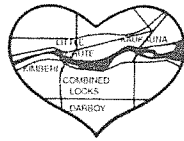


**DISTRICT DIRECTOR:**

Brian M. Helminger



**COMMISSIONERS:**

David J. Casper, President  
Bruce M. Siebers, Vice-Pres.  
Patrick E. Hennessey, Secretary  
Kevin P. Coffey  
John W. Sundelius

**SERVING:**

Combined Locks  
Kaukauna  
Kimberly  
Little Chute  
Darboy S.D.

**Heart of the Valley  
METROPOLITAN SEWERAGE DISTRICT**

801 THILMANY ROAD  
KAUKAUNA, WISCONSIN 54130  
(920) 766-5731 FAX (920) 766-5733  
www.hvmsd.org

**RESOLUTION NO. 209**

BE IT RESOLVED, that the Heart of the Valley Metropolitan Sewerage District Commission has reviewed and understands the 2023 Compliance Maintenance Annual Report that is attached to this Resolution and will be submitted to the Wisconsin DNR.

**APPROVED** \_\_\_\_\_

**David J. Casper  
President**

**ATTEST** \_\_\_\_\_

**Patrick E. Hennessey  
Secretary**

The above Resolution was approved and adopted by the Heart of the Valley Metropolitan Sewerage District Commission on **June 11, 2024** by unanimous roll call vote.

# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
6/10/2024 **2023**

## Influent Flow and Loading

1. Monthly Average Flows and BOD Loadings							
1.1 Verify the following monthly flows and BOD loadings to your facility.							
Influent No. 701	Influent Monthly Average Flow, MGD	x	Influent Monthly Average BOD Concentration mg/L	x	8.34	=	Influent Monthly Average BOD Loading, lbs/day
January	6.4545	x	249	x	8.34	=	13,383
February	5.4619	x	273	x	8.34	=	12,413
March	11.0876	x	178	x	8.34	=	16,442
April	10.2416	x	188	x	8.34	=	16,044
May	7.5730	x	231	x	8.34	=	14,616
June	5.8701	x	271	x	8.34	=	13,267
July	5.3545	x	301	x	8.34	=	13,445
August	6.2233	x	258	x	8.34	=	13,374
September	4.9806	x	310	x	8.34	=	12,863
October	6.0003	x	268	x	8.34	=	13,403
November	5.6314	x	267	x	8.34	=	12,524
December	5.6950	x	281	x	8.34	=	13,324
2. Maximum Monthly Design Flow and Design BOD Loading							
2.1 Verify the design flow and loading for your facility.							
Design	Design Factor	x	%	=	% of Design		
Max Month Design Flow, MGD	11.9	x	90	=	10.71		
		x	100	=	11.9		
Design BOD, lbs/day	14651	x	90	=	13185.9		
		x	100	=	14651		
2.2 Verify the number of times the flow and 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 BOD was greater than 90% of design	Number of times BOD was greater than 100% of design		
January	1	0	0	1	0		
February	1	0	0	0	0		
March	1	1	0	1	1		
April	1	0	0	1	1		
May	1	0	0	1	0		
June	1	0	0	1	0		
July	1	0	0	1	0		
August	1	0	0	1	0		
September	1	0	0	0	0		
October	1	0	0	1	0		
November	1	0	0	0	0		
December	1	0	0	1	0		
Points per each		2	1	3	2		
Exceedances		1	0	9	2		
Points		2	0	27	4		
<b>Total Number of Points</b>					<b>33</b>		

# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
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<p>3. Flow Meter</p> <p>3.1 Was the influent flow meter calibrated in the last year?</p> <p><input checked="" type="radio"/> Yes      Enter last calibration date (MM/DD/YYYY) <input type="text" value="2023-12-22"/></p> <p><input type="radio"/> No</p> <p>If No, please explain: <input type="text"/></p>									
<p>4. Sewer Use Ordinance</p> <p>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?</p> <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p>If No, please explain: <input type="text"/></p> <p>4.2 Was it necessary to enforce the ordinance?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p>If Yes, please explain: <input type="text"/></p>									
<p>5. Septage Receiving</p> <p>5.1 Did you have requests to receive septage at your facility?</p> <table><thead><tr><th>Septic Tanks</th><th>Holding Tanks</th><th>Grease Traps</th></tr></thead><tbody><tr><td><input checked="" type="radio"/> Yes</td><td><input checked="" type="radio"/> Yes</td><td><input checked="" type="radio"/> Yes</td></tr><tr><td><input type="radio"/> No</td><td><input type="radio"/> No</td><td><input type="radio"/> No</td></tr></tbody></table> <p>5.2 Did you receive septage at your facility? If yes, indicate volume in gallons.</p> <p>Septic Tanks</p> <p><input checked="" type="radio"/> Yes      <input type="text" value="84,770"/> gallons</p> <p><input type="radio"/> No</p> <p>Holding Tanks</p> <p><input checked="" type="radio"/> Yes      <input type="text" value="2,160,500"/> gallons</p> <p><input type="radio"/> No</p> <p>Grease Traps</p> <p><input type="radio"/> Yes      <input type="text"/> gallons</p> <p><input checked="" type="radio"/> No</p> <p>5.2.1 If yes to any of the above, please explain if plant performance is affected when receiving any of these wastes.</p> <p><input type="text" value="Plant performance is not impacted as the receiving station allows for storage of hauled waste and the ability to slowly pump the waste into the treatment plant."/></p> <p><input type="text" value="Grease trap waste disposal, while requests are made, is not accepted for disposal."/></p>	Septic Tanks	Holding Tanks	Grease Traps	<input checked="" type="radio"/> Yes	<input checked="" type="radio"/> Yes	<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> No	<input type="radio"/> No
Septic Tanks	Holding Tanks	Grease Traps							
<input checked="" type="radio"/> Yes	<input checked="" type="radio"/> Yes	<input checked="" type="radio"/> Yes							
<input type="radio"/> No	<input type="radio"/> No	<input type="radio"/> No							
<p>6. Pretreatment</p> <p>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?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p>If yes, describe the situation and your community's response.</p>									

# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
6/10/2024 **2023**

<div data-bbox="159 258 1409 310" style="border: 1px solid black; height: 25px; margin-bottom: 5px;"></div> <p>6.2 Did your facility accept hauled industrial wastes, landfill leachate, etc.?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p>If yes, describe the types of wastes received and any procedures or other restrictions that were in place to protect the facility from the discharge of hauled industrial wastes.</p> <div data-bbox="159 478 1409 531" style="border: 1px solid black; height: 25px; margin-top: 5px;"></div>
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<b>Total Points Generated</b>	<b>33</b>
<b>Score (100 - Total Points Generated)</b>	<b>67</b>
<b>Section Grade</b>	<b>D</b>

# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
6/10/2024 2023

## Effluent Quality and Plant Performance (BOD/CBOD)

<p>1. Effluent (C)BOD Results</p> <p>1.1 Verify the following monthly average effluent values, exceedances, and points for BOD or CBOD</p> <table border="1"> <thead> <tr> <th>Outfall No. 001</th> <th>Monthly Average Limit (mg/L)</th> <th>90% of Permit Limit &gt; 10 (mg/L)</th> <th>Effluent Monthly Average (mg/L)</th> <th>Months of Discharge with a Limit</th> <th>Permit Limit Exceedance</th> <th>90% Permit Limit Exceedance</th> </tr> </thead> <tbody> <tr><td>January</td><td>30</td><td>27</td><td>8</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>February</td><td>30</td><td>27</td><td>8</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>March</td><td>30</td><td>27</td><td>12</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>April</td><td>30</td><td>27</td><td>12</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>May</td><td>30</td><td>27</td><td>9</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>June</td><td>30</td><td>27</td><td>10</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>July</td><td>30</td><td>27</td><td>13</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>August</td><td>30</td><td>27</td><td>9</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>September</td><td>30</td><td>27</td><td>12</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>October</td><td>30</td><td>27</td><td>11</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>November</td><td>30</td><td>27</td><td>14</td><td>1</td><td>0</td><td>0</td></tr> <tr><td>December</td><td>30</td><td>27</td><td>11</td><td>1</td><td>0</td><td>0</td></tr> <tr> <td colspan="7" style="text-align: center;">* Equals limit if limit is &lt;= 10</td> </tr> <tr> <td colspan="4">Months of discharge/yr</td> <td>12</td> <td></td> <td></td> </tr> <tr> <td colspan="5">Points per each exceedance with 12 months of discharge</td> <td>7</td> <td>3</td> </tr> <tr> <td colspan="5">Exceedances</td> <td>0</td> <td>0</td> </tr> <tr> <td colspan="5">Points</td> <td>0</td> <td>0</td> </tr> <tr> <td colspan="6"><b>Total number of points</b></td> <td><b>0</b></td> </tr> </tbody> </table> <p>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</p> <p>1.2 If any violations occurred, what action was taken to regain compliance?</p> <p>N/A</p>							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	8	1	0	0	February	30	27	8	1	0	0	March	30	27	12	1	0	0	April	30	27	12	1	0	0	May	30	27	9	1	0	0	June	30	27	10	1	0	0	July	30	27	13	1	0	0	August	30	27	9	1	0	0	September	30	27	12	1	0	0	October	30	27	11	1	0	0	November	30	27	14	1	0	0	December	30	27	11	1	0	0	* Equals limit if limit is <= 10							Months of discharge/yr				12			Points per each exceedance with 12 months of discharge					7	3	Exceedances					0	0	Points					0	0	<b>Total number of points</b>						<b>0</b>
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																																																																																																																																					
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<p>2. Flow Meter Calibration</p> <p>2.1 Was the effluent flow meter calibrated in the last year?</p> <p><input checked="" type="radio"/> Yes      Enter last calibration date (MM/DD/YYYY)  <input type="text" value="2023-12-22"/></p> <p><input type="radio"/> No</p> <p>If No, please explain:</p> <p><input type="text"/></p>																																																																																																																																											
<p>3. Treatment Problems</p> <p>3.1 What problems, if any, were experienced over the last year that threatened treatment?</p> <p><input type="text" value="None"/></p>																																																																																																																																											
<p>4. Other Monitoring and Limits</p> <p>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?</p> <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>																																																																																																																																											

# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
6/10/2024 **2023**

<p>If Yes, please explain:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<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> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<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> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
6/10/2024 2023

## 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	8	1	0	0
February	30	27	10	1	0	0
March	30	27	20	1	0	0
April	30	27	16	1	0	0
May	30	27	11	1	0	0
June	30	27	12	1	0	0
July	30	27	24	1	0	0
August	30	27	22	1	0	0
September	30	27	27	1	0	0
October	30	27	21	1	0	0
November	30	27	24	1	0	0
December	30	27	18	1	0	0
* Equals limit if limit is <= 10						
Months of Discharge/yr				12		
<b>Points per each exceedance with 12 months of discharge:</b>					<b>7</b>	<b>3</b>
Exceedances					0	0
Points					0	0
<b>Total Number of Points</b>						<b>0</b>
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?						

