



CITY OF MERRILL
Water & Sewage Utility

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

Smart Move

NOTICE

RE: Water and Sewage Committee Meeting to be held Wednesday, May 25, 2016 at 5:00 p.m. in the Council Chambers at City Hall.

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

The following items will be on the agenda:

1. Review & approval of vouchers
2. Review & approval of 2015 CMAR (Compliance Maintenance Annual Report).
3. Review bids for 6th Street Reconstruction.
4. Operations Report.
5. Public Comment.
6. Next meeting.
7. Adjournment.

Reviewed by,

Rob Norton
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.

PACKET: 06545 UTILITY 5/9/16

VENDOR SET: 01

**** CHECK LISTING ****

BANK : 4 UTILITY A/P

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
003108	AIRGAS USA, LLC I-9934926282	AIRGAS USA, LLC	R	5/11/2016		21.62CR	150326	21.62
001521	BAY TOWEL, INC. I-043016	BAY TOWEL, INC.	R	5/11/2016		323.51CR	150327	323.51
002809	CARQUEST OF MERRILL I-043016	CARQUEST OF MERRILL	R	5/11/2016		268.36CR	150328	268.36
000215	CHEMTRADE CHEMICALS US LLC I-91806212	CHEMTRADE CHEMICALS US LLC	R	5/11/2016		3,468.60CR	150329	3,468.60
000381	CITY OF MERRILL I-043016	CITY OF MERRILL	R	5/11/2016		15,000.00CR	150330	15,000.00
000115	COUNTY MATERIALS CORP I-ORDER#2699912-00	COUNTY MATERIALS CORP	R	5/11/2016		373.19CR	150331	373.19
002871	KATE DREWEK I-SEWER CAMERA	KATE DREWEK	R	5/11/2016		98.18CR	150332	98.18
001867	ENVIROTECH EQUIPMENT CO. I-043016	ENVIROTECH EQUIPMENT CO.	R	5/11/2016		2,040.54CR	150333	2,040.54
000212	FASTENAL COMPANY I-043016	FASTENAL COMPANY	R	5/11/2016		432.63CR	150334	432.63
000632	FERGUSON ENTERPRISES #331 I-043016	FERGUSON ENTERPRISES #331	R	5/11/2016		16,484.49CR	150335	16,484.49
002661	FRONTIER I-ALARM-WHSE	FRONTIER	R	5/11/2016		140.19CR	150336	140.19
000221	GRAINGER I-043016	GRAINGER	R	5/11/2016		1,039.80CR	150337	1,039.80
001556	HD SUPPLY WATERWORKS, LTD I-043016	HD SUPPLY WATERWORKS, LTD	R	5/11/2016		12,499.54CR	150338	12,499.54
000224	HYDRITE CHEMICAL CO I-01904427	HYDRITE CHEMICAL CO	R	5/11/2016		1,924.20CR	150339	1,924.20

PACKET: 06545 UTILITY 5/9/16

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VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
002849	HYDROCORP I-0038878-IN	HYDROCORP	R	5/11/2016		1,340.00CR	150340	1,340.00
001017	JANSSEN HEATING & COOLING I-20182	JANSSEN HEATING & COOLING	R	5/11/2016		6,400.00CR	150341	6,400.00
000751	L W ALLEN LLC I-043016	L W ALLEN LLC	R	5/11/2016		1,784.45CR	150342	1,784.45
000313	LINCOLN CO TREASURER'S OFFICE I-043016	LINCOLN CO TREASURER'S OFFICE	R	5/11/2016		248.37CR	150343	248.37
000351	LOCAL GOVERNMENT INVESTMENT POOL I-043016	LOCAL GOVERNMENT INVESTMENT PO	R	5/11/2016		8,750.00CR	150344	8,750.00
000317	MARTELLE WATER TREATMENT I-14296	MARTELLE WATER TREATMENT	R	5/11/2016		4,839.31CR	150345	4,839.31
002549	MEDFORD COOPERATIVE INC I-4450	MEDFORD COOPERATIVE INC	R	5/11/2016		705.86CR	150346	705.86
000041	MERRILL ACE HARDWARE I-043016	MERRILL ACE HARDWARE	R	5/11/2016		231.45CR	150347	231.45
000328	MERRILL WATER UTILITY I-043016	MERRILL WATER UTILITY	R	5/11/2016		198.63CR	150348	198.63
000540	NAPA AUTO PARTS I-043016	NAPA AUTO PARTS	R	5/11/2016		146.16CR	150349	146.16
002452	NELSON'S POWERHOUSE I-043016	NELSON'S POWERHOUSE	R	5/11/2016		54.56CR	150350	54.56
000336	NIENOW ELECTRIC, INC I-043016	NIENOW ELECTRIC, INC	R	5/11/2016		1,463.72CR	150351	1,463.72
000337	NORTH CENTRAL LABORATORIES I-043016	NORTH CENTRAL LABORATORIES	R	5/11/2016		1,665.45CR	150352	1,665.45
001891	NORTHERN LAKE SERVICE INC I-293852	NORTHERN LAKE SERVICE INC	R	5/11/2016		397.35CR	150353	397.35

