

# Compliance Maintenance Annual Report

JONES ISLAND

Milwaukee Metro Sew Dist Combined

Last Updated: Reporting For:

8/18/2016

2015

## Influent Flow and Loading

### 1. Monthly Average Flows and (C)BOD Loadings

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

| Outfall No.<br>701 | Influent Monthly<br>Average Flow, MGD | x | Influent Monthly<br>Average (C)BOD<br>Concentration mg/L | x | 8.34 | = | Influent Monthly<br>Average (C)BOD<br>Loading, lbs/day |
|--------------------|---------------------------------------|---|----------------------------------------------------------|---|------|---|--------------------------------------------------------|
| January            | 69.0645                               | x | 299                                                      | x | 8.34 | = | 172,056                                                |
| February           | 66.5000                               | x | 347                                                      | x | 8.34 | = | 192,529                                                |
| March              | 76.5806                               | x | 300                                                      | x | 8.34 | = | 191,811                                                |
| April              | 122.4667                              | x | 234                                                      | x | 8.34 | = | 238,592                                                |
| May                | 85.5806                               | x | 276                                                      | x | 8.34 | = | 197,315                                                |
| June               | 92.9667                               | x | 352                                                      | x | 8.34 | = | 272,920                                                |
| July               | 92.9032                               | x | 318                                                      | x | 8.34 | = | 246,465                                                |
| August             | 86.4516                               | x | 317                                                      | x | 8.34 | = | 228,861                                                |
| September          | 92.1000                               | x | 267                                                      | x | 8.34 | = | 205,086                                                |
| October            | 71.4839                               | x | 330                                                      | x | 8.34 | = | 196,930                                                |
| November           | 105.9000                              | x | 248                                                      | x | 8.34 | = | 218,682                                                |
| December           | 111.3226                              | x | 195                                                      | x | 8.34 | = | 181,493                                                |

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

#### 2.1 Verify the design flow and loading for your facility.

| Design                     | Design Factor | x | %   | = | % of Design |
|----------------------------|---------------|---|-----|---|-------------|
| Max Month Design Flow, MGD | 164           | x | 90  | = | 147.6       |
|                            |               | x | 100 | = | 164         |
| Design (C)BOD, lbs/day     | 299000        | x | 90  | = | 269100      |
|                            |               | x | 100 | = | 299000      |

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

|                        | Months<br>of<br>Influent | Number of times<br>flow was greater<br>than 90% of | Number of times<br>flow was greater<br>than 100% of | Number of times<br>(C)BOD was greater<br>than 90% of design | Number of times<br>(C)BOD was greater<br>than 100% of design |
|------------------------|--------------------------|----------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------|
| January                | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| February               | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| March                  | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| April                  | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| May                    | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| June                   | 1                        | 0                                                  | 0                                                   | 1                                                           | 0                                                            |
| July                   | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| August                 | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| September              | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| October                | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| November               | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| December               | 1                        | 0                                                  | 0                                                   | 0                                                           | 0                                                            |
| Points per each        |                          | 2                                                  | 1                                                   | 3                                                           | 2                                                            |
| Exceedances            |                          | 0                                                  | 0                                                   | 1                                                           | 0                                                            |
| Points                 |                          | 0                                                  | 0                                                   | 3                                                           | 0                                                            |
| Total Number of Points |                          |                                                    |                                                     |                                                             | 3                                                            |

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## 3. Flow Meter

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

☒ Yes Enter last calibration date (MM/DD/YYYY)

☐ No

If No, please explain:

Jones Island influent flow meters were calibrated with the following schedule . High Level influent meter: 7/17/15; Low Level Influent Meter: 7/6/15; Inline Storage System meters: 7/17/15; Sanitary Sewer meter: 1/29/15 & 10/26/15

## 4. Sewer Use Ordinance

4.1 Did your community have a sewer use ordinance that limited or prohibited the discharge of excessive conventional pollutants ((C)BOD, SS, or pH) or toxic substances to the sewer from industries, commercial users, hauled waste, or residences?

☒ Yes

☐ No

If No, please explain:

4.2 Was it necessary to enforce the ordinance?

☒ Yes

☐ No

If Yes, please explain:

Various violations occurred. The District responds to violations according to Enforcement Response Plan. The semi-annual and annual Pretreatment Program reports summarize the violations and the MMSD response.