0

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
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## Effluent Quality and Plant Performance (Ammonia - NH3)

### 1. Effluent Ammonia Results

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

Outfall No. 001	Monthly Average NH3 Limit (mg/L)	Weekly Average NH3 Limit (mg/L)	Effluent Monthly Average NH3 (mg/L)	Monthly Permit Limit Exceedance	Effluent Weekly Average for Week 1	Effluent Weekly Average for Week 2	Effluent Weekly Average for Week 3	Effluent Weekly Average for Week 4	Weekly Permit Limit Exceedance
January	10	28	.455	0	.42	.4	.8	.3	0
February	10	28	.255	0	.28	.24	.18	.32	0
March	10	28	.286	0	.3	.18	.34	.32	0
April	11	29	1.014	0	1.35	1.08	.84	.74	0
May	11	17	.722	0	.46	1.12	.88	.44	0
June	4.4	11	.886	0	.56	.86	1.74	.4	0
July	4.4	11	.373	0	.26	.22	.2	.78	0
August	4.4	11	.396	0	.38	.6	.22	.32	0
September	4.4	11	.642	0	.18	.74	.84	.85	0
October	18	17	.957	0	1.54	1.3	.5	.66	0
November	18	17	1.155	0	1.24	1.74	.56	1.2	0
December	18	17	.4	0	.52	.2	.44	.44	0
Points per each exceedance of Monthly average:									10
Exceedances, Monthly:									0
Points:									0
Points per each exceedance of weekly average (when there is no monthly average):									2.5
Exceedances, Weekly:									0
Points:									0
<b>Total Number of Points</b>									<b>0</b>

0

NOTE: Limit exceedances are considered for monthly OR weekly averages but not both. When a monthly average limit exists it will be used to determine exceedances and generate points. This will be true even if a weekly limit also exists. When a weekly average limit exists and a monthly limit does not exist, the weekly limit will be used to determine exceedances and generate points.

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

<b>Total Points Generated</b>	<b>0</b>
<b>Score (100 - Total Points Generated)</b>	<b>100</b>
<b>Section Grade</b>	<b>A</b>



# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
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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	0.227	1	0
February	1	0.240	1	0
March	1	0.357	1	0
April	1	0.338	1	0
May	1	0.247	1	0
June	1	0.336	1	0
July	1	0.493	1	0
August	1	0.492	1	0
September	1	0.618	1	0
October	1	0.568	1	0
November	1	0.654	1	0
December	1	0.570	1	0
Months of Discharge/yr			12	
<b>Points per each exceedance with 12 months of discharge:</b>				<b>10</b>
Exceedances				0
<b>Total Number of Points</b>				<b>0</b>
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?				

0

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

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6/10/2024 **2023**

## 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:

### 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. 008 - Class B Liquid 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														0	0
Cadmium		39	85														0	0
Copper		1500	4300														0	0
Lead		300	840														0	0
Mercury		17	57														0	0
Molybdenum	60		75													0		0
Nickel	336		420													0		0
Selenium	80		100													0		0
Zinc		2800	7500														0	0

#### Outfall No. 003 - Class A Liquid 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	9			<8.6			<9.9			6.1				0	0
Cadmium		39	85	.71			.84			<.9			.52				0	0
Copper		1500	4300	541			486			456			467				0	0
Lead		300	840	22.3			19.5			17.5			18				0	0
Mercury		17	57	.27			.42			.3			<.096				0	0
Molybdenum	60		75	11			8.4			10.5			35.6			0		0
Nickel	336		420	30.9			26			29.5			43.2			0		0
Selenium	80		100	6.5			<7.7			<8.9			4.4			0		0
Zinc		2800	7500	1010			984			955			920				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)
- 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

# Compliance Maintenance Annual Report

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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, use the Report Issue button under the Options header in the left-side menu.

Outfall Number:	<b>003</b>
Biosolids Class:	A
Bacteria Type and Limit:	Fecal Coliform
Sample Dates:	07/01/2023 - 09/30/2023
Density:	0
Sample Concentration Amount:	MPN/G TS
Requirement Met:	Yes
Land Applied:	Yes
Process:	Thermophilic Aerobic Digestion
Process Description:	Auto-Thermophilic Aerobic Digestion

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?

