



Control Number: 42955



Item Number: 8

Addendum StartPage: 0

42955



August 11, 2014

Dear Carol Moulton,

The City of Italy is responding to July 10, 2014 notice violation. Below is the regulated entity compliance with applicable requirements for wastewater treatment and a list of findings. Also, please make notice of a written description of corrective action taken to achieve compliance.

If you have any questions please contact me via email (dcarrell_pwd@italycityhall.org) office (972-483-6212) or cell phone (903-413-5606).

Thank You,

Dean Carrell

Public Works Director

RECEIVED
2014 SEP 26 AM 10:27
PUBLIC UTILITY COMMISSION
FILING CLERK

- Track #540063- Please see attachment (KSA)
- Track #540086- Please see attachment (KSA)

The City of Italy will come into agreement with KSA Engineering to bring the city into compliance on these matters.

8875 Synergy Drive
McKinney, TX 75070
972.542 2995



August 5, 2014

Mr. Dean Carrell
Public Works Director
City of Italy
101 W. Main Street
Italy, Texas 76657

RECEIVED AUG 07 2014

**Re: Compliance Plan
City of Italy
TCEQ ID No. 14195-001**

via email

Dear Mr. Carrell,

The Texas Commission on Environmental Quality (TCEQ) conducted an investigation of the City of Italy's wastewater collection and treatment systems on May 8, 2014 and May 20, 2014. Several alleged violations were identified during the investigation. The City of Italy has requested assistance from KSA to achieve compliance with alleged violations #540063 and #540086 only. All other alleged violations will be addressed directly by the City of Italy.

Alleged violation #540063 is related to unauthorized discharges from lift stations and the wastewater treatment plant. The preliminary plan is to rehabilitate the lift stations, possibly eliminate a lift station, and utilize an existing decommissioned pond as an equalization basin at the wastewater treatment plant. The following compliance schedule is proposed:

KSA Evaluation and Investigation	1 month
KSA Design of Improvements	3 months
TCEQ Review of Design	2 months
Construction of Improvements	6 months
Achieve Compliance	12 months

Based on this schedule and assuming that KSA receives the Notice to Proceed on September 1, 2014 compliance should be achieved by September 1, 2015.

Alleged violation #540086 is related to wastewater treatment plant deficiencies. Specifically, the facility did not have an operational bar screen, did not have approval to use the decommissioned pond, did not clean and disinfect the decommissioned pond, and did not have a fully functional all-weather access road. The preliminary

plan is for KSA to design a new manual bar screen. The City of Italy will stop using the decommissioned pond, clean and disinfect the decommissioned pond, and rehabilitate the access road. KSA will not be involved in the later items. The following compliance schedule is proposed:

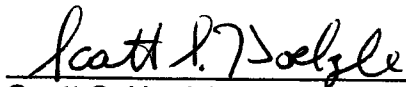
KSA Evaluation and Investigation	1 month
KSA Design of Improvements	1 month
TCEQ Review of Design	2 months
Construction of Improvements	2 months
Achieve Compliance	6 months

Based on this schedule and assuming that KSA receives the Notice to Proceed on September 1, 2014 compliance with the alleged bar screen violation should be achieved by March 1, 2015. It should be noted that the schedule for design and installation of a mechanical bar screen will be considerably longer.

We appreciate the opportunity to work on these projects with the City of Italy. If you have any questions, or need additional information, please let me know.

Sincerely,

KSA Engineers, Inc.



Scott S. Hoelzle, P. E.
Project Manager

File: ITL-007

RECEIVED AUG 07 2014

- Track #540067- Please see attached

7/1/2014 – 7/14/2014 for daily reading of totalizer.

- Track #540069-

Mr. Ken Wetson is no longer able to calibrate this type of flow meter (Lone Star).

Matt Bone at 1-800-234-0214 will be calibrating the flow device.

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	✓			
2-508 SW ST HWY 34	✓			
3-513 SW ST HWY 34	✓			
4-409 TAYLOR	✓			
5-405 MOSLEY	✓			
6-HWY 34	✓			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	745	1155	1744	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☐
NOTES:			
WASH DOWN BASINS		#1 YES ☐ NO ☐	DATE TIME: / /
		#1 YES ☐ NO ☐	DATE TIME: / /
DECANTERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
SLUDGE DEPTH:	BASIN #1:	BASIN #2:	BAR SCREENS CLEANED ☐ YES ☐ NO
CHLORINE RESIDUAL:	3.20	TIME: 8:15	CHLORINE POUNDS: 80
ACID (AFFECTS):	.04	TIME: 8:16	DIFFERENCE: 3.16 TIME: 8:18
TOTALIZER DISCHARGE FLOW GPD:	822422	RAIN (IN): 0	TEMP: 74
SLUDGE PRESS	ON ☒ OFF ☐		
SLUDGE BOX	EMPTY ☐ HALF ☒ FULL ☐		
ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		
	ALARM ON ☐ OFF ☒		
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

SIGNATURE DATE 7-1-14

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARL	✓			
2-508 SW ST HWY 34	✓			
3-513 SW ST HWY 34	✓			
4-409 TAYLOR	✓			
5-405 MOSLEY	✓			
6-HWY 34	✓			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	747	1655	1747	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☐
NOTES:			
WASH DOWN BASINS		#1 YES ☐ NO ☒	DATE TIME: / /
		#1 YES ☐ NO ☐	DATE TIME: / /
DECANTERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
SLUDGE DEPTH:	BASIN #1: _____	BASIN #2: _____	BAR SCREENS CLEANED ☐ YES ☐ NO
CHLORINE RESIDUAL:	3.60	TIME: 9:28	CHLORINE POUNDS: 65
ACID (AFFECTS):	.04	TIME: 9:24	DIFFERENCE: 3.56 TIME: 9:28
TOTALIZER DISCHARGE FLOW GPD:	840040	RAIN (IN): 0	TEMP: 75
SLUDGE PRESS	ON ☒ OFF ☐		
SLUDGE BOX	EMPTY ☐ HALF ☒ FULL ☐		
ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		
ALARM	ON ☐ OFF ☒		
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

SIGNATURE G. T. DATE 7-2-14

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WALD	/			
2-508 SW ST HWY 34	/			
3-513 SW ST HWY 34	/			
4-408 TAYLOR	/			
5-405 MOSLEY	/			
6-HWY 34	/			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	750	1653	1751	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
WASH DOWN BASINS		#1 YES ☐ NO ☒	DATE TIME: / /
DECANTERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
SLUDGE DEPTH:	BASIN #1:	BASIN #2:	BAR SCREENS CLEANED ☒ YES ☐ NO
CHLORINE RESIDUAL:	3.6	TIME: 8:45	CHLORINE POUNDS: 45
ACID (AFFECTS):	.03	TIME: 8:50	DIFFERENCE: 3.57 TIME: 8:51
TOTALIZER DISCHARGE FLOW GPD:	859714		RAIN (IN): 0 TEMP: 80
SLUDGE PRESS	ON ☐ OFF ☒		
SLUDGE BOX	EMPTY ☐ HALF ☒ FULL ☐		
ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		ALARM ON ☐ OFF ☒
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

J.C. J.T. 7/3/14
 SIGNATURE DATE

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	☒			
2-508 SW ST HWY 34	☒			
3-513 SW ST HWY 34	☒			
4-409 TAYLOR	☒			
5-405 MOSLEY	☒			
6-HWY 34	☒			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	758	1655	1765	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
WASH DOWN BASINS	#1 YES ☐ NO ☒	DATE TIME: / /	#1 YES ☐ NO ☒
DECANTERS			
		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
SLUDGE DEPTH:	BASIN #1: /	BASIN #2: /	BAR SCREENS CLEANED ☒ YES ☐ NO
CHLORINE RESIDUAL:	2.06	TIME: 9:00	CHLORINE POUNDS: 91
ACID (AFFECTS):	.03	TIME: 9:01	DIFFERENCE: 2.03 TIME: 9.03
TOTALIZER DISCHARGE FLOW GPD:	917471		
RAIN (IN):	TEMP: 74		
SLUDGE PRESS	ON ☒ OFF ☐		
SLUDGE BOX	EMPTY ☐ HALF ☒ FULL ☐		
ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		
ALARM	ON ☐ OFF ☒		
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