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**** CHECK LISTING ****

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
000824	PER MAR SECURITY SERVICES I-043016	PER MAR SECURITY SERVICES	R	5/11/2016		1,223.19CR	150354	1,223.19
000362	PETERSON BROS. SAND I-10134	PETERSON BROS. SAND	R	5/11/2016		285.00CR	150355	285.00
001811	SGS ENVIRONMENTAL CONTRACTING LLC I-25187	SGS ENVIRONMENTAL CONTRACTING	R	5/11/2016		3,307.50CR	150356	3,307.50
000278	TRIDENT SUPPLY I-a4681	TRIDENT SUPPLY	R	5/11/2016		100.75CR	150357	100.75
000578	USA BLUE BOOK I-043016	USA BLUE BOOK	R	5/11/2016		3,684.91CR	150358	3,684.91
000284	VIP ALL-VALUE I-043016	VIP ALL-VALUE	R	5/11/2016		821.02CR	150359	821.02
000299	WAL-MART COMMUNITY/GEMB I-043016	WAL-MART COMMUNITY/GEMB	R	5/11/2016		43.49CR	150360	43.49
000656	WISCONSIN PUBLIC SERVICE I-043016	WISCONSIN PUBLIC SERVICE	R	5/11/2016		11,344.38CR	150361	11,344.38
000227	KYLEM WATER SOLUTIONS U.S.A. INC I-3556893334	KYLEM WATER SOLUTIONS U.S.A. I	R	5/11/2016		6,867.00CR	150362	6,867.00

* * T O T A L S * *		NO#	DISCOUNTS	CHECK AMT	TOTAL APPLIED
REGULAR CHECKS:		37	0.00	110,017.40	110,017.40
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:		37	0.00	110,017.40	110,017.40

TOTAL ERRORS: 0 TOTAL WARNINGS: 0

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** POSTING PERIOD RECAP **

FUND	PERIOD	AMOUNT
24	5/2016	226.63CR
43	5/2016	20,821.86CR
62	5/2016	41,694.44CR
63	5/2016	47,274.47CR
ALL		110,017.40CR

Compliance Maintenance Annual Report

Merrill City Of

Last Updated: Reporting For:

5/16/2016

2015

Influent Flow and Loading

1. Monthly Average Flows and (C)BOD Loadings

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

Outfall 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, lbs/day
January	1.1775	x	216	x	8.34	=	2,124
February	1.0924	x	208	x	8.34	=	1,897
March	1.1744	x	202	x	8.34	=	1,980
April	1.2149	x	192	x	8.34	=	1,942
May	1.1335	x	208	x	8.34	=	1,964
June	1.2565	x	169	x	8.34	=	1,768
July	1.0157	x	213	x	8.34	=	1,807
August	0.9635	x	219	x	8.34	=	1,762
September	1.0564	x	202	x	8.34	=	1,778
October	0.9854	x	214	x	8.34	=	1,760
November	1.0916	x	198	x	8.34	=	1,801
December	1.3693	x	146	x	8.34	=	1,662

2. Maximum Month Design Flow and Design (C)BOD Loading

2.1 Verify the design flow and loading for your facility.

Design	Design Factor	x	%	=	% of Design
Max Month Design Flow, MGD	3.86	x	90	=	3.474
		x	100	=	3.86
Design (C)BOD, lbs/day	2800	x	90	=	2520
		x	100	=	2800