0

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

Outfall Number:	<b>003</b>
Method Date:	09/30/2023
Option Used To Satisfy Requirement:	Injection when land apply
Requirement Met:	Yes
Land Applied:	Yes
Limit (if applicable):	
Results (if applicable):	

5.2 Was the limit exceeded or the process criteria not met at the time of land application?  
 Yes (40 Points)

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<ul style="list-style-type: none"> <li>● No</li> </ul> <p>If yes, what action was taken?</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<b>0</b>
<p><b>6. Biosolids Storage</b></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> <ul style="list-style-type: none"> <li>● &gt;= 180 days (0 Points)</li> <li>○ 150 - 179 days (10 Points)</li> <li>○ 120 - 149 days (20 Points)</li> <li>○ 90 - 119 days (30 Points)</li> <li>○ &lt; 90 days (40 Points)</li> <li>○ N/A (0 Points)</li> </ul> <p>6.2 If you checked N/A above, explain why.</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<b>0</b>
<p><b>7. Issues</b></p> <p>7.1 Describe any outstanding biosolids issues with treatment, use or overall management:</p> <div style="border: 1px solid black; padding: 5px;"> <p>All 2023 biosolids produced were land applied via injection. There were no issues with the land application program with application sites or with biosolids quality.</p> </div>	

<b>Total Points Generated</b>	<b>0</b>
<b>Score (100 - Total Points Generated)</b>	<b>100</b>
<b>Section Grade</b>	<b>A</b>

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## Staffing and Preventative Maintenance (All Treatment Plants)

<p>1. Plant Staffing</p> <p>1.1 Was your wastewater treatment plant adequately staffed last year?</p> <ul style="list-style-type: none"><li>● Yes</li><li>○ No</li></ul> <p>If No, please explain:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p>Could use more help/staff for:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p>1.2 Did your wastewater staff have adequate time to properly operate and maintain the plant and fulfill all wastewater management tasks including recordkeeping?</p> <ul style="list-style-type: none"><li>● Yes</li><li>○ No</li></ul> <p>If No, please explain:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
<p>2. Preventative Maintenance</p> <p>2.1 Did your plant have a documented AND implemented plan for preventative maintenance on major equipment items?</p> <ul style="list-style-type: none"><li>● Yes (Continue with question 2) <input type="checkbox"/></li><li>○ No (40 points) <input type="checkbox"/></li></ul> <p>If No, please explain, then go to question 3:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p>2.2 Did this preventative maintenance program depict frequency of intervals, types of lubrication, and other tasks necessary for each piece of equipment?</p> <ul style="list-style-type: none"><li>● Yes</li><li>○ No (10 points)</li></ul> <p>2.3 Were these preventative maintenance tasks, as well as major equipment repairs, recorded and filed so future maintenance problems can be assessed properly?</p> <ul style="list-style-type: none"><li>● Yes</li><li>○ Paper file system</li><li>○ Computer system</li><li>● Both paper and computer system</li><li>○ No (10 points)</li></ul>	<b>0</b>
<p>3. O&amp;M Manual</p> <p>3.1 Does your plant have a detailed O&amp;M and Manufacturer Equipment Manuals that can be used as a reference when needed?</p> <ul style="list-style-type: none"><li>● Yes</li><li>○ No</li></ul>	
<p>4. Overall Maintenance /Repairs</p> <p>4.1 Rate the overall maintenance of your wastewater plant.</p> <ul style="list-style-type: none"><li>○ Excellent</li><li>● Very good</li><li>○ Good</li><li>○ Fair</li><li>○ Poor</li></ul> <p>Describe your rating:</p>	

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TEAMS is used to track the maintenance and replacement of any and all mechanical and electrical equipment throughout the facility. Preventative maintenance is performed and recorded electronically according to a specific asset number.

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

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## Operator Certification and Education

<p>1. Operator-In-Charge</p> <p>1.1 Did you have a designated operator-in-charge during the report year?</p> <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Yes (0 points)</li> <li><input type="radio"/> No (20 points)</li> </ul> <p>Name: <input style="width: 250px;" type="text" value="BRIAN M HELMINGER"/></p> <p>Certification No: <input style="width: 100px;" type="text" value="28032"/></p>	0																																																																																								
<p>2. Certification Requirements</p> <p>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?</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th rowspan="2">Sub Class</th> <th rowspan="2">SubClass Description</th> <th colspan="2">WWTP</th> <th colspan="2">OIC</th> </tr> <tr> <th>Advanced</th> <th>OIT</th> <th>Basic</th> <th>Advanced</th> </tr> </thead> <tbody> <tr><td>A1</td><td>Suspended Growth Processes</td><td>X</td><td></td><td></td><td>X</td></tr> <tr><td>A2</td><td>Attached Growth Processes</td><td></td><td></td><td></td><td>X</td></tr> <tr><td>A3</td><td>Recirculating Media Filters</td><td></td><td></td><td></td><td></td></tr> <tr><td>A4</td><td>Ponds, Lagoons and Natural</td><td></td><td>X</td><td></td><td></td></tr> <tr><td>A5</td><td>Anaerobic Treatment Of Liquid</td><td></td><td></td><td></td><td></td></tr> <tr><td>B</td><td>Solids Separation</td><td>X</td><td></td><td></td><td>X</td></tr> <tr><td>C</td><td>Biological Solids/Sludges</td><td>X</td><td></td><td></td><td>X</td></tr> <tr><td>P</td><td>Total Phosphorus</td><td>X</td><td></td><td></td><td>X</td></tr> <tr><td>N</td><td>Total Nitrogen</td><td></td><td></td><td></td><td></td></tr> <tr><td>D</td><td>Disinfection</td><td>X</td><td></td><td></td><td>X</td></tr> <tr><td>L</td><td>Laboratory</td><td>X</td><td></td><td></td><td>X</td></tr> <tr><td>U</td><td>Unique Treatment Systems</td><td></td><td></td><td></td><td></td></tr> <tr><td>SS</td><td>Sanitary Sewage Collection</td><td>X</td><td>X</td><td>NA</td><td>NA</td></tr> </tbody> </table> <p>2.2 Was the operator-in-charge certified at the appropriate level and subclass(es) to operate this plant? (Note: Certification in subclass SS is required 5 years after permit reissuance.)</p> <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Yes (0 points)</li> <li><input type="radio"/> No (20 points)</li> </ul> <p>2.3 For wastewater treatment facilities with a registered or certified laboratory, is at least one operator that works in the laboratory certified at the basic level in the laboratory (L) subclass?</p> <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Yes</li> <li><input type="radio"/> No</li> <li><input type="radio"/> N/A – Wastewater treatment facility does not have a registered or certified laboratory</li> </ul> <p>2.4 For wastewater treatment facilities that own and operate a sanitary sewage collection system, has at least one operator been designated the OIC for sanitary sewage collection system and certified at the basic level in the sanitary sewage collection system (SS) subclass?</p> <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Yes</li> <li><input type="radio"/> No</li> <li><input type="radio"/> N/A – Owner of the Wastewater treatment facility does not own and operate a sanitary sewage collection system</li> </ul>	Sub Class	SubClass Description	WWTP		OIC		Advanced	OIT	Basic	Advanced	A1	Suspended Growth Processes	X			X	A2	Attached Growth Processes				X	A3	Recirculating Media Filters					A4	Ponds, Lagoons and Natural		X			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	X	NA	NA	0
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<p>3. Succession Planning</p> <p>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)?</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> One or more additional certified operators on staff</li> </ul>																																																																																									