SIGNATURE G. T. Lopez DATE 7-7-14

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	☒			
2-508 SW ST HWY 34	☒			
3-513 SW ST HWY 34	☒			
4-409 TAYLOR	☒			
5-405 MOSLEY	☒			
6-HWY 34	☒			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	760	1655	1768	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
WASH DOWN BASINS		#1 YES ☐ NO ☒	DATE: / /
			#1 YES ☐ NO ☒
DECANTERS		#1 ON ☒ OFF ☐	#2 ON ☐ OFF ☒
NOTES:			
SLUDGE DEPTH:	BASIN #1:	BASIN #2:	BAR SCREENS CLEANED ☒ YES ☐ NO
CHLORINE RESIDUAL:	1.69	TIME: 8:45	CHLORINE POUNDS:
ACID (AFFECTS):	.03	TIME: 8:46	DIFFERENCE: 1.66 TIME: 8:49
TOTALIZER DISCHARGE FLOW GPD:	930322	RAIN (IN):	0 TEMP: 77
SLUDGE PRESS	ON ☒ OFF ☐		
SLUDGE BOX	EMPTY ☐ HALF ☒ FULL ☐		
ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		
ALARM	ON ☐ OFF ☒		
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

SIGNATURE 3/T DATE 7/8/14

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	✓			
2-508 SW ST HWY 34	✓			
3-513 SW ST HWY 34	✓			
4-408 TAYLOR	✓			
5-405 MOSLEY	✓			
6-HWY 34	✓			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	764	1185	1766	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☒ OFF ☐	#2 ON ☐ OFF ☐
NOTES:			
WASH DOWN BASINS	#1 YES ☐ NO ☐	DATE TIME	#1 YES ☐ NO ☐ DATE TIME
DECANTERS		#1 ON ☐ OFF ☐	#2 ON ☐ OFF ☐
NOTES:			
SLUDGE DEPTH:	BASIN #1:	BASIN #2:	BAR SCREENS CLEARED ☒ YES ☐ NO
CHLORINE RESIDUAL:	1.77	TIME: 8:41	CHLORINE POUNDS: 83
ACID (AFFECTS):	.03	TIME: 8:42	DIFFERENCE: 1.74 TIME: 8:44
TOTALIZER DISCHARGE FLOW GPD:	923611	RAIN (IN): 0	TEMP: 72
SLUDGE PRESS	ON ☒ OFF ☐		
SLUDGE BOX	EMPTY ☐ HALF ☒ FULL ☐		
ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		
ALARM	ON ☐ OFF ☒		
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

J.T. 7/9/14

SIGNATURE **DATE**

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	✓			
2-508 SW ST HWY 34	✓			
3-513 SW ST HWY 34	✓			
4-409 TAYLOR	✓			
5-405 MOSLEY	✓			
6-HWY 34	✓			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	763	1655	1774	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☒ OFF ☐	#2 ON ☐ OFF ☒
NOTES:			
WASH DOWN BASINS	#1 YES ☐ NO ☒	DATE TIME: / /	#1 YES ☐ NO ☒
DECANTERS			
#1 ON ☐ OFF ☒		#2 ON ☐ OFF ☒	
NOTES:			
SLUDGE DEPTH:	BASIN #1: _____	BASIN #2: _____	BAR SCREENS CLEANED ☐ YES ☐ NO
CHLORINE RESIDUAL:	1.93	TIME: 8:25	CHLORINE POUNDS: 79
ACID (AFFECTS):	04	TIME: 4:02	DIFFERENCE: 1.77 TIME: 1:28
TOTALIZER DISCHARGE FLOW GPD:	954624	RAIN (IN):	TEMP: 77
SLUDGE PRESS	ON ☐ OFF ☒		
SLUDGE BOX	EMPTY ☐ HALF ☒ FULL ☐		
ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		
ALARM	ON ☐ OFF ☒		
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

G.T. 7/10/14

SIGNATURE

DATE

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	✓			
2-508 SW ST HWY 34	✓			
3-513 SW ST HWY 34	✓			
4-409 TAYLOR	✓			
5-405 MOSLEY	✓			
6-HWY 34	✓			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	768	16.58	1776	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☒ OFF ☐
NOTES:			
WASH DOWN BASINS		#1 YES ☐ NO ☒	DATE TIME: / /
		#1 YES ☐ NO ☒	DATE TIME: / /
DECANTERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
SLUDGE DEPTH:	BASIN #1:	BASIN #2:	BAR SCREENS CLEANED ☒ YES ☐ NO
CHLORINE RESIDUAL:	1.89	TIME: 7:55	CHLORINE POUNDS: 64
ACID (AFFECTS):	.05	TIME: 7:56	DIFFERENCE: 1.96 TIME: 7:59
TOTALIZER DISCHARGE FLOW GPD:	969108	RAIN (IN): /	TEMP: 68
SLUDGE PRESS	ON ☐ OFF ☒		
SLUDGE BOX	EMPTY ☐ HALF ☒ FULL ☐		
ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		
ALARM	ON ☐ OFF ☒		
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

SIGNATURE

DATE

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	✓			
2-508 SW ST HWY 34	✓			
3-513 SW ST HWY 34	✓			
4-409 TAYLOR	✓			
5-405 MOSLEY	✓			
6-HWY 34	✓			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	768	1655	1779	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
WASH DOWN BASINS		#1 YES ☐ NO ☒	DATE TIME: / /
DECANTERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
SLUDGE DEPTH:	BASIN #1:	BASIN #2:	BAR SCREENS CLEANED ☒ YES ☐ NO
CHLORINE RESIDUAL:	1.30	TIME: 11:00	CHLORINE POUNDS: 52
ACID (AFFECTS):	.03	TIME: 11:06	DIFFERENCE: 1.27 TIME: 11:09
TOTALIZER DISCHARGE FLOW GPD: 975,521		RAIN (IN): 0	TEMP: 78°
SLUDGE PRESS ON ☐ OFF ☒			
SLUDGE BOX EMPTY ☐ HALF ☒ FULL ☐ ROLL OFF CHANGE:			
CHANGE FLOW CHART:			
SCADA ON ☒ OFF ☐		ALARM ON ☐ OFF ☒	
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

SIGNATURE J. T. DATE 7/12/14

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	✓			
2-508 SW ST HWY 34	✓			
3-513 SW ST HWY 34	✓			
4-409 TAYLOR	✓			
5-405 MOSLEY	✓			
6-HWY 34	✓			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	768	1655	1781	

WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
WASH DOWN BASINS	#1 YES ☐ NO ☒	DATE TIME: / /	#1 YES ☐ NO ☒
DECANTERS			
#1 ON ☐ OFF ☒		#2 ON ☐ OFF ☒	
NOTES:			
SLUDGE DEPTH:	BASIN #1:	BASIN #2:	BAR SCREENS CLEANED ☒ YES ☐ NO
CHLORINE RESIDUAL:	1.18	TIME: 10:15	CHLORINE POUNDS: 150
ACID (AFFECTS):	04	TIME: 10:06	DIFFERENCE: 1.15 TIME: 10:08
TOTALIZER DISCHARGE FLOW GPD:	879471	RAIN (IN): 0	TEMP: 71
SLUDGE PRESS	ON ☐ OFF ☒		
SLUDGE BOX	EMPTY ☐ HALF ☐ FULL ☒		ROLL OFF CHANGE:
CHANGE FLOW CHART:			
SCADA	ON ☒ OFF ☐		ALARM ON ☐ OFF ☒
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:

SIGNATURE J. T. DATE 7-13-14

**CITY OF ITALY
WASTEWATER DEPT
DAILY ROUNDS**

LIFTSTATIONS

	PUMP 1	PUMP 2	ALARM	NOTE
1-221 N WARD	✓			
2-508 SW ST HWY 34	✓			
3-513 SW ST HWY 34	✓			
4-409 TAYLOR	✓			
5-405 MOSLEY	✓			
6-HWY 34	✓			
	PUMP 1	PUMP 2	PUMP 3	NOTE
7-MASTER LIFT	769	1633	1784	

