



Smart Move

CITY OF MERRILL

Water & Sewage Utility

2401 River Street • Merrill, Wisconsin • 54452
Phone: 715.536.6561 • Fax: 715.539.2668

NOTICE

RE: Water and Sewage Committee Meeting to be held **Wednesday, May 29, 2013 at 5:00** p.m. in the basement conference room of City Hall.

Voting members: Alderperson John Burgener, Alderperson Kandy Peterson, and Alderperson Rob Norton

The following items will be on the agenda:

1. Review & approval of vouchers.
2. Discussion on the possible extension of water & sewer lines on a portion of Alexander Street in order to service Precision Laser to allow for business expansion
3. Review & approval of 2012 CMAR (Compliance Maintenance Annual Report).
4. Discussion on tower work.
5. Update on progress of Biological Phosphorus Removal (BPR) pilot.
6. Operations Report.
7. Public Comment.
8. Next meeting.
9. Adjournment.

Reviewed by,

John Burgener
Committee Chairperson

The Merrill City Hall is accessible to the physically disadvantaged. If special accommodations are needed, please contact the Merrill City Hall at 536-6561.

An equal opportunity/affirmative action employer.

ACCOUNT: 04969 UTILITY MAY 2013

VENDOR SET: 01

BANK : 4 UTILITY A/P

VE.	OR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
003108		AIRGAS USA, LLC I-9908926132	AIRGAS USA, LLC	R	5/16/2013		20.29CR	137320	20.29
001521		BAY TOWEL I-043013	BAY TOWEL	R	5/16/2013		345.85CR	137321	345.85
002411		BECHER-HOPPE ASSOC INC I-17027	BECHER-HOPPE ASSOC INC	R	5/16/2013		4,200.00CR	137322	4,200.00
000083		BELLIN HEALTH I-00098	BELLIN HEALTH	R	5/16/2013		40.00CR	137323	40.00
000381		CITY OF MERRILL I-REPL SEWAGE ACCT	CITY OF MERRILL	R	5/16/2013		25,000.00CR	137324	25,000.00
000209		ENERGENECS I-0026258-IN	ENERGENECS	R	5/16/2013		635.25CR	137325	635.25
000212		FASTENAL COMPANY I-043013	FASTENAL COMPANY	R	5/16/2013		1,676.26CR	137326	1,676.26
000632		FERGUSON ENTERPRISES #331 I-0127368	FERGUSON ENTERPRISES #331	R	5/16/2013		188.14CR	137327	188.14
002661		FRONTIER I-043013	FRONTIER	R	5/16/2013		127.26CR	137328	127.26
000216		GEMPLER'S INC I-1019494451	GEMPLER'S INC	R	5/16/2013		93.95CR	137329	93.95
000215		GENERAL CHEMICAL PERFORMANCE PRODUCTS LLC I-90557634	GENERAL CHEMICAL PERFORMANCE P	R	5/16/2013		5,301.48CR	137330	5,301.48
000221		GRAINGER I-9126581025	GRAINGER	R	5/16/2013		48.69CR	137331	48.69
000224		HYDRITE CHEMICAL CO I-043013	HYDRITE CHEMICAL CO	R	5/16/2013		3,393.00CR	137332	3,393.00
000228		J & H BERGE, INC I-043013	J & H BERGE, INC	R	5/16/2013		293.46CR	137333	293.46

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VL. NR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
000313	LINCOLN CO TREASURER'S OFFICE I-8606	LINCOLN CO TREASURER'S OFFICE	R	5/16/2013		343.10CR	137334	343.10
000041	MERRILL ACE HARDWARE I-043013	MERRILL ACE HARDWARE	R	5/16/2013		945.83CR	137335	945.83
000328	MERRILL WATER UTILITY I-043013	MERRILL WATER UTILITY	R	5/16/2013		184.45CR	137336	184.45
001169	MUNICIPAL ENVIRONMENTAL GROUP - WASTEWATER I-MBR DUES - '13	MUNICIPAL ENVIRONMENTAL GROUP	R	5/16/2013		963.20CR	137337	963.20
000540	NAPA AUTO PARTS I-411869	NAPA AUTO PARTS	R	5/16/2013		7.60CR	137338	7.60
000336	NIENOW ELECTRIC, INC I-043013	NIENOW ELECTRIC, INC	R	5/16/2013		487.73CR	137339	487.73
000337	NORTH CENTRAL LABORATORIES I-043013	NORTH CENTRAL LABORATORIES	R	5/16/2013		3,852.59CR	137340	3,852.59
001891	NORTHERN LAKE SERVICE INC I-231233	NORTHERN LAKE SERVICE INC	R	5/16/2013		294.00CR	137341	294.00
000351	OFFICE OF STATE TREASURER I-REVENUE BD REDEM	OFFICE OF STATE TREASURER	R	5/16/2013		10,000.00CR	137342	10,000.00
001293	OVERHEAD DOOR CO OF WAUSAU I-11037	OVERHEAD DOOR CO OF WAUSAU	R	5/16/2013		1,640.80CR	137343	1,640.80
001392	PACE ANALYTICAL SERVICES INC I-134070236	PACE ANALYTICAL SERVICES INC	R	5/16/2013		330.00CR	137344	330.00
000824	PER MAR SECURITY SERVICES I-043013	PER MAR SECURITY SERVICES	R	5/16/2013		1,708.34CR	137345	1,708.34
002177	PIONEER RESEARCH CORPORATION I-233563	PIONEER RESEARCH CORPORATION	R	5/16/2013		3,377.37CR	137346	3,377.37
000586	QUILL CORPORATION I-1788045	QUILL CORPORATION	R	5/16/2013		22.99CR	137347	22.99