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<input type="checkbox"/> An arrangement with another certified operator <input type="checkbox"/> An arrangement with another community with a certified operator <input type="checkbox"/> An operator on staff who has an operator-in-training certificate for your plant and is expected to be certified within one year <input type="checkbox"/> A consultant to serve as your certified operator <input type="checkbox"/> None of the above (20 points) If "None of the above" is selected, please explain: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	<b>0</b>
<b>4. Continuing Education Credits</b> 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: <input type="radio"/> Averaging 6 or more CECs per year. <input type="radio"/> Averaging less than 6 CECs per year. Advanced Certification: <input checked="" type="radio"/> Averaging 8 or more CECs per year. <input type="radio"/> Averaging less than 8 CECs per year.	

<b>Total Points Generated</b>	<b>0</b>
<b>Score (100 - Total Points Generated)</b>	<b>100</b>
<b>Section Grade</b>	<b>A</b>



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## Financial Management

<p>1. Provider of Financial Information</p> <p>Name: <input style="width: 80%;" type="text" value="Brian Helminger (via 2023 HOVMSD auditor)"/></p> <p>Telephone: <input style="width: 30%;" type="text" value="920-766-5731"/> (XXX) XXX-XXXX</p> <p>E-Mail Address (optional): <input style="width: 80%;" type="text" value="brian.helminger@hvmsd.org"/></p>																		
<p>2. Treatment Works Operating Revenues</p> <p>2.1 Are User Charges or other revenues sufficient to cover O&amp;M expenses for your wastewater treatment plant AND/OR collection system ?</p> <p>● Yes (0 points) <input type="checkbox"/><input type="checkbox"/></p> <p>○ No (40 points)</p> <p>If No, please explain:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p>2.2 When was the User Charge System or other revenue source(s) last reviewed and/or revised?</p> <p>Year: <input style="width: 15%;" type="text" value="2023"/></p> <p>● 0-2 years ago (0 points) <input type="checkbox"/><input type="checkbox"/></p> <p>○ 3 or more years ago (20 points) <input type="checkbox"/><input type="checkbox"/></p> <p>○ N/A (private facility)</p> <p>2.3 Did you have a special account (e.g., CWFPP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system?</p> <p>● Yes (0 points)</p> <p>○ No (40 points)</p>	0																	
<b>REPLACEMENT FUNDS [PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 3]</b>																		
<p>3. Equipment Replacement Funds</p> <p>3.1 When was the Equipment Replacement Fund last reviewed and/or revised?</p> <p>Year: <input style="width: 15%;" type="text" value="2023"/></p> <p>● 1-2 years ago (0 points) <input type="checkbox"/><input type="checkbox"/></p> <p>○ 3 or more years ago (20 points) <input type="checkbox"/><input type="checkbox"/></p> <p>○ N/A</p> <p>If N/A, please explain:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <p>3.2 Equipment Replacement Fund Activity</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"><b>3.2.1 Ending Balance Reported on Last Year's CMAR</b></td> <td style="width: 5%;"></td> <td style="width: 5%; text-align: right;">\$</td> <td style="width: 30%; text-align: right;"><input style="width: 90%;" type="text" value="8,141,308.00"/></td> </tr> <tr> <td>3.2.2 Adjustments - if necessary (e.g. earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)</td> <td style="text-align: center;">-</td> <td style="text-align: right;">\$</td> <td style="text-align: right;"><input style="width: 90%;" type="text" value="1.00"/></td> </tr> <tr> <td>3.2.3 Adjusted January 1st Beginning Balance</td> <td></td> <td style="text-align: right;">\$</td> <td style="text-align: right;"><input style="width: 90%;" type="text" value="8,141,307.00"/></td> </tr> <tr> <td>3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.)</td> <td style="text-align: center;">+</td> <td style="text-align: right;">\$</td> <td style="text-align: right;"><input style="width: 90%;" type="text" value="990,381.00"/></td> </tr> </table>	<b>3.2.1 Ending Balance Reported on Last Year's CMAR</b>		\$	<input style="width: 90%;" type="text" value="8,141,308.00"/>	3.2.2 Adjustments - if necessary (e.g. earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)	-	\$	<input style="width: 90%;" type="text" value="1.00"/>	3.2.3 Adjusted January 1st Beginning Balance		\$	<input style="width: 90%;" type="text" value="8,141,307.00"/>	3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.)	+	\$	<input style="width: 90%;" type="text" value="990,381.00"/>		
<b>3.2.1 Ending Balance Reported on Last Year's CMAR</b>		\$	<input style="width: 90%;" type="text" value="8,141,308.00"/>															
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3.2.3 Adjusted January 1st Beginning Balance		\$	<input style="width: 90%;" type="text" value="8,141,307.00"/>															
3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.)	+	\$	<input style="width: 90%;" type="text" value="990,381.00"/>															