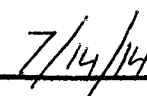
WASTEWATER TREATMENT PLANT

BLOWERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☐
NOTES:			
WASH DOWN BASINS		#1 YES ☐ NO ☒ DATE TIME: / /	#1 YES ☐ NO ☒ DATE TIME: / /
DECANTERS		#1 ON ☐ OFF ☒	#2 ON ☐ OFF ☒
NOTES:			
SLUDGE DEPTH:	BASIN #1:	BASIN #2:	BAR SCREENS CLEANED ☒ YES ☐ NO
CHLORINE RESIDUAL:	3.12	TIME: 7:30	CHLORINE POUNDS: 150
ACID (AFFECTS):	.02	TIME: 7:35	DIFFERENCE: 3.1 TIME: 7:36
TOTALIZER DISCHARGE FLOW GPD:		993964	RAIN (IN): 0 TEMP: 85
SLUDGE PRESS		ON ☐ OFF ☒	
SLUDGE BOX		EMPTY ☐ HALF ☒ FULL ☐ ROLL OFF CHANGE:	
CHANGE FLOW CHART:			
SCADA		ON ☒ OFF ☐ ALARM ON ☐ OFF ☒	
NOTES:			

KEEP ALL OF WWTP CLEAN AND MOWED

I HAVE READ AND UNDERSTAND ALL DUTIES ASSIGNED:


 SIGNATURE


 DATE



FLOWMETER CALIBRATION

DATE	6-30-14
CUSTOMER	Italy wastewater
METER LOCATION	Effluent weir
MANUFACTURER & MODEL NUMBER	Eastech vantage 2210
SERIAL NUMBER	N/A
WEIR TYPE	9" Parshall
MEASUREMENT IN INCHES	1.13
GALLONS PER MINUTE	36 gpm
FLOWMETER READING	38 gpm
ADJUSTMENTS MADE	None
REMARKS	

THIS IS TO CERTIFY THAT THE METER HAS BEEN CALIBRATED TO MEET OR EXCEED THE MINIMUM STANDARDS SET BY THE MANUFACTURER.

MA B
SERVICE TECHNICIAN

LONESTAR MAINTENANCE & SERVICE INC., PO BOX 519, LORENA, TX 76655 - 800-234-0214

- Track #540085 – Please see attached Sludge Reports 2011-2012-2013

Submitted
online
8.15.12

GENERATOR/MAILING ADDRESS FOR ORIGINAL

City of Italy			
Name			
P.O. Box 144			
Address			
Italy	TX	76051	
City	State	Zip	
Head Chambers	972-463-6212		
Contact	Phone		

105086



NON-HAZARDOUS WASTE MANIFEST

Landfill Permit # W-11111
Location AVALON, TX

GENERATOR CERTIFICATE: I, as a representative of City of Italy
certify that this shipment consists of _____ cubic yards/tons of
non-hazardous Waste water treatment plant (name of waste material) and
is classified as follows:

- ☐ Non-hazardous petroleum contaminated soils, Waste Code Number _____
- ☐ Non-hazardous Municipal Special Waste
- ☐ Non-hazardous industrial waste. If generated in Texas, it is a Class II waste assigned Waste Code Number _____
- ☐ Non-hazardous Railroad Commission Regulated waste from _____ facility or pit,
- ☐ Wastewater treatment plant, septic tank, grease trap, or grit trap waste from _____ facility or location, or
City of Italy waste water treatment plant
- ☐ Other, explain: Job # 030508044

GENERATOR		
Printed/Typed Name	Signature	Date Shipped Month Day Year
TRANSPORTER		
Printed/Typed Name	Signature	Date Shipped Month Day Year
LANDFILL OPERATOR CERTIFICATE OF RECEIPT OF WASTE		
Printed/Typed Name	Signature	Date Shipped Month Day Year

DO NOT SEPARATE FORM UNTIL ALL SIGNATURES ARE COMPLETED AND
WASTE HAS BEEN RECEIVED BY LANDFILL AND SIGNED BY LANDFILL OPERATOR.

GENERATOR/MAILING ADDRESS FOR ORIGINAL

City of Italy	
P.O. Box 840	Name
Italy	Address TX 76651
Brad Chambers	City State Zip 972-483-6212
Contact	Phone

DEC 07 2011
CITY OF ITALY 105088



REPUBLIC

SERVICES, INC.

1-800-256-9278

1209 B

Landfill Permit #

CSC - AVALON, TX

Location

NON-HAZARDOUS WASTE MANIFEST

GENERATOR CERTIFICATE: I, as a representative of City of Italy
 certify that this shipment consists of 20 cubic yards/tons of
Waste water treatment sludge (name of waste material) and
 non-hazardous
 is classified as follows:

- ☐ Non-hazardous petroleum contaminated soils, Waste Code Number _____
- ☐ Non-hazardous Municipal Special Waste
- ☐ Non-hazardous industrial waste. If generated in Texas, it is a Class II waste assigned Waste Code Number _____
- ☐ Non-hazardous Railroad Commission Regulated waste from _____ facility or pit,
- ☐ Wastewater treatment plant, septic tank, grease trap, or grit trap waste from _____ facility or location, or
City of Italy waste water treatment plant
- ☐ Other, explain: Job # 0305080844 3415116492

GENERATOR		
Printed/Typed Name <u>Steven Galvan</u>	Signature <u>[Signature]</u>	Date Shipped Month Day Year <u>10 7 11</u>
TRANSPORTER		
Printed/Typed Name <u>Timothy D. S. I. [Signature]</u>	Signature <u>[Signature]</u>	Date Shipped Month Day Year <u>10 - 24 11</u>
LANDFILL OPERATOR CERTIFICATE OF RECEIPT OF WASTE		
Printed/Typed Name <u>B. Gattlin</u>	Signature <u>[Signature]</u>	Date Shipped Month Day Year <u>10 24 11</u>

DO NOT SEPARATE FORM UNTIL ALL SIGNATURES ARE COMPLETED AND
 WASTE HAS BEEN RECEIVED BY LANDFILL AND SIGNED BY LANDFILL OPERATOR.

50380

GENERATOR/MAILING ADDRESS FOR ORIGINAL

City of Italy	
P.O. Box 840	Name
Italy	TX Address 76651
Brad Chambers	State 972-483-6212
Contact	Phone

DEC 10 2011 CITY OF ITALY 105090



REPUBLIC

SERVICES, INC.

1-800-256-9278

1209 B

Landfill Permit #

CSC - AVALON, TX

Location

NON-HAZARDOUS WASTE MANIFEST

GENERATOR CERTIFICATE: I, as a representative of City of Italy
 certify that this shipment consists of 20 cubic yards/tons of
Waste water treatment sludge (name of waste material) and
 non-hazardous _____
 is classified as follows:

- ☐ Non-hazardous petroleum contaminated soils, Waste Code Number _____
- ☐ Non-hazardous Municipal Special Waste
- ☐ Non-hazardous industrial waste. If generated in Texas, it is a Class II waste assigned Waste Code Number _____
- ☐ Non-hazardous Railroad Commission Regulated waste from _____ facility or pit.
- ☐ Wastewater treatment plant, septic tank, grease trap, or grit trap waste from _____ facility or location, or
City of Italy waste water treatment plant
- ☐ Other, explain: ~~45200~~ Job # 3415116492

GENERATOR

Printed/Typed Name	Signature	Date Shipped
Steven Galvan	<i>SG</i>	Month Day Year 10 24 11

TRANSPORTER

Printed/Typed Name	Signature	Date Shipped
<i>Jimmy Del</i>	<i>DCS</i>	Month Day Year 10 24 11

LANDFILL OPERATOR CERTIFICATE OF RECEIPT OF WASTE

Printed/Typed Name	Signature	Date Shipped
B Gatlin	<i>B Gatlin</i>	Month Day Year 10 24 11

DO NOT SEPARATE FORM UNTIL ALL SIGNATURES ARE COMPLETED AND
 WASTE HAS BEEN RECEIVED BY LANDFILL AND SIGNED BY LANDFILL OPERATOR.