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

	Months of Influent	Number of times flow was greater than 90% of	Number of times flow was greater than 100% of	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		2	1	3	2
Exceedances		0	0	0	0
Points		0	0	0	0
Total Number of Points					0

0

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3. Flow Meter

3.1 Was the influent flow meter calibrated in the last year?

Yes

Enter last calibration date (MM/DD/YYYY)

No

If No, please explain:

4. Sewer Use Ordinance

4.1 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 explain:

4.2 Was it necessary to enforce the ordinance?

Yes

No

If Yes, please explain:

5. Septage Receiving

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

Septic Tanks

Holding Tanks

Grease Traps

Yes

Yes

Yes

No

No

No

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

Septic Tanks

Yes

gallons

No

Holding Tanks

Yes

gallons

No

Grease Traps

Yes

gallons

No

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

6. Pretreatment

6.1 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.

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

Yes

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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 567,000 gallons of leachate from the abandoned Ward Paper Mill landfill and 991,919 gallons of leachate from the Lincoln County landfill.

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

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Effluent Quality and Plant Performance (BOD/CBOD)

1. Effluent (C)BOD Results

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

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	25	22.5	9	1	0	0
February	25	22.5	9	1	0	0
March	25	22.5	5	1	0	0
April	25	22.5	5	1	0	0
May	25	22.5	4	1	0	0
June	25	22.5	4	1	0	0
July	25	22.5	2	1	0	0
August	25	22.5	5	1	0	0
September	25	22.5	3	1	0	0
October	25	22.5	6	1	0	0
November	25	22.5	8	1	0	0
December	25	22.5	5	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 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?

2. Flow Meter Calibration

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

Yes

Enter last calibration date (MM/DD/YYYY)

No

If No, please explain:

We don't have one.

3. Treatment Problems

3.1 What problems, if any, were experienced over the last year that threatened treatment?

None

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

No

If Yes, please explain:

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<p>4.2 At any time in the past year was there a failure of an effluent acute or chronic whole effluent toxicity (WET) test?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p>If Yes, please explain:</p> <p>_____</p> <p>4.3 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</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> N/A</p> <p>Please explain unless not applicable:</p> <p>_____</p>

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

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2015

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	16	1	0	0
February	30	27	19	1	0	0
March	30	27	7	1	0	0
April	30	27	7	1	0	0
May	30	27	5	1	0	0
June	30	27	6	1	0	0
July	30	27	5	1	0	0
August	30	27	7	1	0	0
September	30	27	5	1	0	0
October	30	27	12	1	0	0
November	30	27	19	1	0	0
December	30	27	13	1	0	0
* Equals limit if limit is <= 10						
Months of Discharge/yr				12		
Points per each exceedance with 12 months of discharge:					7	3
Exceedances					0	0
Points					0	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 $12/6 = 2.0$

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

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

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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

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

10

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?

Violation was due to alum feed line problems. Once changes were made phosphorus results came back into compliance.

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

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2015

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:

2. Land Application Site

2.1 Last Year's Approved and Active Land Application Sites

2.1.1 How many acres did you have?

400 acres

2.1.2 How many acres did you use?

102 acres

2.2 If you did not have enough acres for your land application needs, what action was taken?

2.3 Did you overapply nitrogen on any of your approved land application sites you used last year?

Yes (30 points)

No

2.4 Have all the sites you used last year for land application been soil tested in the previous 4 years?

Yes

No (10 points)

N/A

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. 002 - ANAEROBIC SLUDGE

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			2.9											0	0
Cadmium		39	85			1.2											0	0
Copper		1500	4300			520											0	0
Lead		300	840			20											0	0
Mercury		17	57			.31											0	0
Molybdenum	60		75			10										0		0
Nickel	336		420			30										0		0
Selenium	80		100			8.1										0		0
Zinc		2800	7500			860											0	0

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

Exceedence Points

0 (0 Points)

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1-2 (10 Points)

> 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)

Yes

No (10 points)

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

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)

1 (10 Points)

> 1 (15 Points)

3.1.4 Were biosolids land applied which exceeded the ceiling limit?

Yes (20 Points)

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?