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

\$ 338,020.00

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

\$ 8,793,668.00

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.

Rounding correction of \$1

3.3 What amount should be in your Replacement Fund?

\$ 8,793,668.00

0

Please note: If you had a CWF loan, this amount was originally based on the Financial Assistance Agreement (FAA) and should be regularly updated as needed. Further calculation instructions and an example can be found by clicking the SectionInstructions link under Info header in the left-side menu.

3.3.1 Is the December 31 Ending Balance in your Replacement Fund above, (#3.2.6) equal to, or greater than the amount that should be in it (#3.3)?

- Yes
- No

If No, please explain.

## 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	Effluent disk filters - The District has determined that effluent filtration will be necessary to meet its TMDL obligations for both TSS and phosphorus. Design, advertisement, and bidding are completed. Construction is nearing completion with filters anticipated to be online in May 2024.	\$16,694,944	2023
2	Interceptor Rehabilitation Project - includes application of acid resistant coatings to manhole structures and exposed concrete along with CIPP lining of the mainline interceptor.  Work begins spring 2024 with the project expected to take 2 construction seasons and be completed in Fall of 2025.	\$18,085,237	2024
3	Septage Receiving Station Upgrade  Receiving station is subject to severe concrete corrosion and overall degradation. Site constrictions require removal of 3 SNDR blowers from the cover so it can be removed and replaced. Fiberglass cover will replace current concrete cover and the blowers relocated permanently to remove the weight from the new fiberglass cover.  The project is to bid out in fall of 2024 with construction in the spring of 2025. No CWF loan will be taken for tis project.	\$600,000	2025

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4	<p>Replacement/Upgrade of WWTF headworks screening equipment</p> <p>Current step screens are well past 20 years of service and due for replacement. This project would include the screenings conveyor and washer/compactor.</p> <p>We expect to perform the engineering and select equipment that would perform well when installed in existing influent channels. This would be approved with the 2025 District budget and be performed in 2025 with purchase and installation occurring in 2026.</p>	\$900,000	2026
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5. Financial Management General Comments

## ENERGY EFFICIENCY AND USE

### 6. Collection System

#### 6.1 Energy Usage

6.1.1 Enter the monthly energy usage from the different energy sources:

#### COLLECTION SYSTEM PUMPAGE: Total Power Consumed

Number of Municipally Owned Pump/Lift Stations:

	Electricity Consumed (kWh)	Natural Gas Consumed (therms)
January	10,175	
February	9,862	
March	8,034	
April	4,750	
May	2,411	
June	1,300	
July	1,579	
August	1,384	
September	1,234	
October	2,023	
November	4,557	
December	7,251	
<b>Total</b>	<b>54,560</b>	<b>0</b>
<b>Average</b>	<b>4,547</b>	<b>0</b>

#### 6.1.2 Comments:

The above consumption stems from each of the 5 communities metering and sampling stations with exception of two above ground ventilation fans that remove H2S from manhole 39 and 39A prior to entering the interceptor.

#### 6.2 Energy Related Processes and Equipment

6.2.1 Indicate equipment and practices utilized at your pump/lift stations (Check all that apply):

- Comminution or Screening
- Extended Shaft Pumps
- Flow Metering and Recording
- Pneumatic Pumping
- SCADA System

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- Self-Priming Pumps
- Submersible Pumps
- Variable Speed Drives
- Other:

### 6.2.2 Comments:

### 6.3 Has an Energy Study been performed for your pump/lift stations?

No

Yes

Year:

By Whom:

Describe and Comment:

### 6.4 Future Energy Related Equipment

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

The District does not own or operate any lift stations. We do have meter stations used for flow measurement and composite sampling for each member community.