45200

GENERATOR/MAILING ADDRESS FOR ORIGINAL

DEC 28 2011
CITY OF ITALY

105094

City of Italy	
P.O. Box 840	Name
Italy	Address TX 76651
Brad Chambers	State 972-483-6212
Contact	Phone


REPUBLIC
SERVICES, INC.
1-800-256-9278
1209 B

Landfill Permit #
CSC - AVALON, TX
Location

NON-HAZARDOUS WASTE MANIFEST

GENERATOR CERTIFICATE: I, as a representative of City of Italy
certify that this shipment consists of 20 cubic yards/tons of
Waste water treatment sludge (name of waste material) and
non-hazardous
is classified as follows:

- ☐ Non-hazardous petroleum contaminated soils, Waste Code Number _____
- ☐ Non-hazardous Municipal Special Waste
- ☐ Non-hazardous industrial waste. If generated in Texas, it is a Class II waste assigned Waste Code Number _____
- ☐ Non-hazardous Railroad Commission Regulated waste from _____ facility or pit,
- ☐ Wastewater treatment plant, septic tank, grease trap, or grit trap waste from _____ facility or location, or
City of Italy waste water treatment plant
- ☐ Other, explain: Job # 1030508084A Job # 3415111649Z

GENERATOR		
Printed/Typed Name <u>Steven Galvan</u>	Signature <u>SG</u>	Date Shipped Month Day Year <u>12 19 11</u>
TRANSPORTER		
Printed/Typed Name <u>DCI Transport Services, Inc.</u>	Signature <u>[Signature]</u>	Date Shipped Month Day Year <u>12 26 11</u>
LANDFILL OPERATOR CERTIFICATE OF RECEIPT OF WASTE		
Printed/Typed Name <u>B Gatlin</u>	Signature <u>[Signature]</u>	Date Shipped Month Day Year <u>12 28 11</u>

DO NOT SEPARATE FORM UNTIL ALL SIGNATURES ARE COMPLETED AND
WASTE HAS BEEN RECEIVED BY LANDFILL AND SIGNED BY LANDFILL OPERATOR.

GENERATOR/MAILING ADDRESS FOR ORIGINAL

105093

City of Italy	
P.O. Box 840	Name
Italy	Address TX 76651
Brad Chambers	State 972-483-6212
Dean Carroll	Phone

FEB 14 2012
CITY OF ITALY



Landfill Permit #
CSC - AVALON, TX
Location

NON-HAZARDOUS WASTE MANIFEST

GENERATOR CERTIFICATE: I, as a representative of City of Italy
 certify that this shipment consists of 20 cubic yards/tons of
Waste water treatment sludge (name of waste material) and
 non-hazardous _____
 is classified as follows:

- ☐ Non-hazardous petroleum contaminated soils, Waste Code Number _____
- ☐ Non-hazardous Municipal Special Waste
- ☐ Non-hazardous industrial waste. If generated in Texas, it is a Class II waste assigned Waste Code Number _____
- ☐ Non-hazardous Railroad Commission Regulated waste from _____ facility or pit.
- ☐ Wastewater treatment plant, septic tank, grease trap, or grit trap waste from _____ facility or location, or _____
- ☐ Other, explain: _____

Job # ~~0305080844~~ 34151116492

GENERATOR		
Printed/Typed Name	Signature	Date Shipped Month Day Year
Justyn Henderson	<i>Justyn Henderson</i>	2 8 12
TRANSPORTER		
Printed/Typed Name	Signature	Date Shipped Month Day Year
Danny Booth	<i>Danny Booth</i>	Feb 09 12
LANDFILL OPERATOR CERTIFICATE OF RECEIPT OF WASTE		
Printed/Typed Name	Signature	Date Shipped Month Day Year
Patsy McGraw	<i>Patsy McGraw</i>	2 9 12

DO NOT SEPARATE FORM UNTIL ALL SIGNATURES ARE COMPLETED AND
 WASTE HAS BEEN RECEIVED BY LANDFILL AND SIGNED BY LANDFILL OPERATOR.

GENERATOR/MAILING ADDRESS FOR ORIGINAL

City of Italy	
P.O. Box 840	Name
Italy	Address TX 76651
State 972-483-6212	City
Phone	Contact

105091
RECEIVED APR 13 2012



REPUBLIC

SERVICES, INC.

1-800-256-9278
1209 B

Landfill Permit #
CSC-AVALON, TX
Location

NON-HAZARDOUS WASTE MANIFEST

GENERATOR CERTIFICATE: I, as a representative of City of Italy
certify that this shipment consists of 20 cubic yards/tons of
Waste water treatment sludge (name of waste material) and
non-hazardous
is classified as follows:

- ☐ Non-hazardous petroleum contaminated soils, Waste Code Number _____
- ☐ Non-hazardous Municipal Special Waste
- ☐ Non-hazardous industrial waste. If generated in Texas, it is a Class II waste assigned Waste Code Number _____
- ☐ Non-hazardous Railroad Commission Regulated waste from _____ facility or pit,
- ☐ Wastewater treatment plant, septic tank, grease trap, or grit trap waste from _____ facility or location, or
City of Italy waste water treatment plant
- ☐ Other, explain: Job # 0305080844 34151116472

GENERATOR		
Printed/Typed Name <u>Justyn Henderson</u>	Signature <u>Justyn Henderson</u>	Date Shipped Month Day Year <u>3 27 2012</u>
TRANSPORTER		
Printed/Typed Name <u>Jimmy Hollingsworth</u>	Signature <u>Jimmy Hollingsworth</u>	Date Shipped Month Day Year <u>3 30 12</u>
LANDFILL OPERATOR CERTIFICATE OF RECEIPT OF WASTE		
Printed/Typed Name <u>B Gattin</u>	Signature <u>B Gattin</u>	Date Shipped Month Day Year <u>3 30 12</u>

DO NOT SEPARATE FORM UNTIL ALL SIGNATURES ARE COMPLETED AND
WASTE HAS BEEN RECEIVED BY LANDFILL AND SIGNED BY LANDFILL OPERATOR.

REPUBLIC SERVICES, INC.
NON-HAZARDOUS WASTE MANIFEST

0782621

1. Generator's US EPA ID Number N/A		Manifest Document Number 1		2. Page 1 of	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 78651			5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 78651		
4. Phone () 972.483.6212		6. Phone ()		9. Transporter #1's Phone	
7. Transporter #1 Company Name		8. US EPA ID Number N/A		12. Transporter #2's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		15. Facility's Phone 254-887-2511	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 58 ITASCA, TEXAS 78055		14. US EPA ID Number N/A		18. Containers	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		19. Total Quantity	
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		20. Unit Wt/Vol FY	
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above					
RECEIVED MAY 29 2012					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 8050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name <i>Justin Henderson</i>				Signature <i>Justin Henderson</i>	
24. Transporter #1: Acknowledgement of Receipt of Materials				Month Day Year 5 3 12	
Printed/Typed Name <i>Timmy Holcomb</i>				Signature <i>Timmy Holcomb</i>	
25. Transporter #2: Acknowledgement of Receipt of Materials				Month Day Year 4 3 12	
Printed/Typed Name				Signature	
26. Discrepancy Indication Space 19) 20 yd 7.1 DCF Sanitation 689/115					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)					
Printed/Typed Name <i>Jessie Smith</i>				Signature <i>Jessie Smith</i>	
Month Day Year 5 3 12					

ORIGINAL - RETURN TO GENERATOR

DCI Rollout



NON-HAZARDOUS WASTE MANIFEST

0782612

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 76651			5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 76651		
4. Phone () 972.483.6212		6. Phone ()		9. Transporter #1's Phone	
7. Transporter #1 Company Name DCI Sanitation		8. US EPA ID Number N/A		12. Transporter #2's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		15. Facility's Phone 254-897-2511	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2553 FM 88 ITASCA TEXAS 76055		14. US EPA ID Number N/A		16. Waste Shipping Name and Description	
16. Waste Shipping Name and Description a. Waste Water Treatment Sludge		17. Allied Waste Approval # and Exp. Date APPROVAL # 5110125440 EXP DATE: 10/10/14		18. Containers No. Type 1 CM	
b.				19. Total Quantity	
c.				20. Unit Wt/Vol FY	
d.					
21. Additional Descriptions for Materials Listed Above RECEIVED JUN 06 2012 H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 8050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name Justin Henderson		Signature <i>Justin Henderson</i>		Month Day Year 5 30 12	
24. Transporter #1: Acknowledgement of Receipt of Materials		Signature <i>James Henderson</i>		Month Day Year 5 31 12	
Printed/Typed Name James Henderson		Signature		Month Day Year	
25. Transporter #2: Acknowledgement of Receipt of Materials		Signature		Month Day Year	
Printed/Typed Name					
26. Discrepancy Indication Space					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL 7.75K					
Printed/Typed Name Erica Williams		Signature <i>Erica Williams</i>		Month Day Year 5 31 12	