## 5. Septage Receiving

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

Septic Tanks

Holding Tanks

Grease Traps

☐ Yes

☐ Yes

☐ Yes

☒ No

☒ No

☒ No

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

Septic Tanks

☐ Yes  gallons

☒ No

Holding Tanks

☐ Yes  gallons

☒ No

Grease Traps

☐ Yes  gallons

☒ No

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

## 6. Pretreatment

6.1 Did your facility experience operational problems, permit violations, biosolids quality concerns, or hazardous situations in the sewer system or treatment plant that were attributable to commercial or industrial discharges in the last year?

☐ Yes

☒ No

If yes, describe the situation and your community's response.

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|                                                                                                                                                                                                                                                                                                                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <div></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></div> |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

|                                      |    |
|--------------------------------------|----|
| Total Points Generated               | 3  |
| Score (100 - Total Points Generated) | 97 |
| Section Grade                        | A  |

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

### 1. Effluent (C)BOD Results

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

| Outfall No.<br>002 | Monthly<br>Average<br>Limit (mg/L) | 90% of<br>Permit Limit<br>> 10 (mg/L) | Effluent Monthly<br>Average (mg/L) | Months of<br>Discharge<br>with a Limit | Permit Limit<br>Exceedance | 90% Permit<br>Limit<br>Exceedance |
|--------------------|------------------------------------|---------------------------------------|------------------------------------|----------------------------------------|----------------------------|-----------------------------------|
| January            | 30                                 | 27                                    | 6                                  | 1                                      | 0                          | 0                                 |
| February           | 30                                 | 27                                    | 8                                  | 1                                      | 0                          | 0                                 |
| March              | 30                                 | 27                                    | 9                                  | 1                                      | 0                          | 0                                 |
| April              | 30                                 | 27                                    | 11                                 | 1                                      | 0                          | 0                                 |
| May                | 30                                 | 27                                    | 7                                  | 1                                      | 0                          | 0                                 |
| June               | 30                                 | 27                                    | 7                                  | 1                                      | 0                          | 0                                 |
| July               | 30                                 | 27                                    | 5                                  | 1                                      | 0                          | 0                                 |
| August             | 30                                 | 27                                    | 5                                  | 1                                      | 0                          | 0                                 |
| September          | 30                                 | 27                                    | 5                                  | 1                                      | 0                          | 0                                 |
| October            | 30                                 | 27                                    | 5                                  | 1                                      | 0                          | 0                                 |
| November           | 30                                 | 27                                    | 7                                  | 1                                      | 0                          | 0                                 |
| December           | 30                                 | 27                                    | 5                                  | 1                                      | 0                          | 0                                 |

\* Equals limit if limit is  $\leq 10$

|                                                        |    |   |   |
|--------------------------------------------------------|----|---|---|
| Months of discharge/yr                                 | 12 |   |   |
| Points per each exceedance with 12 months of discharge |    | 7 | 3 |
| Exceedances                                            |    | 0 | 0 |
| Points                                                 |    | 0 | 0 |
| Total number of points                                 |    |   | 0 |

NOTE: For systems that discharge intermittently to state waters, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge. Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is  $12/6 = 2.0$

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

No violations occurred.

### 2. Flow Meter Calibration

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

● Yes

Enter last calibration date (MM/DD/YYYY)

08/04/2015

○ No

If No, please explain:

### 3. Treatment Problems

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

None

### 4. Other Monitoring and Limits

4.1 At any time in the past year was there an exceedance of a permit limit for any other pollutants such as chlorides, pH, residual chlorine, fecal coliform, or metals?