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VE. OR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
000558	SCHMIDT'S SEPTIC SERVICE I-44917	SCHMIDT'S SEPTIC SERVICE	R	5/16/2013		600.00CR	137348	600.00
001201	SENSUS METERING SYSTEMS I-ZA14000677	SENSUS METERING SYSTEMS	R	5/16/2013		1,524.60CR	137349	1,524.60
000572	SHARE CORP I-841085	SHARE CORP	R	5/16/2013		622.25CR	137350	622.25
002533	STRAND & ASSOCIATES INC I-0097001	STRAND & ASSOCIATES INC	R	5/16/2013		225.16CR	137351	225.16
000266	TRANTOW DO IT CENTER I-043013	TRANTOW DO IT CENTER	R	5/16/2013		325.00CR	137352	325.00
000278	TRIDENT SUPPLY I-043013	TRIDENT SUPPLY	R	5/16/2013		115.75CR	137353	115.75
000578	USA BLUE BOOK I-043013	USA BLUE BOOK	R	5/16/2013		3,609.34CR	137354	3,609.34
000284	VIP ALL-VALUE I-085167	VIP ALL-VALUE	R	5/16/2013		15.83CR	137355	15.83
000299	WAL-MART COMMUNITY/GEMB I-043013	WAL-MART COMMUNITY/GEMB	R	5/16/2013		120.52CR	137356	120.52
000587	WI STATE LAB OF HYGIENE I-043013	WI STATE LAB OF HYGIENE	R	5/16/2013		88.00CR	137357	88.00
000656	WISCONSIN PUBLIC SERVICE I-043013	WISCONSIN PUBLIC SERVICE	R	5/16/2013		12,140.24CR	137358	12,140.24

* * T O T A L S * *	NO#	DISCOUNTS	CHECK AMT	TOTAL APPLIED
REGULAR CHECKS:	39	0.00	84,908.32	84,908.32
HANDWRITTEN CHECKS:	0	0.00	0.00	0.00
PRE-WRITE CHECKS:	0	0.00	0.00	0.00
DRAFTS:	0	0.00	0.00	0.00
VOID CHECKS:	0	0.00	0.00	0.00
NON CHECKS:	0	0.00	0.00	0.00
CORRECTIONS:	0	0.00	0.00	0.00
REGISTER TOTALS:	39	0.00	84,908.32	84,908.32

TOTAL ERRORS: 0

TOTAL WARNINGS: 0

PACKET: 04969 UTILITY MAY 2013

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VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
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** POSTING PERIOD RECAP **

FUND	PERIOD	AMOUNT
62	5/2013	28,871.02CR
63	5/2013	56,037.30CR
=====		
ALL		84,908.32CR

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

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	0.8901	X	244	X	8.34	=	1810
	February	0.8736	X	239	X	8.34	=	1744
	March	1.032	X	222	X	8.34	=	1909
	April	0.9381	X	224	X	8.34	=	1754
	May	0.9232	X	224	X	8.34	=	1726
	June	0.9961	X	250	X	8.34	=	2074
	July	0.9031	X	265	X	8.34	=	1994
	August	0.8501	X	267	X	8.34	=	1892
	September	0.8024	X	227	X	8.34	=	1521
	October	0.8394	X	278	X	8.34	=	1945
	November	0.8538	X	286	X	8.34	=	2035
	December	0.8402	X	269	X	8.34	=	1883
2.	Maximum month design flow and design (C)BOD loading.							
		Design	X	%	=	% of Design		
	Max Month Design Flow, MGD	3.86	x	90	=	3.474		
			x	100	=	3.86		
	Design (C)BOD, lbs./day	2800	x	90	=	2520		
			x	100	=	2800		

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

Influent Flow and Loading (Continued)

3. Number of times the flow and (C)BOD exceeded 90% or 100% of design, points earned, and score:

	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

4. Was the influent flow meter calibrated in the last year?

- Yes Enter last calibration date, MM/DD/YYYY 05/11/2012
- No -explain

5. Sewer Use Ordinance

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?