ORIGINAL - RETURN TO GENERATOR

RO 51,240



NON-HAZARDOUS WASTE MANIFEST

0782620

1. Generator's US EPA ID Number N/A		Manifest Document Number 1		2. Page 1 of	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 78651			5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 78651		
4. Phone () 972.483.6212		6. Phone ()		8. US EPA ID Number N/A	
7. Transporter #1 Company Name DCT Sanitation		10. Transporter #2 Company Name DCT Sanitation		9. Transporter #1's Phone	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 58 ITASCA, TEXAS 78055		14. US EPA ID Number N/A		12. Transporter #2's Phone	
16. Waste Shipping Name and Description a. Waste Water Treatment Sludge		17. Allied Waste Approval # and Exp. Date APPROVAL # 5110125440 EXP DATE: 10/10/14		15. Facility's Phone 254-887-2511	
b.				18. Containers No. Type	
c.				19. Total Quantity	
d.				20. Unit Wt/Vol	
21. Additional Descriptions for Materials Listed Above				FY	
22. Special Handling Instructions and Additional Information		RECEIVED JUL 11 2012			
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name Justyn Henderson		Signature <i>Justyn Henderson</i>		Month Day Year 7 3 12	
24. Transporter #1: Acknowledgement of Receipt of Materials		Signature <i>Jeremie Grant</i>		Month Day Year 7 3 12	
25. Transporter #2: Acknowledgement of Receipt of Materials		Signature <i>Jeremie Grant</i>		Month Day Year 7 3 12	
26. Discrepancy Indication Space 19) 10yd				9.35tn	
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19)					
ITASCA LANDFILL		Signature <i>Kathy Simmonds</i>		Month Day Year 7 8 12	

ORIGINAL - RETURN TO GENERATOR

RECEIVED
RECEIVED

19 2012

REPUBLIC
SERVICES, INC.

NON-HAZARDOUS WASTE MANIFEST

0782619

1. Generator's US EPA ID Number N/A		Manifest Document Number 1		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 78851				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 78851	
4. Phone () 972.483.6212		8. US EPA ID Number N/A		9. Transporter #1's Phone 972-977-3416	
7. Transporter #1 Company Name DCT Sanitation		11. US EPA ID Number		12. Transporter #2's Phone 972-977-3416	
10. Transporter #2 Company Name DCT Sanitation		14. US EPA ID Number N/A		15. Facility's Phone 254-887-2511	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 88 ITASCA TEXAS 78055		17. Allied Waste Approval # and Exp. Date APPROVAL # 5110125440 EXP DATE: 10/10/14		18. Containers No. Type 1 CM	
16. Waste Shipping Name and Description a. Waste Water Treatment Sludge		19. Total Quantity FY		20. Unit Wt/Vol FY	
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste. Printed/Typed Name: Justin Henderson Signature: [Signature] Month: 7 Day: 9 Year: 12					
24. Transporter #1: Acknowledgement of Receipt of Materials Printed/Typed Name: Jeramie Grant Signature: [Signature] Month: 7 Day: 9 Year: 12					
25. Transporter #2: Acknowledgement of Receipt of Materials Printed/Typed Name: Jeramie Grant Signature: [Signature] Month: 7 Day: 9 Year: 12					
26. Discrepancy Indication Space 19) 204ds 8.49 tons					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) Printed/Typed Name: Kim Woods Signature: [Signature] Month: 7 Day: 9 Year: 12					

ORIGINAL - RETURN TO GENERATOR



NON-HAZARDOUS WASTE MANIFEST

0782613

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 78651			5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 78651		
4. Phone () 972.483.6212			6. Phone ()		9. Transporter #1's Phone 972-977-3416
7. Transporter #1 Company Name DCF Sanitation		8. US EPA ID Number N/A		12. Transporter #2's Phone 972-646-3462	
10. Transporter #2 Company Name DCF Sanitation		11. US EPA ID Number		15. Facility's Phone 254-887-2511	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 68 ITASCA, TEXAS 78055		14. US EPA ID Number N/A			
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		18. Containers	19. Total Quantity
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		No. 1	Type CM
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above		H132			
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050		RECEIVED JUL 19 2012			
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name Justyn Henderson		Signature <i>Justyn Henderson</i>		Month Day Year 7/13/12	
24. Transporter #1: Acknowledgement of Receipt of Materials		Signature <i>Jeremie Grant</i>		Month Day Year 7/13/12	
Printed/Typed Name Jeremie Grant		Signature <i>Jeremie Grant</i>		Month Day Year 7/13/12	
25. Transporter #2: Acknowledgement of Receipt of Materials		Signature <i>Jeremie Grant</i>		Month Day Year 7/13/12	
Printed/Typed Name Jeremie Grant		Signature <i>Jeremie Grant</i>		Month Day Year 7/13/12	
26. Discrepancy Indication Space 10 yds		8.63 tons			
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL		Signature <i>Jessica Smith</i>		Month Day Year 7/13/12	
Printed/Typed Name Jessica Smith		Signature <i>Jessica Smith</i>		Month Day Year 7/13/12	

ORIGINAL - RETURN TO GENERATOR

RECEIVED AUG 02 2012



NON-HAZARDOUS WASTE MANIFEST

0782618

1. Generator's US EPA ID Number N/A		Manifest Document Number 1		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 78651			5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 78651		
4. Phone () 972.483.6212		6. Phone ()		9. Transporter #1's Phone	
7. Transporter #1 Company Name		8. US EPA ID Number N/A		12. Transporter #2's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		15. Facility's Phone 254-687-2511	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2550 FM 66 ITASCA, TEXAS 78055		14. US EPA ID Number N/A		18. Containers	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		19. Total Quantity	
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		20. Unit Wt/Vol FY	
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above				H132	
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste. Printed/Typed Name: Justyn Henderson Signature: [Signature] Month: 7 Day: 19 Year: 12					
24. Transporter #1: Acknowledgement of Receipt of Materials Printed/Typed Name: Signature: Month: Day: Year:					
25. Transporter #2: Acknowledgement of Receipt of Materials Printed/Typed Name: Signature: Month: Day: Year:					
26. Discrepancy Indication Space 19,10 yds 2 DC Sanitation					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL Printed/Typed Name: Erica Williams Signature: [Signature] Month: Day: Year: 5.56 to 11/11/12					

ORIGINAL - RETURN TO GENERATOR

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RECEIVED AUG 16 2012

NON-HAZARDOUS WASTE MANIFEST

0782617

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 76651				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 76651	
4. Phone () 972.483.6212		6. Phone ()		9. Transporter #1's Phone 972-646-5462	
7. Transporter #1 Company Name DCI Sanitation		8. US EPA ID Number N/A		12. Transporter #2's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		15. Facility's Phone 254-897-2511	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2558 FM 88 ITASCA, TEXAS 76055		14. US EPA ID Number N/A		16. Waste Shipping Name and Description	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		18. Containers	
				19. Total Quantity	
				20. Unit Wt/Vol	
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		1	
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name Justin Henderson		Signature Justin Henderson		Month Day Year 8 3 12	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name Jeramie Grant		Signature Jeramie Grant		Month Day Year 8 3 12	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space 19-1) 10 yds					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL					
Printed/Typed Name Erica Williams		Signature Erica Williams		Month Day Year 8 29 12	