0

4. Pathogen Control (per outfall):

4.1 Verify the following information. If any information is incorrect, Contact Us.

Outfall Number:	002
Biosolids Class:	B
Bacteria Type and Limit:	
Sample Dates:	01/01/2015 - 12/31/2015
Density:	
Sample Concentration Amount:	
Requirement Met:	Yes
Land Applied:	Yes
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.

0

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?

Yes (40 Points)

No

If yes, what action was taken?

5. Vector Attraction Reduction (per outfall):

5.1 Verify the following information. If any of the information is incorrect, Contact Us.

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Outfall Number:	002	0
Method Date:	11/30/2015	
Option Used To Satisfy Requirement:	VSR	
Requirement Met:	Yes	
Land Applied:	Yes	
Limit (if applicable):	38	
Results (if applicable):	56	
<p>5.2 Was the limit exceeded or the process criteria not met at the time of land application?</p> <p><input type="radio"/> Yes (40 Points)</p> <p><input checked="" type="radio"/> No</p> <p>If yes, what action was taken?</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
<p>6. Biosolids Storage</p> <p>6.1 How many days of actual, current biosolids storage capacity did your wastewater treatment facility have either on-site or off-site?</p> <p><input checked="" type="radio"/> >= 180 days (0 Points)</p> <p><input type="radio"/> 150 - 179 days (10 Points)</p> <p><input type="radio"/> 120 - 149 days (20 Points)</p> <p><input type="radio"/> 90 - 119 days (30 Points)</p> <p><input type="radio"/> < 90 days (40 Points)</p> <p><input type="radio"/> N/A (0 Points)</p> <p>6.2 If you checked N/A above, explain why.</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
<p>7. Issues</p> <p>7.1 Describe any outstanding biosolids issues with treatment, use or overall management:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		

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

Compliance Maintenance Annual Report

Merrill City Of

Last Updated: Reporting For:

5/16/2016

2015

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 Manual 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:

Age of the plant is starting to make maintenance more time consuming.

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

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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)
- No (20 points)

Name:

Certification No:

0

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

0

2.2 Was the operator-in-charge certified at the appropriate level and subclass(es) to operate this plant? (Note: Certification in subclass SS, N and A5 not required in 2015 - 2016; subclass SS is basic level only.)

- Yes (0 points)
- No (20 points)

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
- 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 your plant and is expected to 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:

0

4. Continuing Education Credits

4.1 If you had a designated operator-in-charge, was the operator-in-charge earning Continuing Education Credits at the following rates?

OIT and Basic Certification:

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- Averaging 6 or more CECs per year.
 - Averaging less than 6 CECs per year.
- Advanced Certification:
- Averaging 8 or more CECs per year.
 - Averaging less than 8 CECs per year.

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Financial Management

1. Provider of Financial Information

Name:

Telephone: (XXX) XXX-XXXX

E-Mail Address (optional):

2. Treatment Works Operating Revenues

2.1 Are User Charges or other revenues sufficient to cover O&M expenses for your wastewater treatment plant AND/OR collection system ?

- Yes (0 points)
- No (40 points)

If No, please explain:

2.2 When was the User Charge System or other revenue source(s) last reviewed and/or revised?

Year:

- 0-2 years ago (0 points)
- 3 or more years ago (20 points)
- N/A (private facility)

2.3 Did you have a special account (e.g., CWF required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system?

- Yes (0 points)
- No (40 points)

0

REPLACEMENT FUNDS [PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 3]

3. Equipment Replacement Funds

3.1 When was the Equipment Replacement Fund last reviewed and/or revised?

Year:

- 1-2 years ago (0 points)
- 3 or more years ago (20 points)
- N/A

If N/A, please explain:

3.2 Equipment Replacement Fund Activity

3.2.1 Ending Balance Reported on Last Year's CMAR	\$	<input type="text" value="806,821.31"/>
3.2.2 Adjustments - if necessary (e.g. earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	\$	<input type="text" value="0.00"/>
3.2.3 Adjusted January 1st Beginning Balance	\$	<input type="text" value="806,821.31"/>
3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.)	+	\$ <input type="text" value="203,749.02"/>
3.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 3.2.6.1 below*)	-	\$ <input type="text" value="62,338.78"/>
3.2.6 Ending Balance as of December 31st for CMAR Reporting Year	\$	<input type="text" value="948,231.55"/>

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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.