- Yes
- No

If No, please describe:

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

Influent Flow and Loading (Continued)

5.2 Was it necessary to enforce?

- Yes
 No

If Yes, please describe:

6. Septage Receiving

6.1 Did you have requests to receive septage at your facility?

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

6.2 Did you receive septage at your facility? If yes, indicate volume in gallons

Septic Tanks	Holding Tanks	Grease Traps
<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
gal	5724850 gal	gal

6.2.1 If yes to any of the above, please explain if plant performance is affected when receiving any of these wastes

Not that was noticed

7. Pretreatment

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?

- Yes
 No

If Yes, describe the situation and your community's response:

7.2 Did your facility accept hauled industrial wastes, landfill leachate, etc?

- Yes
 No

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.

recieved 1502071 gallons of leachate from the Lincoln County Landfill and 600000 gallons of leachate from the old Ward paper landfil

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

Influent Flow and Loading (Continued)

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

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	25	22.5	7	1	0	0
February	25	22.5	6	1	0	0
March	25	22.5	6	1	0	0
April	25	22.5	6	1	0	0
May	25	22.5	3	1	0	0
June	25	22.5	5	1	0	0
July	25	22.5	8	1	0	0
August	25	22.5	7	1	0	0
September	25	22.5	5	1	0	0
October	25	22.5	8	1	0	0
November	25	22.5	12	1	0	0
December	25	22.5	11	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?

3. Was the effluent flow meter calibrated in the last year?

Yes - enter last calibration date, MM/DD/YYYY:

No - explain:

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

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

		Only have influent flow meter
4.		What problems, if any, were experienced over the last year that threatened treatment?
5.		Other Monitoring and Limits
		<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> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">We had a high Cl2 residual 3 times in 2012; 6-15-12,7-3-12 & 9-17-12</div>
		<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> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">We had 2 Acute WET tests in 2012 and passed both. Test started on 2-6-12 & 12-17-12</div>
		<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 type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA </p> <p>Please explain unless not applicable:</p> <div style="border: 1px solid black; height: 20px; margin-top: 5px;"></div>

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

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	8	1	0	0
	February	30	27	6	1	0	0
	March	30	27	7	1	0	0
	April	30	27	11	1	0	0
	May	30	27	5	1	0	0
	June	30	27	5	1	0	0
	July	30	27	7	1	0	0
	August	30	27	9	1	0	0
	September	30	27	8	1	0	0
	October	30	27	9	1	0	0
	November	30	27	14	1	0	0
	December	30	27	15	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
	<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: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

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	0.8	1	0
February	1	0.7	1	0
March	1	0.5	1	0
April	1	0.9	1	0
May	1	0.4	1	0
June	1	0.6	1	0
July	1	0.9	1	0
August	1	0.9	1	0
September	1	0.7	1	0
October	1	0.7	1	0
November	1	1.0	1	0
December	1	0.8	1	0
Months of Discharge/yr			12	
Points per each exceedance with 12 months of discharge:				10
Exceedances				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: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

Biosolids Quality and Management

	Questions	Points						
1.	Biosolids Use/Disposal:							
	<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: <input style="width: 100%;" type="text"/></p>							
2.	Land Application Site:							
	<table border="1" style="width: 100%; border-collapse: collapse;"> <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;">618.80 acres</td> <td style="text-align: center;">0 acres</td> </tr> </table> <p>2.2 If you did not have enough acres for your land application needs, what action was taken? <input style="width: 100%;" type="text"/></p>	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?	618.80 acres	0 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?							
618.80 acres	0 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.	Biosolids Metals							
	Number of biosolids outfalls in your WPDES permit = 3							
	3.1 For each outfall tested, verify the biosolids metal quality values for your facility during the last calendar year							
BIOSOLIDS METALS CHARACTERISTICS								
Outfall:004 - SECONDARY DIGESTER								

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

Biosolids Quality and Management (Continued)

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				<3.75											0	0
cadmium		39	85				1.51											0	0
copper		1500	4300				439											0	0
lead		300	840				15.9											0	0
mercury		17	57				.468											0	0
molybdenum	60		75				7.19										0		0
nickel	336		420				16.9										0		0
selenium	80		100				8.2										0		0
zinc		2800	7500				819											0	0