○ Yes

● No

If Yes, please explain:

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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <div></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></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></div> |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|

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

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## Effluent Quality and Plant Performance (Total Suspended Solids)

### 1. Effluent Total Suspended Solids Results

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

| Outfall No.<br>002 | Monthly<br>Average<br>Limit (mg/L) | 90% of<br>Permit Limit<br>>10 (mg/L) | Effluent Monthly<br>Average (mg/L) | Months of<br>Discharge<br>with a Limit | Permit Limit<br>Exceedance | 90% Permit<br>Limit<br>Exceedance |
|--------------------|------------------------------------|--------------------------------------|------------------------------------|----------------------------------------|----------------------------|-----------------------------------|
| January            | 30                                 | 27                                   | 4                                  | 1                                      | 0                          | 0                                 |
| February           | 30                                 | 27                                   | 6                                  | 1                                      | 0                          | 0                                 |
| March              | 30                                 | 27                                   | 7                                  | 1                                      | 0                          | 0                                 |
| April              | 30                                 | 27                                   | 12                                 | 1                                      | 0                          | 0                                 |
| May                | 30                                 | 27                                   | 6                                  | 1                                      | 0                          | 0                                 |
| June               | 30                                 | 27                                   | 6                                  | 1                                      | 0                          | 0                                 |
| July               | 30                                 | 27                                   | 5                                  | 1                                      | 0                          | 0                                 |
| August             | 30                                 | 27                                   | 5                                  | 1                                      | 0                          | 0                                 |
| September          | 30                                 | 27                                   | 5                                  | 1                                      | 0                          | 0                                 |
| October            | 30                                 | 27                                   | 5                                  | 1                                      | 0                          | 0                                 |
| November           | 30                                 | 27                                   | 7                                  | 1                                      | 0                          | 0                                 |
| December           | 30                                 | 27                                   | 4                                  | 1                                      | 0                          | 0                                 |

\* Equals limit if limit is <= 10

|                                                         |    |   |   |
|---------------------------------------------------------|----|---|---|
| Months of Discharge/yr                                  | 12 |   |   |
| Points per each exceedance with 12 months of discharge: |    | 7 | 3 |
| Exceedances                                             |    | 0 | 0 |
| Points                                                  |    | 0 | 0 |
| Total Number of Points                                  |    |   | 0 |

NOTE: For systems that discharge intermittently to state waters, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge.

Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is  $12/6 = 2.0$

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

No violations occurred.

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

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## Effluent Quality and Plant Performance (Phosphorus)

### 1. Effluent Phosphorus Results

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

| Outfall No. 002                                         | Monthly Average phosphorus Limit (mg/L) | Effluent Monthly Average phosphorus (mg/L) | Months of Discharge with a Limit | Permit Limit Exceedance |
|---------------------------------------------------------|-----------------------------------------|--------------------------------------------|----------------------------------|-------------------------|
| January                                                 | .66                                     | 0.2                                        | 1                                | 0                       |
| February                                                | .66                                     | 0.2                                        | 1                                | 0                       |
| March                                                   | .66                                     | 0.3                                        | 1                                | 0                       |
| April                                                   | .66                                     | 0.3                                        | 1                                | 0                       |
| May                                                     | .66                                     | 0.2                                        | 1                                | 0                       |
| June                                                    | .66                                     | 0.2                                        | 1                                | 0                       |
| July                                                    | .66                                     | 0.2                                        | 1                                | 0                       |
| August                                                  | .66                                     | 0.3                                        | 1                                | 0                       |
| September                                               | .66                                     | 0.4                                        | 1                                | 0                       |
| October                                                 | .66                                     | 0.3                                        | 1                                | 0                       |
| November                                                | .66                                     | 0.3                                        | 1                                | 0                       |
| December                                                | .66                                     | 0.2                                        | 1                                | 0                       |
| Months of Discharge/yr                                  |                                         |                                            | 12                               |                         |
| Points per each exceedance with 12 months of discharge: |                                         |                                            |                                  | 10                      |
| Exceedances                                             |                                         |                                            |                                  | 0                       |
| Total Number of Points                                  |                                         |                                            |                                  | 0                       |

0

NOTE: For systems that discharge intermittently to waters of the state, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge.

Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is  $12/6 = 2.0$

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

No violations occurred.

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

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## Biosolids Quality and Management

### 1. Biosolids Use/Disposal

#### 1.1 How did you use or dispose of your biosolids? (Check all that apply)

- ☐ Land applied under your permit  
☒ Publicly Distributed Exceptional Quality Biosolids  
☐ Hauled to another permitted facility  
☒ Landfilled  
☐ Incinerated  
☒ Other

NOTE: If you did not remove biosolids from your system, please describe your system type such as lagoons, reed beds, recirculating sand filters, etc.