ORIGINAL - RETURN TO GENERATOR

DC 1 3000



43,120

NON-HAZARDOUS WASTE MANIFEST

0782616

Please print or type

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 76851				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 76851	
4. Phone () 972.483.6212		6. Phone ()		9. Transporter #1's Phone 972-646-5461	
7. Transporter #1 Company Name DCI SANITATION		8. US EPA ID Number N/A		12. Transporter #1's Name	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Name	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 56 ITASCA TEXAS 76055		14. US		20. Unit Wt/Vol FY	
16. Waste Shipping Name and Description a. Waste Water Treatment Sludge		17. Allied V APF EXP		2012	
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050 RECEIVED 11/12/12					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name Jacob Hopkins		Signature <i>Jacob Hopkins</i>		Month Day Year 11 12 12	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name Jeramie GRANT		Signature <i>Jeramie Grant</i>		Month Day Year 11 12 12	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space 19-A) 70 yds					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL 5.34 tn					
Printed/Typed Name Erica Williams		Signature <i>Erica Williams</i>		Month Day Year 11 12 12	

ORIGINAL - RETURN TO GENERATOR

DCI 300

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REPUBLIC

52,000

NON-HAZARDOUS WASTE MANIFEST

0782615

RECEIVED FEB 26 2013

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Itasca 418 Clark St. Itasca, TX 75651			5. Generating Location (if different) City of Itasca 418 Clark St. Itasca, TX 75651		
4. Phone () 872.493.6242		6. Phone ()			
7. Transporter #1 Company Name		8. US EPA ID Number		9. Transporter #1's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated TSD Facility Name and Site Address ITASCA LANDFILL		14. US EPA ID Number		15. Facility's Phone	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		18. Containers	
a. Waste Water Treatment Sludge		APPROVAL # 5170.25440 EXP DATE 10/10/14		19. Total Quantity 15 yd	
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above 4432					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Itasca CUSTOMER # 9050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste					
Printed/Typed Name Jacob Hopkins		Signature <i>[Signature]</i>		Month Day Year 2 11 13	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name Sankie Winchester		Signature <i>[Signature]</i>		Month Day Year 2 11 13	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space 7.1 DCI Waste System 9.62 tons					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL					
Printed/Typed Name Kim Woods		Signature <i>[Signature]</i>		Month Day Year 2 11 13	

ORIGINAL - RETURN TO GENERATOR

34

DCI #300

R-0



41720

NON-HAZARDOUS WASTE MANIFEST

0782614

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1			
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 76651				5. Generating Location (if different) City of Italy 101 W. Main Italy TX 76651			
4. Phone () 972.483.6212				6. Phone ()			
7. Transporter #1 Company Name DCI Sanitation		8. US EPA ID Number N/A		9. Transporter #1's Phone			
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone			
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2550 FM 86 ITASCA, TEXAS 76055		14. US EPA ID Number N/A		15. Facility's Phone 254-887-2511			
16. Waste Shipping Name and Description a. Waste Water Treatment Sludge b. c. d.		17. Allied Waste Approval # and Exp. Date APPROVAL # 5110125440 EXP DATE: 10/10/14		18. Containers		19. Total Quantity	20. Unit WVol FY
				No. Type			
				1 CM			
21. Additional Descriptions for Materials Listed Above H132							
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 0050							
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.							
Printed/Typed Name Shedric Walker				Signature Shedric Walker		Month Day Year 2 21 13	
24. Transporter #1: Acknowledgement of Receipt of Materials							
Printed/Typed Name Tommy Graves				Signature Tommy Graves		Month Day Year 2 22 13	
25. Transporter #2: Acknowledgement of Receipt of Materials							
Printed/Typed Name				Signature		Month Day Year	
26. Discrepancy Indication Space 19a) 20420 - 4.47 tn							
27. Facility Owner or Operator Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL							
Printed/Typed Name Erica Williams				Signature Erica Williams		Month Day Year 2 22 13	

ORIGINAL - RETURN TO GENERATOR

DCI #1

Ro.



4/2/00

NON-HAZARDOUS WASTE MANIFEST

1222525

Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 78651				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 78651	
4. Phone () 972.483.6212		6. Phone ()			
7. Transporter #1 Company Name		8. US EPA ID Number N/A		9. Transporter #1's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2558 FM 88 ITASCA, TEXAS 78055		14. US EPA ID Number N/A		15. Facility's Phone 254-897-2511	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		18. Containers	
				No.	Type
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		1	CM
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name: Shedric Walker				Signature: Shedric Walker	
				Month	Day Year
				3	4 13
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name: Jack & Winchester				Signature: Jack Winchester	
				Month	Day Year
				3	5 13
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name				Signature	
				Month	Day Year
26. Discrepancy Indication Space 7) DCI (19) 10 yds 4.77 TMS					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL					
Printed/Typed Name: K. S. Oca				Signature: K. S. Oca	
				Month	Day Year
				3	5 13

ORIGINAL - RETURN TO GENERATOR

COM000083

DCI



44, 60

NON-HAZARDOUS WASTE MANIFEST

1222514

Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 76651				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 76651	
4. Phone () 972.483.6212		6. Phone ()		9. Transporter #1's Phone	
7. Transporter #1 Company Name DCI Sanitation		8. US EPA ID Number N/A		12. Transporter #2's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		15. Facility's Phone 254-687-2511	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2569 FM 85 ITASCA TEXAS 76055		14. US EPA ID Number N/A		16. Waste Shipping Name and Description	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		18. Containers	
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		19. Total Quantity	
b.				20. Unit Wt/Vol	
c.				FY	
d.					
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste					
Printed/Typed Name Sherrie Walker		Signature Sherrie Walker		Month Day Year 4 1 13	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name Tommy Grant		Signature Tommy Grant		Month Day Year 4 1 13	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space M-a) 20 yrd 6.05 tons					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL					
Printed/Typed Name Erica Williams		Signature Erica Williams		Month Day Year 4 1 13	

ORIGINAL - RETURN TO GENERATOR

COM00083

110



55360

NON-HAZARDOUS WASTE MANIFEST

1222524

Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 76651				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 76651	
4. Phone () 972.483.6212		6. Phone ()			
7. Transporter #1 Company Name DCI Sanitation		8. US EPA ID Number N/A		9. Transporter #1's Phone 972-876-3461	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 86 ITASCA, TEXAS 76055		14. US EPA ID Number N/A		15. Facility's Phone 254-687-2511	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		18. Containers	
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		19. Total Quantity	
b.				20. Unit Wt/Vol	
c.					
d.					
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 0050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name Jacob Hopkins		Signature <i>[Signature]</i>		Month Day Year 6 20 13	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name Jeramie Grant		Signature <i>[Signature]</i>		Month Day Year 6 20 13	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space 19) 20 yds. 10.31					
27. Facility Owner or Operator Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL					
Printed/Typed Name Kim Woods		Signature <i>[Signature]</i>		Month Day Year 6 20 13	

ORIGINAL - RETURN TO GENERATOR

COM000033

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53140

NON-HAZARDOUS WASTE MANIFEST

1222521

Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 76851 4. Phone () 972.483.6212				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 76851 6. Phone ()	
7. Transporter #1 Company Name <i>Sanborn</i>		8. US EPA ID Number N/A		9. Transporter #1's Phone 972.646.5461	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 86 ITASCA TEXAS 76055		14. US EPA ID Number N/A		15. Facility's Phone 254-887-2511	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		18. Containers	
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		19. Total Quantity 20. Unit Wt/Vol	
b.				1	
c.				CM	
d.				FY	
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050 RECEIVED JUL 16 2013					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name <i>Sanborn</i>		Signature <i>Sanborn</i>		Month Day Year 6 28 13	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name <i>Sanborn</i>		Signature <i>Sanborn</i>		Month Day Year 6 28 13	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space 19a) 20 yds 10.30					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL					
Printed/Typed Name <i>Kim Woods</i>		Signature <i>Kim Woods</i>		Month Day Year 6 28 13	

ORIGINAL - RETURN TO GENERATOR

#1 410

51220



NON-HAZARDOUS WASTE MANIFEST

1222522

Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 78851				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 78851	
4. Phone () 972.483.6212		6. Phone ()			
7. Transporter #1 Company Name PCI Sanitation		8. US EPA ID Number N/A		9. Transporter #1's Phone 972-646-5461	
10. Transporter #2 Company Name		11. US EPA ID Number		12. Transporter #2's Phone	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 88 ITASCA, TEXAS 78055		14. US EPA ID Number N/A		15. Facility's Phone 254-887-2511	
16. Waste Shipping Name and Description		17. Allied Waste Approval # and Exp. Date		18. Containers	
a. Waste Water Treatment Sludge		APPROVAL # 5110125440 EXP DATE: 10/10/14		19. Total Quantity 20. Unit Wt/Vol	
b.				No. Type	
c.				1 1 CM FY	
d.					
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name Jacob Hopkins		Signature 		Month Day Year 6 25 13	
24. Transporter #1: Acknowledgement of Receipt of Materials					
Printed/Typed Name Samuel Johnson		Signature 		Month Day Year 6 25 13	
25. Transporter #2: Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
26. Discrepancy Indication Space 19-1 15 yds 9.36 tons					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL					
Printed/Typed Name Erica Williams		Signature 		Month Day Year 6 25 13	

ORIGINAL - RETURN TO GENERATOR

COM000033

#1

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44,840

NON-HAZARDOUS WASTE MANIFEST

1222520

Please print or type.