Outfall:002 - ANAEROBIC 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				3.11											0	0
cadmium		39	85				.67											0	0
copper		1500	4300				280											0	0
lead		300	840				12.6											0	0
mercury		17	57				1.28											0	0
molybdenum	60		75				7.26										0		0
nickel	336		420				10.8										0		0
selenium	80		100				3.68										0		0
zinc		2800	7500				511											0	0

Outfall:003 - PRIMARY DIGESTER

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				<4.41											0	0
cadmium		39	85				1.34											0	0
copper		1500	4300				523											0	0
lead		300	840				27.6											0	0
mercury		17	57				.53											0	0
molybdenum	60		75				7.38										0		0
nickel	336		420				19.8										0		0
selenium	80		100				<7.93										0		0
zinc		2800	7500				796											0	0

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

Biosolids Quality and Management (Continued)

	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	0												
	<table border="1" style="margin: auto;"> <thead> <tr> <th colspan="3">Exceedance Points</th> </tr> </thead> <tbody> <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;">1-2</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;">> 2</td> <td style="text-align: center;">15 Points</td> </tr> </tbody> </table>	Exceedance Points			<input checked="" type="radio"/>	0	0 Points	<input type="radio"/>	1-2	10 Points	<input type="radio"/>	> 2	15 Points	
Exceedance Points														
<input checked="" type="radio"/>	0	0 Points												
<input type="radio"/>	1-2	10 Points												
<input type="radio"/>	> 2	15 Points												
	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)	0												
	<input type="radio"/> Yes <input type="radio"/> No (10 points) <input checked="" 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="margin: auto;"> <thead> <tr> <th colspan="3">Exceedance Points</th> </tr> </thead> <tbody> <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> </tbody> </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; width: 200px; height: 20px; margin: auto;"></div>													
4.	Pathogen Control(per outfall):													

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

Biosolids Quality and Management (Continued)

Outfall Number:	003
Biosolids Class:	B
Bacteria Type and Limit	
Sample Dates:	1/1/2012 12:00:00 AM - 12/31/2012 12:00:00 AM
Density:	
Sample Concentrator Amount:	
Process:	ANAER
Process Description:	MCRT of the biosolids in digester is calculated daily and maintained greater than 15 days. digester temperature is recorded daily and is maintained greater than 35 degrees C.

Outfall Number:	003
Biosolids Class:	B
Bacteria Type and Limit	
Sample Dates:	1/1/2012 12:00:00 AM - 12/31/2012 12:00:00 AM
Density:	
Sample Concentrator Amount:	
Process:	ANAER
Process Description:	MCRT of the biosolids in digester is calculated daily and maintained greater than 15 days. digester temperature is recorded daily and is maintained greater than 35 degrees C.

Outfall Number:	003
Biosolids Class:	B
Bacteria Type and Limit	
Sample Dates:	1/1/2012 12:00:00 AM - 12/31/2012 12:00:00 AM
Density:	
Sample Concentrator Amount:	
Process:	ANAER
Process Description:	MCRT of the biosolids in digester is calculated daily and maintained greater than 15 days. digester temperature is recorded daily and is maintained greater than 35 degrees C.

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
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Biosolids Quality and Management (Continued)

	<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> <div style="border: 1px solid black; height: 20px; width: 40%; margin-left: 40px;"></div>																															
5.	<p>Vector Attraction Reduction(per outfall):0</p> <table border="1" style="width: 100%; margin-top: 10px;"> <tr><td>Outfall Number:</td><td>003</td></tr> <tr><td>Method Date:</td><td>12/31/2012 12:00:00 AM</td></tr> <tr><td>Option Used To Satisfy Requirement:</td><td>VSR</td></tr> <tr><td>Limit (if applicable):</td><td>38</td></tr> <tr><td>Results (if applicable):</td><td>66.90</td></tr> </table> <table border="1" style="width: 100%; margin-top: 10px;"> <tr><td>Outfall Number:</td><td>003</td></tr> <tr><td>Method Date:</td><td>12/31/2012 12:00:00 AM</td></tr> <tr><td>Option Used To Satisfy Requirement:</td><td>VSR</td></tr> <tr><td>Limit (if applicable):</td><td>38</td></tr> <tr><td>Results (if applicable):</td><td>65.40</td></tr> </table> <table border="1" style="width: 100%; margin-top: 10px;"> <tr><td>Outfall Number:</td><td>003</td></tr> <tr><td>Method Date:</td><td>12/31/2012 12:00:00 AM</td></tr> <tr><td>Option Used To Satisfy Requirement:</td><td>VSR</td></tr> <tr><td>Limit (if applicable):</td><td>38</td></tr> <tr><td>Results (if applicable):</td><td>61.30</td></tr> </table>	Outfall Number:	003	Method Date:	12/31/2012 12:00:00 AM	Option Used To Satisfy Requirement:	VSR	Limit (if applicable):	38	Results (if applicable):	66.90	Outfall Number:	003	Method Date:	12/31/2012 12:00:00 AM	Option Used To Satisfy Requirement:	VSR	Limit (if applicable):	38	Results (if applicable):	65.40	Outfall Number:	003	Method Date:	12/31/2012 12:00:00 AM	Option Used To Satisfy Requirement:	VSR	Limit (if applicable):	38	Results (if applicable):	61.30	
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Limit (if applicable):	38																															
Results (if applicable):	61.30																															
	<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 style="margin-left: 40px;"> <input type="radio"/> Yes <input checked="" type="radio"/> No </p> <p>If yes, what action was taken?</p>	0																														

