems

1. Capacity, Management, Operation, and Maintenance (CMOM) Program 1.1 Do you have a CMOM program that is being implemented?
• Yes
o No
If No, explain:
·
1.2 Do you have a CMOM program that contains all the applicable components and items according to Wisc. Adm Code NR 210.23 (4)? ● Yes
o No (30 points)
o N/A
If No or N/A, explain:
1.3 Does your CMOM program contain the following components and items? (check the components and items that apply)
Goals [NR 210.23 (4)(a)]
Describe the major goals you had for your collection system last year:
Continue to implement a preventative maintenance program and respond to emergency overflows. Provide adequate capacity to convey wet-weather flows. Provide resources to mitigate Sanitary Sewer Overflows (SSO's).
Did you accomplish them? ● Yes ○ No If No, explain:
Does this chapter of your CMOM include:
oxtimes Organizational structure and positions (eg. organizational chart and position descriptions)
☐ Internal and external lines of communication responsibilities
☑ Person(s) responsible for reporting overflow events to the department and the public
☑ Legal Authority [NR 210.23 (4) (c)]
What is the legally binding document that regulates the use of your sewer system?
City of Sheboygan Sewer Ordinance
If you have a Sewer Use Ordinance or other similar document, when was it last reviewed and revised? (MM/DD/YYYY) 2016-12-05
Does your sewer use ordinance or other legally binding document address the following: Does your sewer use ordinance or other legally binding document address the following:
☑ New sewer and building sewer design, construction, installation, testing and inspection
☐ Rehabilitated sewer and lift station installation, testing and inspection
☑Sewage flows satellite system and large private users are monitored and controlled, as
necessary
☐ Fat, oil and grease control
■ Enforcement procedures for sewer use non-compliance
☑ Operation and Maintenance [NR 210.23 (4) (d)]
Does your operation and maintenance program and equipment include the following:
☐ Equipment and replacement part inventories
☑ Up-to-date sewer system map

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information for O&M ac A description of routing Capacity assessment p Basement back assess Regular O&M training Design and Performance What standards and procee the sewer collection syste property? State Plumbing Code,	ctivities, investigation e operation and main orogram ment and correction Provisions [NR 210.2 edures are established m, including building	tenance activities (see question 2 below)	
□ Construction, Inspection □ Others:	on, and resting		
☐ Overflow Emergency Res	sponse Plan [NR 210.	23 (4) (f)]□□	
Does your emergency res	ponse capability inclu	de:)
☒ Responsible personnel ☒ Response order, timing	•	edures	
☑ Public notification prot	-		
☑ Training			
	•		
☐ Special Studies Last Yea	-	- · · · · · ·	
☐ Infiltration/Inflow (I/I)	•		
☐ Sewer System Evaluat☐ Sewer Evaluation and		Plan (SECAD)	
☐ Lift Station Evaluation		Fidil (SLCAF)	
☐ Others:	•		
2. Operation and Maintenan	ce		
2.1 Did your sanitary sewe	r collection system m	aintenance program include the following	
maintenance activities? Con Cleaning	npiete all that apply a	and indicate the amount maintained. % of system/year	
Root removal	1.55	% of system/year	
Flow monitoring	70.78	% of system/year	
Smoke testing	0	% of system/year	
Sewer line			
televising	8.52	% of system/year	
Manhole inspections	49	% of system/year	
Lift station O&M	19.6	# per L.S./year	
Manhole			
rehabilitation	1.92	% of manholes rehabbed	
Mainline rehabilitation	0.35	% of sewer lines rehabbed	
Private sewer			
inspections	0	% of system/year	

Sheboygan Wastewater Treatment Plant

			5/29/2024	2023	
Private sewer I/I					
removal	0	% of private servi	ices		
River or water					
crossings	0		gs evaluated or mair		
Please include additional	comments about your	sanitary sewer col	llection system below	<u>v:</u>	
3. Performance Indicators					
3.1 Provide the following	collection system and t al actual amount of pre				
	ar actuar amount or pre nual average precipitati	•			
	es of sanitary sewer	ion (for your locatio	лт)		ļ
	mber of lift stations				
	mber of lift stations mber of lift station failu				
	mber of sewer pipe fails				
	mber of basement back	tup occurrences			
	mber of complaints				
	erage daily flow in MGD	` ,			
	k monthly flow in MGD	•			
	k hourly flow in MGD (if available)			
3.2 Performance ratios for the past year: 0.00 Lift station failures (failures/year)					
0.03 Sewer pipe failures (pipe failures/sewer mile/yr) 0.00 Sanitary sewer overflows (number/sewer mile/yr)					
0.00 Sanitary sewer overnows (number/sewer fille/yr) 0.07 Basement backups (number/sewer mile)					
	nplaints (number/sewe	•			
	iking factor ratio (Peak	•	aily Aya)		
	iking factor ratio (Peak	•			
U.U rea	King factor ratio (reak	. Hourry Armuar Dar	iy Avg)		
4. Overflows					
LIST OF SANITARY SEW	VER (SSO) AND TREAT	MENT FACILITY (TE	O) OVERELOWS RE	PORTED **	
Date	Locatio	<u>`</u> _	Cause	Estimated	
				Volume	
	None	reported			
** If there were any SSOs	or TFOs that are not I	- listed above, pleas∈	contact the DNR ar	nd stop work	
on this section until correc	ted.				
5. Infiltration / Inflow (I/I)			_		
5.1 Was infiltration/inflow o Yes	I(I/I) significant in you	ir community last y	/ear?		
• No					
If Yes, please describe:					
5.2 Has infiltration/inflow	and resultant high flor	ws affected perform	nance or created pro	blems in	
your collection system, lift					
o Yes					

Last Updated: Reporting For:

Sheboygan Wastewater Treatment Plant

Last Updated: Reporting For:

5/29/2024

2023

Νo

If Yes, please describe:

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

We have been more intentional in sharing information with outlying communities whose wastewater is treated at our regional plant, striving to all do our part to reduce I/I.

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

We continue to line sewers as roads are repaired or pipe repairs are required. Plans to repair and protect the Lakeshore Interceptor are proceeding, and construction is expected to start in 2025.

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

Sheboygan Wastewater Treatment Plant

Last Updated: Reporting For:

5/29/2024 2023

Grading Summary

WPDES No: 0025411

SECTIONS	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Influent	Α	4	3	12
BOD/CBOD	Α	4	10	40
TSS	Α	4	5	20
Ammonia	A	4	5	20
Phosphorus	A	4	3	12
Biosolids				
Staffing/PM	Α	4	1	4
OpCert	Α	4	1	4
Financial	Α	4	1	4
Collection	A	4	3	12
TOTALS	,		32	128
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)

Compliance Maintenance Annual Report Last Updated: Reporting For: Sheboygan Wastewater Treatment Plant 5/29/2024 2023 **Resolution or Owner's Statement** Name of Governing Body or Owner: Date of Resolution or Action Taken: Resolution Number: Date of Submittal: 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): Influent Flow and Loadings: Grade = A Effluent Quality: BOD: Grade = Effluent Quality: TSS: Grade = A Effluent Quality: Ammonia: Grade = A Effluent Quality: Phosphorus: Grade = A

Biosolids Quality and Management: Grade =

Staffing: Grade = A

Operator Certification: Grade = A

Financial Management: Grade = A

Collection Systems: Grade = A

(Regardless of grade, response required for Collection Systems if SSOs were reported)

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. = 4.00