1. Generator's US EPA ID Number N/A		Manifest Document Number		2. Page 1 of 1	
3. Generator's Name and Mailing Address City of Italy 413 Clark St. Italy, TX 76051				5. Generating Location (if different) City of Italy 101 W. Main Italy, TX 76051	
4. Phone () 972.483.6212		6. Phone ()		9. Transporter #1's Phone 972 646 3461	
7. Transporter #1 Company Name DCT San Antonio		8. US EPA ID Number N/A		12. Transporter #2's Phone	
10. Transporter #2 Company Name		11. US EPA ID Number		15. Facility's Phone 254-687-2511	
13. Designated T/S/D Facility Name and Site Address ITASCA LANDFILL 2559 FM 88 ITASCA, TEXAS 76055		14. US EPA ID Number N/A		17. Allied Waste Approval # and Exp. Date APPROVAL # 5110125440 EXP DATE: 10/10/14	
16. Waste Shipping Name and Description		18. Containers		19. Total Quantity	20. Unit Wt/Vol
a. Waste Water Treatment Sludge		No. 1 Type CM			FY
b.					
c.					
d.					
21. Additional Descriptions for Materials Listed Above H132					
22. Special Handling Instructions and Additional Information CUSTOMER: City of Italy CUSTOMER # 9050 RECEIVED JUL 16 2013					
23. GENERATOR'S CERTIFICATION: I certify the materials described on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.					
Printed/Typed Name John Hopkins		Signature <i>[Signature]</i>		Month 7	Day 8
24. Transporter #1: Acknowledgement of Receipt of Materials		Signature <i>[Signature]</i>		Month 7	Day 8
25. Transporter #2: Acknowledgement of Receipt of Materials		Signature		Month	Day
Printed/Typed Name		Signature		Month	Day
26. Discrepancy Indication Space 19-a) 18 yds 8.69 tons					
27. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest (except as noted in Item 19) ITASCA LANDFILL					
Printed/Typed Name Ashley Caughman		Signature <i>[Signature]</i>		Month 7	Day 8

ORIGINAL - RETURN TO GENERATOR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: City of Italy
ADDRESS: P.O. Box 840
Italy, TX 766570840
FACILITY: City of Italy WWTP
LOCATION: 0.75 mi. S of Hwy 34
0.5 mi. E Italy, TX 76657
ATTN:

PERMIT NUMBER
TX0123056

SLD-P
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 766570840
MINOR
(SUBR 09)
PRODUCTION AND USE - SLDP
Other

MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
08/01/2012 TO 07/31/2013

No Discharge ☐

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS	VALUE	UNITS			
Polychlorinated biphenyls (PCBs)									
39516 SL 0									
Sludge									
Toxicity characteristic leaching procedure									
48390 SL 0									
Sludge									
Ann. amt sludge disposed by other method									
49017 V 0									
See Comments									
Annual amt of sludge incinerated									
49018 SL 0									
Sludge									
Annual sludge production, total									
49019 SL 0									
Sludge									
Annual amount of sludge land applied									
49020 SL 0									
Sludge									
Annual amt. sludge disposed surface unit									
49021 SL 0									
Sludge									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Dean Carve</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Dean Carve</i>	TELEPHONE	DATE
		762-843-7329	08/14/2013
TYPED OR PRINTED		AREA Code	NUMBER
		762	843-7329

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

V= IF ANNUAL SLUDGE DISPOSED BY OTHER METHODS IS APPLICABLE, EXPLAIN METHOD OF DISPOSAL. WQ0010914-001

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: City of Italy
ADDRESS: P.O. Box 840
Italy, TX 76651
FACILITY: City of Italy WWTP
LOCATION: 0.75 mi S of St Hwy 34 0.5 mi E
Italy, TX 76651

ATTN:

TX0123056
PERMIT NUMBER

SLD-P
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 766510840
MINOR
(SUBR 09)
PRODUCTION AND USE - SLDP
Other

MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
08/01/2012 TO 07/31/2013

No Discharge ☐

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	UNITS			
Annual amt sludge disposed in landfill 49022 SL 0 Sludge	SAMPLE MEASUREMENT	*****	16.3	metric T/yr	*****	*****	*****	0	Annual	ESTIMA
	PERMIT REQUIREMENT	*****	Req. Mon. ANNL TOT	metric T/yr	*****	*****	*****		Annual	ESTIMA
Annual amt sludge transported interstate 49023 SL 0 Sludge	SAMPLE MEASUREMENT	*****	0		*****	*****	*****	0	Annual	ESTIMA
	PERMIT REQUIREMENT	*****	Req. Mon. ANNL TOT	metric T/yr	*****	*****	*****		Annual	ESTIMA

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Don Carrill</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Don Carrill</i>	TELEPHONE	DATE
		AREA CODE NUMBER	08/14/2013

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

V= IF ANNUAL SLUDGE DISPOSED BY OTHER METHODS IS APPLICABLE, EXPLAIN METHOD OF DISPOSAL. WQ0010914-001

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: City of Italy
ADDRESS: P.O. Box 840
Italy, TX 766510840
FACILITY: Italy, TX WWTP
LOCATION: 0.75 mi S of St. Hwy 34 0.5 mi E
Italy, TX 76651

ATTN:

PERMIT NUMBER
TX0123056

DISCHARGE NUMBER
SLL-A

DMR Mailing Zip CODE: 766510840
MINOR
(SUBR 09)
LAND APPLICATION - SLLA
Other

MONITORING PERIOD
MM/DD/YYYY TO
08/01/2012 TO 07/31/2013

No Discharge ☒

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS	VALUE	UNITS			
Arsenic, dry weight	.....		.....		.....				
01003 R O See Comments	36 MX VALUE	lb/acr	41 SINGSAMP		75 MAXIMUM	mg/kg		Annual	BATCH
Selenium, dry weight	.....		.....		.....				
01148 R O See Comments	89 MX VALUE	lb/acr	36 SINGSAMP		100 MAXIMUM	mg/kg		Annual	BATCH
Copper, dry weight	.....		.....		.....				
46394 R O See Comments	1339 MX VALUE	lb/acr	1500 SINGSAMP		4300 MAXIMUM	mg/kg		Annual	BATCH
Cadmium, dry weight	.....		.....		.....				
46396 R O See Comments	36 MX VALUE	lb/acr	39 SINGSAMP		85 MAXIMUM	mg/kg		Annual	BATCH
Annual whole sludge application rate	.....		.....		.....				
49016 P O See Comments	Opt. Mon. MX VALUE	met lb/acre	.....		.....				
Molybdenum, dry weight	.....		.....		.....				
78465 R O See Comments	Req. Mon. MX VALUE	lb/acr	Req. Mon. SINGSAMP		75 MAXIMUM	mg/kg		Annual	BATCH
Zinc, dry weight	.....		.....		.....				
78467 R O See Comments	2500 MX VALUE	lb/acr	2800 SINGSAMP		7500 MAXIMUM	mg/kg		Annual	BATCH