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

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Biosolids Quality and Management (Continued)

6.	Biosolids Storage:0	
	6.1 How many days of actual, current biosolids storage capacity did your wastewater treatment facility have either on-site or off-site?	0
	<ul style="list-style-type: none"> <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) 	
	6.2 If you check Not Applicable above, explain why.	
7.	Issues:	
	7.1 Describe any outstanding biosolids issues with treatment, use or overall mgt?	

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
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Reporting Year: 2012

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: 100%;"></div> <p>Could use more help/staff for:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></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: 100%;"></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: 100%;"></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> <p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>	
7.	<p>Rate the overall maintenance of your wastewater plant.</p> <p> <input type="radio"/> Excellent </p>	

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

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Reporting Year: 2012

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

	<ul style="list-style-type: none"> <input checked="" type="radio"/> Very Good <input type="radio"/> Good <input type="radio"/> Fair <input type="radio"/> Poor <p>Describe your rating:</p> <div style="border: 1px solid black; padding: 2px; width: fit-content;">can always get better</div>	
--	---	--

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/7/2013

Reporting Year: 2012

Operator Certification and Education

	Questions	Points
1.	<p>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 style="width: 500px;" type="text" value="TERENCE L VANDEN HEUVEL"/></p> <p>Certification No: <input style="width: 500px;" type="text" value="31771"/></p>	0
2.	<p>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 style="width: 500px;" type="text" value="4 - ACEFGIJ; A - PRIMARY SETTLING; C - ACTIVATED SLUDGE; E - DISINFECTION; F - ANAEROBIC DIGESTION; G - MECHANICAL SLUDGE; I - PHOSPHORUS REMOVAL; J - LABORATORY"/></p> <p>Held: <input style="width: 500px;" type="text" value="4 - ACEFGIJ; 4 - A=PRIMARY SETTLING GRADE 4; C=ACTIVATED SLUDGE GRADE 4; E=DISINFECTION GRADE 4; F=ANAEROBIC DIGESTION GRADE 4; G=MECHANICAL SLUDGE GRADE 4; I=PHOSPHORUS REMOVAL GRADE 4; J=LABORATORY GRADE 4"/></p>	
3.	<p>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
4.	<p>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 <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) </p> <p>Explain: <input style="width: 500px;" type="text"/></p>	0
5.	<p>If you had a designated operator-in-charge, was the operator-in-charge earning continuing education credits at the following rates?</p> <p>Grades T, 1, and 2:</p>	

COMPLIANCE MAINTENANCE ANNUAL REPORT

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Reporting Year: 2012

Operator Certification and Education (Continued)

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/8/2013

Reporting Year: 2012

Financial Management

	Questions	Points						
1.	Person Providing This Financial Information							
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Name:</td> <td style="border: 1px solid black; padding: 2px;">Kim Kriewald</td> </tr> <tr> <td>Telephone:</td> <td style="border: 1px solid black; padding: 2px;">(715) 536-6561</td> </tr> <tr> <td>E-Mail Address(optional):</td> <td style="border: 1px solid black; padding: 2px;">kim.kriewald@ci.merrill.wi.us</td> </tr> </table>	Name:	Kim Kriewald	Telephone:	(715) 536-6561	E-Mail Address(optional):	kim.kriewald@ci.merrill.wi.us	
Name:	Kim Kriewald							
Telephone:	(715) 536-6561							
E-Mail Address(optional):	kim.kriewald@ci.merrill.wi.us							
2.	Are User Charge or other Revenues sufficient to cover O&M Expenses for your wastewater treatment plant AND/OR collection system ?	0						
	<p style="margin-left: 20px;"> <input checked="" type="radio"/> Yes (0 points) <input type="radio"/> No (40 points) </p> <p>If No, please explain:</p> <div style="border: 1px solid black; height: 20px; width: 60%; margin-left: 20px;"></div>							
3.	When was the User Charge System or other revenue source(s) last reviewed and/or revised? Year: 2011	0						
	<p style="margin-left: 20px;"> <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) </p>							
4.	Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system?	0						
	<p style="margin-left: 20px;"> <input checked="" type="radio"/> Yes <input type="radio"/> No (40 points) </p>							
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	0						
	<p style="margin-left: 20px;"> <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: </p> <div style="border: 1px solid black; height: 20px; width: 60%; margin-left: 20px;"></div>							
	5.2 What amount is in your Replacement Fund?							
	Equipment Replacement Fund Activity							
	5.2.1 Ending Balance Reported on Last Year's CMAR:	\$770807						
	5.2.2 Adjustments if necessary (e.g., eamed interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	+ \$0.00						
	5.2.3 Adjusted January 1st Beginning Balance	\$770,807.00						