##### 1.1.1 If you checked Other, please describe:

Land application of Exceptional Quality biosolids did not require land to be permitted. About 154 dry tons from Outfall 006 were agriculturally land applied. About 41,033 dry tons were commercially distributed. Approximately 21 dry tons were Landfill disposed.

### 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. 006 - Milorganite (Jones Island)

| 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         |               | 6   | 4.6 | .87 | 2.2 | 4   | 4.2 | 4.6 | 3.9 | 3.2 | 2.8 | 3.6 | 2.3 |           | 0            | 0       |
| Cadmium    |              | 39         |               | 3.5 | 3   | .83 | .13 | .25 | .44 | .52 | .45 | .47 | .57 | .54 | .5  |           | 0            | 0       |
| Copper     |              | 1500       |               | 280 | 250 | 240 | 250 | 250 | 250 | 250 | 260 | 260 | 260 | 250 | 240 |           | 0            | 0       |
| Lead       |              | 300        |               | 32  | 22  | 28  | 45  | 47  | 56  | 51  | 55  | 57  | 51  | 43  | 46  |           | 0            | 0       |
| Mercury    |              | 17         |               | .61 | .44 | .36 | .56 | .46 | .54 | .33 | .37 | .5  | .44 | .48 | .62 |           | 0            | 0       |
| Molybdenum | 60           |            | 75            | 12  | 9.7 | 11  | 10  | 9.9 | 10  | 11  | 12  | 12  | 13  | 12  | 10  | 0         |              | 0       |
| Nickel     |              |            |               | 33  | 29  | 31  | 32  | 30  | 30  | 29  | 31  | 30  | 30  | 28  | 32  | 0         |              | 0       |
| Selenium   |              |            |               | .11 | 3.6 | 3.9 | 3.6 | 3.6 | 4.4 | 5   | 4.5 | 4.8 | 5.4 | 5.6 | 6   | 0         |              | 0       |
| Zinc       |              | 2800       |               | 600 | 540 | 530 | 560 | 510 | 640 | 600 | 510 | 510 | 500 | 490 | 440 |           | 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  
○ 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)

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● 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?

Not Applicable.

0

4. Pathogen Control (per outfall):

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

|                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Biosolids Class:             | A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Bacteria Type and Limit:     | F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Sample Dates:                | 01/01/2015 - 12/31/2015                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Density:                     | 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Sample Concentration Amount: | MPN/G TS                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Requirement Met:             | Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Land Applied:                | Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Process:                     | HTDRY                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Process Description:         | Biosolids pellet temperatures exceed 176 degrees F or 80 C and product contains less than 10 percent moisture. Pathogen samples were collected three times each month and start and end sample dates are reported on each of the monthly Characteristic Reports for 2015. On this report I am summarizing the year by noting the start date for January and the end date for December. Similarly, I am reporting the average density and solids concentration for the entire year. |

|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 01/01/2015 - 01/31/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

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|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 02/01/2015 - 02/28/2015                                                                                                   |
| Density:                     | 1                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 03/01/2015 - 03/31/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 04/01/2015 - 04/30/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

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|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 05/01/2015 - 05/31/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 06/01/2015 - 06/30/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 07/01/2015 - 07/31/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

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|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 08/01/2015 - 08/31/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 09/01/2015 - 09/30/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 10/01/2015 - 10/31/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

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|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 11/01/2015 - 11/30/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

|                              |                                                                                                                           |
|------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| Outfall Number:              | 006                                                                                                                       |
| Biosolids Class:             | A                                                                                                                         |
| Bacteria Type and Limit:     | F                                                                                                                         |
| Sample Dates:                | 12/01/2015 - 12/31/2015                                                                                                   |
| Density:                     | 0                                                                                                                         |
| Sample Concentration Amount: | MPN/G TS                                                                                                                  |
| Requirement Met:             | Yes                                                                                                                       |
| Land Applied:                | Yes                                                                                                                       |
| Process:                     | HTDRY                                                                                                                     |
| Process Description:         | The temperature of sewage sludge particles exceeds 80°C / 176° F and the moisture content of the sludge is less than 10%. |

0

4.2 If exceeded Class B limit or did not meet the process criteria at the time of land application.

4.2.1 Was the limit exceeded or the process criteria not met at the time of land application?

☐ Yes (40 Points)

☒ No

If yes, what action was taken?