## 7. Treatment Facility

### 7.1 Energy Usage

#### 7.1.1 Enter the monthly energy usage from the different energy sources:

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## TREATMENT PLANT: Total Power Consumed/Month

	Electricity Consumed (kWh)	Total Influent Flow (MG)	Electricity Consumed/Flow (kWh/MG)	Total Influent BOD (1000 lbs)	Electricity Consumed/Total Influent BOD (kWh/1000lbs)	Natural Gas Consumed (therms)
January	729,447	200.09	3,646	414.87	1,758	11,837
February	633,840	152.93	4,145	347.56	1,824	10,828
March	753,264	343.72	2,192	509.70	1,478	10,317
April	694,491	307.25	2,260	481.32	1,443	4,881
May	661,409	234.76	2,817	453.10	1,460	1,913
June	637,190	176.10	3,618	398.01	1,601	911
July	769,034	165.99	4,633	416.80	1,845	761
August	794,314	192.92	4,117	414.59	1,916	847
September	735,171	149.42	4,920	385.89	1,905	838
October	627,710	186.01	3,375	415.49	1,511	2,802
November	617,635	168.94	3,656	375.72	1,644	6,158
December	650,047	176.55	3,682	413.04	1,574	8,067
<b>Total</b>	<b>8,303,552</b>	<b>2,454.68</b>		<b>5,026.09</b>		<b>60,160</b>
<b>Average</b>	<b>691,963</b>	<b>204.56</b>	<b>3,588</b>	<b>418.84</b>	<b>1,663</b>	<b>5,013</b>

### 7.1.2 Comments:

## 7.2 Energy Related Processes and Equipment

7.2.1 Indicate equipment and practices utilized at your treatment facility (Check all that apply):

- Aerobic Digestion
- Anaerobic Digestion
- Biological Phosphorus Removal
- Coarse Bubble Diffusers
- Dissolved O2 Monitoring and Aeration Control
- Effluent Pumping
- Fine Bubble Diffusers
- Influent Pumping
- Mechanical Sludge Processing
- Nitrification
- SCADA System
- UV Disinfection
- Variable Speed Drives
- Other:

### 7.2.2 Comments:

## 7.3 Future Energy Related Equipment

7.3.1 What energy efficient equipment or practices do you have planned for the future for your treatment facility?

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There are no planned energy efficiency projects at this time.

## 8. Biogas Generation

8.1 Do you generate/produce biogas at your facility?

No

Yes

If Yes, how is the biogas used (Check all that apply):

Flared Off

Building Heat

Process Heat

Generate Electricity

Other:

## 9. Energy Efficiency Study

9.1 Has an Energy Study been performed for your treatment facility?

No

Yes

Entire facility

Year:

2016

By Whom:

UW Milwaukee

Describe and Comment:

Implemented various energy improvements that were suggested.

Part of the facility

Year:

By Whom:

Describe and Comment:

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Heart Of The Valley Metro Sewerage District

Last Updated: Reporting For:  
6/10/2024 2023

## Sanitary Sewer Collection Systems

### 1. Capacity, Management, Operation, and Maintenance (CMOM) Program

#### 1.1 Do you have a CMOM program that is being implemented?

Yes

No

If No, explain:

#### 1.2 Do you have a CMOM program that contains all the applicable components and items according to Wisc. Adm Code NR 210.23 (4)?

Yes

No (30 points)

N/A

If No or N/A, explain:

#### 1.3 Does your CMOM program contain the following components and items? (check the components and items that apply)

Goals [NR 210.23 (4)(a)]

Describe the major goals you had for your collection system last year:

Inspection of all land and river manholes structures annually.

Make preparations for project award and construction work to begin on lining the interceptor sections and the application of acid resistant coatings to exposed concrete.

Did you accomplish them?

Yes

No

If No, explain:

Organization [NR 210.23 (4) (b)]

Does this chapter of your CMOM include:

Organizational structure and positions (eg. organizational chart and position descriptions)

Internal and external lines of communication responsibilities

Person(s) responsible for reporting overflow events to the department and the public

Legal Authority [NR 210.23 (4) (c)]

What is the legally binding document that regulates the use of your sewer system?

2006-1

If you have a Sewer Use Ordinance or other similar document, when was it last reviewed and revised? (MM/DD/YYYY) 2020-10-13

Does your sewer use ordinance or other legally binding document address the following:

Private property inflow and infiltration

New sewer and building sewer design, construction, installation, testing and inspection

Rehabilitated sewer and lift station installation, testing and inspection

Sewage flows satellite system and large private users are monitored and controlled, as necessary

Fat, oil and grease control

Enforcement procedures for sewer use non-compliance

Operation and Maintenance [NR 210.23 (4) (d)]

Does your operation and maintenance program and equipment include the following:

Equipment and replacement part inventories

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Up-to-date sewer system map  
 A management system (computer database and/or file system) for collection system information for O&M activities, investigation and rehabilitation  
 A description of routine operation and maintenance activities (see question 2 below)  
 Capacity assessment program  
 Basement back assessment and correction  
 Regular O&M training  
 Design and Performance Provisions [NR 210.23 (4) (e)]    
 What standards and procedures are established for the design, construction, and inspection of the sewer collection system, including building sewers and interceptor sewers on private property?  
 State Plumbing Code, DNR NR 110 Standards and/or local Municipal Code Requirements  
 Construction, Inspection, and Testing  
 Others:

Overflow Emergency Response Plan [NR 210.23 (4) (f)]   0  
 Does your emergency response capability include:  
 Responsible personnel communication procedures  
 Response order, timing and clean-up  
 Public notification protocols  
 Training  
 Emergency operation protocols and implementation procedures  
 Annual Self-Auditing of your CMOM Program [NR 210.23 (5)]    
 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:  
 Antecedent Moisture Modeling for I/I analysis for 2023 - this has been an on going program to eliminate and/or minimize clearwater intrusion from entering the sewer system.