Replaced RAS pumps/ Re-built lift station pumps at 6th ward station/ Replaced D.O. Probes and wiring.

3.3 What amount should be in your Replacement Fund? \$ 1,184,102.00

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 HELP link under Info 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)?

- Yes
- No

If No, please explain.

Using DNR's percentage of mechanical equipment method 40% of the replacement fund assets, the fund is \$235,871.00 under funded.

0

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.
- No

Project #	Project Description	Estimated Cost	Approximate Construction Year
1	projects to be determined based from the results of Operation and Needs Review.		2016

5. Financial Management General Comments

Total Points Generated	0
Score (100 - Total Points Generated)	100
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Sanitary Sewer Collection Systems

1. CMOM Program

1.1 Do you have a Capacity, Management, Operation & Maintenance (CMOM) requirement in your WPDES permit?

- Yes
- No

1.2 Did you have a documented (written records/files, computer files, video tapes, etc.) sanitary sewer collection system operation & maintenance (O&M) or CMOM program last calendar year?

- Yes (Continue with question 1)
- No (30 points) (Go to question 2)

1.3 Check the elements listed below that are included in your O&M or CMOM program.

Goals

Describe the specific goals you have for your collection system:

Clean 33% of sewer system, CCTV 10% of mainline sewer system annually. Clean all lift and pumping stations twice a year. review emergency procedures and sewer use ordinances annually. Maintain problem areas, root cut and chemically treat areas of concern. Prioritize rehabilitation of mainline sewer and manholes based on inspections. Identify sources and areas of I & I.

Organization

Do you have the following written organizational elements (check only those that apply)?

- Ownership and governing body description
- Organizational chart
- Personnel and position descriptions
- Internal communication procedures
- Public information and education program

Legal Authority

Do you have the legal authority for the following (check only those that apply)?

- Sewer use ordinance Last Revised Date (MM/DD/YYYY)
- Pretreatment/industrial control Programs
- Fat, oil and grease control
- Illicit discharges (commercial, industrial)
- Private property clear water (sump pumps, roof or foundation drains, etc.)
- Private lateral inspections/repairs
- Service and management agreements

Maintenance Activities (provide details in question 2)

Design and Performance Provisions

How do you ensure that your sewer system is designed and constructed properly?

- State plumbing code
- DNR NR 110 standards
- Local municipal code requirements
- Construction, inspection, and testing
- Others:

Overflow Emergency Response Plan:

Does your emergency response capability include (check only those that apply)?

- Alarm system and routine testing
- Emergency equipment
- Emergency procedures
- Communications/notifications (DNR, internal, public, media, etc.)

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Capacity Assurance:

How well do you know your sewer system? Do you have the following?

- Current and up-to-date sewer map
- Sewer system plans and specifications
- Manhole location map
- Lift station pump and wet well capacity information
- Lift station O&M manuals

Within your sewer system have you identified the following?

- Areas with flat sewers
- Areas with surcharging
- Areas with bottlenecks or constrictions
- Areas with chronic basement backups or SSOs
- Areas with excess debris, solids, or grease accumulation
- Areas with heavy root growth
- Areas with excessive infiltration/inflow (I/I)
- Sewers with severe defects that affect flow capacity
- Adequacy of capacity for new connections
- Lift station capacity and/or pumping problems
- Annual Self-Auditing of your O&M/CMOM Program to ensure above components are being implemented, evaluated, and re-prioritized as needed
- Special Studies Last Year (check only those that apply):
 - Infiltration/Inflow (I/I) Analysis
 - Sewer System Evaluation Survey (SSES)
 - Sewer Evaluation and Capacity Management Plan (SECAP)
 - Lift Station Evaluation Report
 - Others:

0

2. Operation and Maintenance

2.1 Did your sanitary sewer collection system maintenance program include the following maintenance activities? Complete all that apply and indicate the amount maintained.