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

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Reporting Year: 2012

Financial Management (Continued)

	<p>5.2.4 Additions to Fund (e.g., portion of User Fee, earned interest, etc.) + \$294,542.00</p> <p>5.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 5.2.5.1 below*) - \$308,432.00</p> <p>5.2.6 Ending Balance as of December 31st for CMAR Reporting Year \$756,917.00</p> <p>(All Sources: This ending balance should include all Equipment Replacement Funds whether held in a bank account(s), certificate(s) of deposit, etc.)</p> <p>*5.2.5.1. Indicate adjustments, equipment purchases and/or major repairs from 5.2.5 above</p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>New Vactor truck \$300217.00/ debt service 8215.00</p> </div>							
	<p>5.3 What amount should be in your replacement fund? \$1,048,582.00</p> <p>(If you had a CWFPP 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.)</p>							
	<p>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)?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No Explain:</p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <p>Using DNR's percentage of mechanical equipment method 40% of the replacement fund assets. \$291665 under funded, we have increased the monthly deposit into the replacement fund from \$12500 per month to \$15000 per month.</p> </div>							
6.	Future Planning							
	<p>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?</p> <p><input checked="" type="radio"/> Yes (If yes, please provide major project information, if not already listed below)</p> <p><input type="radio"/> No</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <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>Replace Wisconsin River force main.</td> <td style="text-align: center;">\$750,000.00</td> <td style="text-align: center;">2014</td> </tr> </tbody> </table>	Project Description	Estimated Cost	Approximate Construction Year	Replace Wisconsin River force main.	\$750,000.00	2014	
Project Description	Estimated Cost	Approximate Construction Year						
Replace Wisconsin River force main.	\$750,000.00	2014						
7.	Financial Management General Comments:							
	<div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Sept. 2010- Council agreed to raise sewer rates by 2% annually to maintain positive cash flow.</p> </div>							

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

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Financial Management (Continued)

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

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Reporting Year: 2012

Sanitary Sewer Collection Systems

	Questions	Points
1.	<p>Do you have a Capacity, Management, Operation & Maintenance(CMOM) requirement in your WPDES permit?</p> <p style="margin-left: 40px;"> <input type="radio"/> Yes <input checked="" type="radio"/> No </p>	
2.	<p>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?</p> <p style="margin-left: 40px;"> <input checked="" type="radio"/> Yes (go to question 3) <input type="radio"/> No (30 points) (go to question 4) </p>	0
3.	<p>Check the elements listed below that are included in your Operation and Maintenance (O&M) or CMOM program.:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Goals: Describe the specific goals you have for your collection system: <input type="checkbox"/> Organization: Do you have the following written organizational elements (check only those that you have): <ul style="list-style-type: none"> <input type="checkbox"/> Ownership and governing body description <input type="checkbox"/> Organizational chart <input 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): <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Sewer use ordinance Last Revised MM/DD/YYYY 01/10/2012 <input checked="" type="checkbox"/> Pretreatment/Industrial control Programs <input checked="" 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 checked="" 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? <ul style="list-style-type: none"> <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 type="checkbox"/> Others: 	

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Sanitary Sewer Collection Systems (Continued)