## 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	5	% of system/year
Root removal	0	% of system/year
Flow monitoring	100	% of system/year
Smoke testing	0	% of system/year
Sewer line televising	20	% of system/year
Manhole inspections	100	% of system/year
Lift station O&M	0	# per L.S./year
Manhole rehabilitation	0	% of manholes rehabbed
Mainline rehabilitation	0	% of sewer lines rehabbed



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Private sewer inspections	<input type="text" value="0"/>	% of system/year
Private sewer I/I removal	<input type="text" value="0"/>	% of private services
River or water crossings	<input type="text" value="0"/>	% of pipe crossings evaluated or maintained

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

District contracts out the cleaning and televising of the entire interceptor system every 5 years working out to 20% per year.

**3. Performance Indicators**

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

<input type="text" value="21.98"/>	Total actual amount of precipitation last year in inches
<input type="text" value="31.73"/>	Annual average precipitation (for your location)
<input type="text" value="5.54"/>	Miles of sanitary sewer
<input type="text" value="1"/>	Number of lift stations
<input type="text" value="0"/>	Number of lift station failures
<input type="text" value="0"/>	Number of sewer pipe failures
<input type="text" value="0"/>	Number of basement backup occurrences
<input type="text" value="0"/>	Number of complaints
<input type="text" value="6.7"/>	Average daily flow in MGD (if available)
<input type="text" value="11.1"/>	Peak monthly flow in MGD (if available)
<input type="text" value="29.974"/>	Peak hourly flow in MGD (if available)

**3.2 Performance ratios for the past year:**

<input type="text" value="0.00"/>	Lift station failures (failures/year)
<input type="text" value="0.00"/>	Sewer pipe failures (pipe failures/sewer mile/yr)
<input type="text" value="0.00"/>	Sanitary sewer overflows (number/sewer mile/yr)
<input type="text" value="0.00"/>	Basement backups (number/sewer mile)
<input type="text" value="0.00"/>	Complaints (number/sewer mile)
<input type="text" value="1.7"/>	Peaking factor ratio (Peak Monthly:Annual Daily Avg)
<input type="text" value="4.5"/>	Peaking factor ratio (Peak Hourly:Annual Daily Avg)

**4. Overflows**

LIST OF SANITARY SEWER (SSO) AND TREATMENT FACILITY (TFO) OVERFLOWS REPORTED **			
Date	Location	Cause	Estimated Volume
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:

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6/10/2024 **2023**

I&I remains a concern and the District continues its long standing annual I&I analysis and clear water reductions efforts. Although, HOV had no untreated waste gallons bypass the treatment system.

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:

The I/I high flows flush settled grit and legacy grease get flushed to the WWTF after a major rain event. Staff watch for and adjust the processes as this dynamic is known and not unlike every other collection system in the state.

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

Steady with no significant changes in 2023.

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

HOVMSD meets with member community leadership to present the annual I/I report and report annual findings. The information for each community can then be used to direct maintenance dollars toward projects that will give the best return in terms of gallons per minute of I&I reduced.

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
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## Grading Summary

WPDES No: 0031232

SECTIONS	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Influent	D	1	3	3
BOD/CBOD	A	4	10	40
TSS	A	4	5	20
Ammonia	A	4	5	20
Phosphorus	A	4	3	12
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
<b>TOTALS</b>			<b>37</b>	<b>139</b>
<b>GRADE POINT AVERAGE (GPA) = 3.76</b>				

### 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:	<input type="text" value="Heart of the Valley Metropolitan Sewerage District"/>
Date of Resolution or Action Taken:	<input type="text"/>
Resolution Number:	<input type="text"/>
Date of Submittal:	<input type="text"/>
<b>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):</b>	
Influent Flow and Loadings: Grade = D	
<p>The District has taken steps to reduce BOD loadings and has been successful in lowering the overall plant BOD load by 4% from 2022. The 2023 CMAR reflects this in that the 90% capacity threshold was exceeded 9 times versus 11 times in 2022. Loadings for BOD were over 100% of the rated capacity twice in 2023 versus 4 times in 2022. The District has seen results from working with its permitted pretreatment industries to redirect high BOD discharge where possible.</p> <p>The District has also completed and submitted the results of a cold weather stress test and petitioned DNR for a rerate of the recognized BOD capacity of the WWTF. The rerate - if approved - would increase capacity sufficiently to eliminate the points allied to the District's "Influent: CMAR section. To date, the engineering report and rerate request has not been acted upon by DNR.</p> <p>The District has also added tertiary filtration to its treatment train and is well positioned to discharge even better effluent than in previous years. The District began running the filters in early 2024 and reporting effluent DMR results post disk filters starting on 6/1/24.</p>	
Effluent Quality: BOD: Grade = A	<input type="text"/>
Effluent Quality: TSS: Grade = A	<input type="text"/>
Effluent Quality: Ammonia: Grade = A	<input type="text"/>
Effluent Quality: Phosphorus: Grade = A	<input type="text"/>
Biosolids Quality and Management: Grade = A	<input type="text"/>
Staffing: Grade = A	<input type="text"/>
Operator Certification: Grade = A	<input type="text"/>
Financial Management: Grade = A	<input type="text"/>

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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. = 3.76**