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Don Carrel
TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Don Carrel

TELEPHONE
817-883-7502

DATE
08/14/2013

AREA Code
817

NUMBER
883-7502

MM/DD/YYYY
08/14/2013

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

"P" - ANNUAL WHOLE SLUDGE APPLICATION RATE ONLY APPLIES TO CLASS "A" SLUDGE NOT MEETING TABLE 3 "R" - REPORT LOADING ONLY IF YOU EXCEED 90% OF ALLOWABLE KG/HA. "S" - TABLE NUMBER: REPORT (2.3 OR 4). "T" - STATE CLASS: A = 1, B = 2, NONE = 0. WQ0010914-001

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: City of Italy
ADDRESS: P.O. Box 840
Italy, TX 766510840

FACILITY: Italy, TX WWTP

LOCATION: 0.75 mi S of St Hwy 34 0.5 mi E
Italy, TX 76657

ATTN:

TX 0123056
PERMIT NUMBER

SLI-A
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 766570840

MINOR

(SUBR 09)

LAND APPLICATION - SLA

Other

No Discharge ☒

MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
08/01/2012 TO 07/31/2013

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS	VALUE	UNITS			
Lead, dry weight	MEASUREMENT								
78468 R 0	PERMIT								
See Comments	REQUIREMENT								
Nickel, dry weight	MEASUREMENT								
78468 R 0	PERMIT								
See Comments	REQUIREMENT								
Mercury, dry weight	MEASUREMENT								
78471 R 0	PERMIT								
See Comments	REQUIREMENT								
Chromium, dry weight	MEASUREMENT								
78473 R 0	PERMIT								
See Comments	REQUIREMENT								
Pollutant table from 503.13	MEASUREMENT								
84387 S 0	PERMIT								
See Comments	REQUIREMENT								
Level of pathogen requirements achieved	MEASUREMENT								
84388 T 0	PERMIT								
See Comments	REQUIREMENT								
Description of pathogen option used	MEASUREMENT								
84389 SL 0	PERMIT								
Sludge	REQUIREMENT								

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Don Carroll</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Don Carroll</i>	TELEPHONE	DATE
		766-840-7329	08/14/2013
TYPED OR PRINTED		AREA CODE	NUMBER
		MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 "P" - ANNUAL WHOLE SLUDGE APPLICATION RATE ONLY APPLIES TO CLASS "A" SLUDGE NOT MEETING TABLE 3. "R" - REPORT LOADING ONLY IF YOU EXCEED 90% OF ALLOWABLE KG/HA. "S" - TABLE NUMBER: REPORT (2.3 OR 4). "T" - STATE CLASS: A = 1, B = 2, NONE = 0. WQ0010914-001

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: City of Italy
ADDRESS: P.O. Box 840
Italy, TX 766510840
FACILITY: Italy, TX WWTP
LOCATION: 0.75 mi S of St. Hwy 34 0.5 mi E
Italy, TX 76651

ATTN:

PERMIT NUMBER
TX0123056

DISCHARGE NUMBER
SLL-A

DMR Mailing ZIP CODE: 766510840

MINOR
(SUBR 09)

LAND APPLICATION - SLLA

Other

No Discharge ☒

MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
08/01/2012 TO 07/31/2013

PARAMETER	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING				QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	UNITS	VALUE	UNITS	VALUE	UNITS			
Vector attraction reduction alternative used		*****	*****	*****	*****	*****	*****	*****	*****			
84370 SL 0 Sludge		*****	*****	*****	*****	*****	*****	*****	*****		Report	BATCH

I certify under penalty of law that this document and all attachments were prepared under my direct supervision and that I am duly licensed to perform the functions required by this permit. I am not aware of any falsification of information or any other violation of the law. I am not aware of any falsification of information or any other violation of the law.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
TYPED OR PRINTED
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
TELEPHONE
DATE
2-845-339
08/14/2013
AREA CODE
NUMBER
MMDDYYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

TP - ANNUAL WHOLE SLUDGE APPLICATION RATE ONLY APPLIES TO CLASS 'A' SLUDGE NOT MEETING TABLE 3. "R" - REPORT LOADING ONLY IF YOU EXCEED 80% OF ALLOWABLE KG/HA. "S" - TABLE NUMBER: REPORT (2.3 OR 4). "T" - STATE CLASS: A = 1, B = 2, NONE = 0. WQ0010914-001

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: City of Italy
ADDRESS: P.O. Box 840
Italy, TX 766510840
FACILITY: Italy, TX WWT
LOCATION: 0.75 mi S of St. Hwy 34 0.5 mi E
Italy, TX 76651
ATTN:

TXD123056
PERMIT NUMBER

SLL-Y
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 766510840
MINOR
(SUBR 09)
SECTION I, C - SLLY
Other

MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
08/01/2012 TO 07/31/2013

No Discharge ☒

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Fecal coliform	31641 R 0 See Comments	*****	*****	MPN/g	*****	*****	*****	*****			
Salmonella	71204 R 0 See Comments	*****	*****	MPN/g	*****	*****	*****	*****		See Permit	BATCH

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Dean Caprell</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE	DATE
			817-88-7337	08/14/2013
TYPED OR PRINTED		AREA CODE	NUMBER	MMDDYYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

R= SLUDGE; SEE PERMIT FOR REPORTING REQUIREMENTS.W00010914-001

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME/City of Italy
ADDRESS: P.O. Box 840
Italy, TX 766510840
FACILITY: Italy, TX WWTP
LOCATION: 0.75 mi S of St. Hwy 34 0.5 mi E
Italy, TX 76651
ATTN:

TX 0123056
PERMIT NUMBER

SLS-A
DISCHARGE NUMBER

DMR Mailing ZIP CODE: 766510840
MINOR
(SUBR 09)
SURFACE DISPOSAL-SLSA
Other

MONITORING PERIOD
MM/DD/YYYY TO MM/DD/YYYY
08/01/2012 TO 07/31/2013

No Discharge ☒

PARAMETER	SAMPLE MEASUREMENT REQUIREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Description of pathogen option used 84369 SL 0 Sludge	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
Vector attraction reduction alternative used 84370 SL 0 Sludge	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****		Contingent	BATCH
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		Contingent	BATCH

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <i>Don Carroll</i>	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Don Carroll</i>	TELEPHONE 820-833-3389	DATE 08/14/2013
TYPED OR PRINTED		AREA CODE	NUMBER
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) T = STATE CLASS: A=1, B=2, NONE=0. WQ0010914-001		MM/DD/YYYY	

- Track #540065- Please note resolved
- Track #540077- Please note resolved
- Track #540083 – Noted that Region must be notified within 5 days becoming aware of noncompliance.
- Track #540080- Please notes samples taken out at 10:00am composite.

TASK ORDER FORM

This is Task Order No. ITL.009,
consisting of 6 pages,
dated _____.

KSA Project Number: ITL.009

Owner Project (or Purchase Order) Number:

Project Name: Evaluation of Lift Stations

In accordance with paragraph 1.01 of the Standard Form of Agreement Between Owner and Engineer for Professional Services – Task Order Edition, dated August 12, 2011 ("Agreement"), Owner and Engineer agree as follows:

1. Specific Project Data

- A. Owner: City of Italy
- B. Title: Evaluation of Lift Stations
- C. Description: Engineer shall evaluate six existing lift stations and provide recommendations for preventing unauthorized discharge of wastewater in response to a recent TCEQ inspection. Specific attention will be given to the Taylor Street and Couch Street lift stations. The evaluation results will be provided in a letter report with cost estimates for implementing the recommendations.
- D. Number of Construction Contracts: 0

2. Services of Engineer

- A. Provide the services in Exhibit A – Schedule of Engineer's Services as outlined below:
 - a. *Study and Report Phase:*
Engineer shall provide the services outlined in Paragraph A1.01 of the Agreement.
 - b. *Preliminary Design Phase:*
Not included.
 - c. *Final Design Phase:*
Not included.
 - d. *Bidding or Negotiating Phase:*
Not included.
 - e. *Construction Phase:*
Not included.
 - f. *Commissioning Phase (or Operational Phase):*
Not included.