	<p><input checked="" type="checkbox"/> Overflow Emergency Response Plan: Does your emergency response capability include (check only those that you have):</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Alarm system and routine testing <input checked="" type="checkbox"/> Emergency equipment <input type="checkbox"/> Emergency procedures <input type="checkbox"/> Communications/Notifications (DNR, Internal, Public, Media etc) <p><input checked="" type="checkbox"/> Capacity Assurance: How well do you know your sewer system? Do you have the following?</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Current and up-to-date sewer map <input checked="" type="checkbox"/> Sewer system plans and specifications <input checked="" type="checkbox"/> Manhole location map <input checked="" type="checkbox"/> Lift station pump and wet well capacity information <input checked="" type="checkbox"/> Lift station O&M manuals <p>Within your sewer system have you identified the following?</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Areas with flat sewers <input checked="" type="checkbox"/> Areas with surcharging <input type="checkbox"/> Areas with bottlenecks or constrictions <input checked="" type="checkbox"/> Areas with chronic basement backups or SSO's <input checked="" type="checkbox"/> Areas with excess debris, solids or grease accumulation <input checked="" 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 type="checkbox"/> Adequacy of capacity for new connections <input type="checkbox"/> Lift station capacity and/or pumping problems <p><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.</p> <p><input type="checkbox"/> Special Studies Last Year (check only if applicable):</p> <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: 	
4.	<p>Did your sanitary sewer collection system maintenance program include the following maintenance activities? Complete all that apply and indicate the amount maintained:</p>	
	<p>Cleaning 42.3 % of system/year</p> <p>Root Removal 1.5 % of system/year</p> <p>Flow Monitoring 0 % of system/year</p> <p>Smoke Testing 0 % of system/year</p> <p>Sewer Line Televising 1.0 % of system/year</p>	

COMPLIANCE MAINTENANCE ANNUAL REPORT

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Sanitary Sewer Collection Systems (Continued)

Manhole Inspections	<input type="text" value="35.7"/>	% of system/year
Lift Station O&M	<input type="text" value="2"/>	# per L.S./year
Manhole Rehabilitation	<input type="text" value="0.1"/>	% of manholes rehabed
Mainline Rehabilitation	<input type="text" value="0"/>	% of sewer lines rehabed
Private Sewer Inspections	<input type="text" value="1.0"/>	% 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:		
Rehabed 2 manholes		

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

<input type="text" value="27.70"/>	Total Actual Amount of Precipitation Last Year
<input type="text" value="32.41"/>	Annual Average Precipitation (for your location)
<input type="text" value="72.3"/>	Miles of Sanitary Sewer
<input type="text" value="8"/>	Number of Lift Stations
<input type="text" value="0"/>	Number of Lift Station Failure
<input type="text" value="1"/>	Number of Sewer Pipe Failures
<input type="text" value="11"/>	Number of Basement Backup Occurrences
<input type="text" value="36"/>	Number of Complaints
<input type="text" value="0.8952"/>	Average Daily Flow in MGD
<input type="text" value="1.0324"/>	Peak Monthly Flow in MGD(if available)

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/8/2013

Reporting Year: 2012

Sanitary Sewer Collection Systems (Continued)

NUMBER OF SANITARY SEWER OVERFLOWS (SSO) REPORTED (10 POINTS PER OCCURRENCE)					10
	Date	Location	Cause	Estimated Volume (MG)	
1.	7/15/2012 5:00:00 PM to 7/16/2012 5:00:00 PM	300 feet east of pumping station on W. Main St, in W. Wisconsin River channel. Start date and time are estimated.	Broken Sewer, Broken Sewer	0.0840	
<p>Were there SSOs that occurred last year that are not listed above?</p> <p style="margin-left: 20px;"> <input type="radio"/> Yes <input checked="" type="radio"/> No </p> <p>If Yes, list the SSOs that occurred:</p> <div style="border: 1px solid black; height: 20px; width: 60%; margin-left: 20px;"></div>					
PERFORMANCE INDICATORS					
0.00	Lift Station Failures(failures/ps/year)				
0.01	Sewer Pipe Failures(pipe failures/sewer mile/yr)				
0.01	Sanitary Sewer Overflows (number/sewer mile/yr)				
0.15	Basement Backups(number/sewer mile)				
0.50	Complaints (number/sewer mile)				
1.2	Peaking Factor Ratio (Peak Monthly:Annual Daily Average)				
0.0	Peaking Factor Ratio(Peak Hourly:Annual daily Average)				
6.	<p>Was infiltration/inflow(I/I) significant in your community last year?</p> <p style="margin-left: 20px;"> <input type="radio"/> Yes <input checked="" type="radio"/> No </p> <p>If Yes, please describe:</p> <div style="border: 1px solid black; height: 20px; width: 60%; margin-left: 20px;"></div>				
7.	<p>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?</p> <p style="margin-left: 20px;"> <input type="radio"/> Yes <input checked="" type="radio"/> No </p> <p>If Yes, please describe:</p> <div style="border: 1px solid black; height: 20px; width: 60%; margin-left: 20px;"></div>				

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:
5/8/2013

Reporting Year: 2012

Sanitary Sewer Collection Systems (Continued)

8.	Explain any infiltration/inflow(I/I) changes this year from previous years?	
9.	What is being done to address infiltration/inflow in your collection system?	