Cleaning	30.8	% of system/year
Root removal	2	% of system/year
Flow monitoring	0	% of system/year
Smoke testing	0	% of system/year
Sewer line televising	2	% of system/year
Manhole inspections	29.5	% of system/year
Lift station O&M	2	# per L.S./year
Manhole rehabilitation	1	% of manholes rehabbed
Mainline rehabilitation	1	% of sewer lines rehabbed
Private sewer inspections	1	% of system/year
Private sewer I/I removal	0	% of private services

Please include additional comments about your sanitary sewer collection system below:

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chemically treated an additional 1 mile of sanitary sewer for roots.

3. Performance Indicators

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

36.2	Total actual amount of precipitation last year in inches
32.41	Annual average precipitation (for your location)
72.3	Miles of sanitary sewer
8	Number of lift stations
0	Number of lift station failures
0	Number of sewer pipe failures
12	Number of basement backup occurrences
43	Number of complaints
1.1276	Average daily flow in MGD (if available)
1.3693	Peak monthly flow in MGD (if available)
	Peak hourly flow in MGD (if available)

3.2 Performance ratios for the past year:

0.00	Lift station failures (failures/year)
0.00	Sewer pipe failures (pipe failures/sewer mile/yr)
0.00	Sanitary sewer overflows (number/sewer mile/yr)
0.17	Basement backups (number/sewer mile)
0.59	Complaints (number/sewer mile)
1.2	Peaking factor ratio (Peak Monthly:Annual Daily Avg)
0.0	Peaking factor ratio (Peak Hourly:Annual Daily Avg)

4. Overflows

LIST OF SANITARY SEWER (SSO) AND TREATMENT FACILITY (TFO) OFERFLOWS REPORTED **

Date	Location	Cause	Estimated Volume (MG)
None reported			

** If there were any SSOs or TFOs that are not listed above, please contact the DNR and stop work on this section until corrected.

5. Infiltration / Inflow (I/I)

5.1 Was infiltration/inflow (I/I) significant in your community last year?

Yes

No

If Yes, please describe:

5.2 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?

Yes

No

If Yes, please describe:

During times of heavy precipitation plant would experience hydraulic loading requiring more operational changes.

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

Less occurrences of heavy precipitation and lower river levels.

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

I & I study planned for 2016 targeting suspected areas and interceptor.

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Grading Summary

WPDES No: 0020150

SECTIONS	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Influent	A	4	3	12
BOD/CBOD	A	4	10	40
TSS	A	4	5	20
Phosphorus	B	3	3	9
Biosolids	A	4	5	20
Staffing/PM	A	4	1	4
OpCert	A	4	1	4
Financial	A	4	1	4
Collection	A	4	3	12
TOTALS			32	125
GRADE POINT AVERAGE (GPA) = 3.91				

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)

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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 = A

Effluent Quality: TSS: Grade = A

Effluent Quality: Phosphorus: Grade = B

Biosolids Quality and Management: Grade = A

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. = 3.91

May 19, 2016

TO: Water & Sewage Committee

FROM: Kim Kriewald, Utility Superintendent

RE: Operations Report

Water & Sewer Operations & Water Recycling Operations aka Wastewater Operations

- Complete lab audit was done at the WWTP May 17, 2016. We should have the results in a month or two, but initial indications are that everything went well with no big deficiencies.
- Land application of biosolids started on available fields
- 2" water line broke at 6th & Park Street 5/18/16; repaired 5/19/16
- Gabe, Alex & Jared all passed the Nutrient Removal/Total Phosphorus certification exam to complete all wastewater requirements for the treatment plant.
- System cleaning of sanitary sewers continues; currently working on mid-town section of town
- Summer help has started
- Cleaning of water filter has been completed
- Cross connection inspections have been taking place with utility representative and HydroCorp
- Routine maintenance at WWTP continues
- Completed river crossing testing – all is well
- Station meters have been tested
- Continue to install radio read boxes
- Started to check and exercise mainline gates
- Started to maintain hydrants along with system flushing
- Worked on CMAR, CMOM and updated PBCU testing sites as per DNR requirements
- Attended MEG meeting to discuss potential changes to PSC regulations on billing and operations.

Respectfully submitted,


Kim Kriewald
Utilities Superintendent