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

COMPLIANCE MAINTENANCE ANNUAL REPORT

Facility Name: Merrill City Of

Last Updated:

Reporting Year: 2012

WPDES No.0020150

GRADING SUMMARY				
SECTION	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Influent Loadings	A	4.0	3	12
Effluent Quality:BOD	A	4.0	10	40
Effluent Quality:TSS	A	4.0	5	20
Effluent Quality:P	A	4.0	3	12
Biosolids Mgt.	A	4.0	5	20
Prev. Maintenance Staffing	A	4.0	1	4
Operator Certification	A	4.0	1	4
Financial Management	A	4.0	1	4
Collection Systems	B	3.0	3	9
TOTALS			32	125
GRADE POINT AVERAGE(GPA)=3.91		3.91		

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: Merrill City Of

Last Updated:

Reporting Year: 2012

Resolution or Owner's Statement

NAME OF GOVERNING BODY OR OWNER	DATE OF RESOLUTION OR ACTION TAKEN
RESOLUTION NUMBER	
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=A	
Effluent Quality: TSS: Grade=A	
Effluent Quality: Phosphorus: Grade=A	
Biosolids Quality and Management: Grade=A	
Staffing: Grade=A	
Operator Certification: Grade=A	
Financial Management: Grade=A	
Collection Systems: Grade=B	
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. = 3.91	



{Enter agenda no.}

RESOLUTION NO. _____

A RESOLUTION APPROVING THE 2012 COMPLIANCE MAINTENANCE ANNUAL REPORT FOR THE CITY OF MERRILL WASTEWATER TREATMENT PLANT

WHEREAS, the City of Merrill is required by the Wisconsin Department of Natural Resources (WDNR) to complete a Compliance Maintenance Annual Report on its Wastewater Treatment Plant; and

WHEREAS, the Water and Sewage Committee, of the City of Merrill, has reviewed the Compliance Maintenance Report for the year 2012, and has determined that it reflects the performance of the Wastewater Treatment Plant during 2012; and

WHEREAS, the report indicates a need for continued improvements at the Wastewater Treatment Plant and its operations to meet the requirements set forth by the WDNR;

NOW THEREFORE, BE IT RESOLVED BY THE COMMON COUNCIL OF THE CITY OF MERRILL, WISCONSIN, this 11th day of June, 2013, that:

1. The Compliance Maintenance Annual Report for 2012 is hereby approved and authorized to be filed with the WDNR.
2. That the Compliance Maintenance Annual Report for 2012 is an accurate indication of the performance of the City of Merrill Wastewater Treatment Plant for the year 2012.
3. That report sets forth the following actions necessary to maintain an effluent requirement contained in the Wisconsin Pollutant Discharge Elimination Systems Permit:
 - (a) Continue to address collection system operations and work to eliminate the potential for sanitary sewer overflows (SSO).

Recommended by Water and Sewage Committee

CITY OF MERRILL, WISCONSIN

Moved: _____

William R. Bialecki, Mayor

Passed: _____

William N. Heideman, City Clerk

Up date on Biological Phosphorus Removal.

The caustic usage for the years 2010 thru 2012 averaged 4580 gallons per year. Since the start of the pilot we have used no caustic. Alum average usage is approx. 2800 gallons per month. The operators have made a number of changes over the last 6 months and the amount of alum usage for May looks to be around 1400 gallons, a reduction of 50%. Lets hope the trend continues.

May 22, 2013

TO: Water & Sewage Committee

FROM: Kim Kriewald, Utility Superintendent

RE: Operations Report

Water & Sewer Operations & Water Recycling Operations aka Wastewater Operations

Tanks at WWTP – areas need patching; getting price estimates.

Price estimates for replacing window at the WWTP.

Roofs being checked at the WWTP – area over garage on main building needs work ASAP; digester building needs to be done next year along with extension of exhaust stack.

Maintenance work and processes ready for summer operation.

Hydrant flushing/maintenance again performed at night – only 1 complaint reported.

Reviewed Equipment Replacement Fund for CMAR and put reportable information together on the collection system.

Checked the river crossings – everything okay.

Grass mowing season has started.

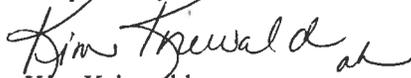
Removing stumps from last year's wind storm.

Landscaping being done by the water treatment building.

Had two 2) groups tour some of the utility's facilities – the Red Hat Society toured the Wastewater Treatment Plant and the M & M Senior Group from Our Saviour's Lutheran Church toured the Water Treatment Facility. Thanks to both groups for showing great interest in our operations.

Completed Consumer Confidence Report and newsletter; should be at the printer next week after review.

Respectfully submitted,


Kim Kriewald
Utilities Superintendent

ah