5. Vector Attraction Reduction (per outfall):

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

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 01/31/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 93.20      |

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|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 12/31/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 93.20      |

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 02/28/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 92.30      |

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 03/31/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 92.80      |

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 04/30/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 93.50      |

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 05/31/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 93.50      |

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|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 06/30/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 94         |

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 07/31/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 93         |

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 08/31/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 93.30      |

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 09/30/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 93         |

|                                     |            |
|-------------------------------------|------------|
| Outfall Number:                     | 006        |
| Method Date:                        | 10/31/2015 |
| Option Used To Satisfy Requirement: | DRY90      |
| Requirement Met:                    | Yes        |
| Land Applied:                       | Yes        |
| Limit (if applicable):              | 90         |
| Results (if applicable):            | 93.20      |

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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |            |  |   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--|---|
| Outfall Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 006        |  | 0 |
| Method Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 11/30/2015 |  |   |
| Option Used To Satisfy Requirement:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | DRY90      |  |   |
| Requirement Met:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Yes        |  |   |
| Land Applied:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Yes        |  |   |
| Limit (if applicable):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 90         |  |   |
| Results (if applicable):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 93.50      |  |   |
| Outfall Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 006        |  | 0 |
| Method Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 12/31/2015 |  |   |
| Option Used To Satisfy Requirement:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | DRY90      |  |   |
| Requirement Met:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Yes        |  |   |
| Land Applied:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Yes        |  |   |
| Limit (if applicable):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 90         |  |   |
| Results (if applicable):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 93.40      |  |   |
| <p>5.2 Was the limit exceeded or the process criteria not met at the time of land application?</p> <p><input type="radio"/> Yes (40 Points)</p> <p><input checked="" type="radio"/> No</p> <p>If yes, what action was taken?</p> <div></div>                                                                                                                                                                                                                                                                                                                                        |            |  |   |
| <p>6. Biosolids Storage</p> <p>6.1 How many days of actual, current biosolids storage capacity did your wastewater treatment facility have either on-site or off-site?</p> <p><input checked="" type="radio"/> &gt;= 180 days (0 Points)</p> <p><input type="radio"/> 150 - 179 days (10 Points)</p> <p><input type="radio"/> 120 - 149 days (20 Points)</p> <p><input type="radio"/> 90 - 119 days (30 Points)</p> <p><input type="radio"/> &lt; 90 days (40 Points)</p> <p><input type="radio"/> N/A (0 Points)</p> <p>6.2 If you checked N/A above, explain why.</p> <div></div> |            |  |   |
| <p>7. Issues</p> <p>7.1 Describe any outstanding biosolids issues with treatment, use or overall management:</p> <div>No Outstanding Biosolids Issues.</div>                                                                                                                                                                                                                                                                                                                                                                                                                        |            |  |   |

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

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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><input checked="" type="radio"/> Yes</li><li><input type="radio"/> 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><input checked="" type="radio"/> Yes</li><li><input type="radio"/> 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><input checked="" type="radio"/> Yes (Continue with question 2)</li><li><input type="radio"/> No (40 points)</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><input checked="" type="radio"/> Yes</li><li><input type="radio"/> 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><input checked="" type="radio"/> Yes<ul style="list-style-type: none"><li><input type="radio"/> Paper file system</li><li><input checked="" type="radio"/> Computer system</li><li><input type="radio"/> Both paper and computer system</li></ul></li><li><input type="radio"/> No (10 points)</li></ul> | 0 |
| <p>3. O&amp;M Manual</p> <p>3.1 Does your plant have a detailed O&amp;M Manual that can be used as a reference when needed?</p> <ul style="list-style-type: none"><li><input checked="" type="radio"/> Yes</li><li><input type="radio"/> 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><input type="radio"/> Excellent</li><li><input checked="" type="radio"/> Very good</li><li><input type="radio"/> Good</li><li><input type="radio"/> Fair</li><li><input type="radio"/> Poor</li></ul> <p>Describe your rating:</p> <div style="border: 1px solid black; padding: 5px;">Maintenance work is addressed on a priority system in a timely manner.</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |

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

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## Operator Certification and Education

### 1. Operator-In-Charge

1.1 Did you have a designated operator-in-charge during the report year?

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

Name: ROBERT J MOSER

Certification No: 01840

0

### 2. Certification Requirements

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

| Sub Class | SubClass Description          | WWTP     | OIC |       |          |
|-----------|-------------------------------|----------|-----|-------|----------|
|           |                               | Advanced | OIT | Basic | Advanced |
| A1        | Suspended Growth Processes    | X        |     |       | X        |
| A2        | Attached Growth Processes     |          |     |       | 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        |
| U         | Unique Treatment Systems      |          |     |       |          |
| SS        | Sanitary Sewage Collection    | X        | NA  | NA    | NA       |

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

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

0

### 3. Succession Planning

3.1 In the event of the loss of your designated operator-in-charge, did you have a contingency plan to ensure the continued proper operation and maintenance of the plant that includes one or more of the following options (check all that apply)?

- ☒ One or more additional certified operators on staff
- ☐ An arrangement with another certified operator
- ☐ An arrangement with another community with a certified operator
- ☐ An operator on staff who has an operator-in-training certificate for your plant and is expected to be certified within one year
- ☐ A consultant to serve as your certified operator
- ☐ None of the above (20 points)

If "None of the above" is selected, please explain:

0

### 4. Continuing Education Credits

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

OIT and Basic Certification:

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|                                                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>○ Averaging 6 or more CECs per year.</li> <li>○ Averaging less than 6 CECs per year.</li> </ul> <p>Advanced Certification:</p> <ul style="list-style-type: none"> <li>● Averaging 8 or more CECs per year.</li> <li>○ Averaging less than 8 CECs per year.</li> </ul> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

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## Financial Management

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                   |                                                                  |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----|---------------------------------------------------------|----------------------------------------------|----|------------------------------------------------------------------|---------------------------------------------------------------------------|---|-----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|---|------------------------------------------------------------|------------------------------------------------------------------|----|------------------------------------------------------------------|--|
| <p><b>1. Provider of Financial Information</b><br/> Name: <input style="width: 150px;" type="text" value="David Deiringer"/><br/> Telephone: <input style="width: 150px;" type="text" value="(414) 225-2254"/> (XXX) XXX-XXXX<br/> E-Mail Address (optional): <input style="width: 300px;" type="text" value="ddeiringer@mmsd.com"/></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                   |                                                                  |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
| <p><b>2. Treatment Works Operating Revenues</b><br/> 2.1 Are User Charges or other revenues sufficient to cover O&amp;M expenses for your wastewater treatment plant AND/OR collection system ?<br/> <input checked="" type="radio"/> Yes (0 points)<br/> <input type="radio"/> No (40 points)<br/> If No, please explain:<br/> <input style="width: 800px; height: 20px;" type="text"/><br/> 2.2 When was the User Charge System or other revenue source(s) last reviewed and/or revised?<br/> Year: <input style="width: 100px;" type="text" value="2015"/><br/> <input checked="" type="radio"/> 0-2 years ago (0 points)<br/> <input type="radio"/> 3 or more years ago (20 points)<br/> <input type="radio"/> N/A (private facility)<br/> 2.3 Did you have a special account (e.g., CWFP required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system?<br/> <input checked="" type="radio"/> Yes (0 points)<br/> <input type="radio"/> No (40 points)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 0                                                 |                                                                  |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
| REPLACEMENT FUNDS [PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 3]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                   |                                                                  |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
| <p><b>3. Equipment Replacement Funds</b><br/> 3.1 When was the Equipment Replacement Fund last reviewed and/or revised?<br/> Year: <input style="width: 100px;" type="text" value="2015"/><br/> <input checked="" type="radio"/> 1-2 years ago (0 points)<br/> <input type="radio"/> 3 or more years ago (20 points)<br/> <input type="radio"/> N/A<br/> If N/A, please explain:<br/> <input style="width: 800px; height: 20px;" type="text"/><br/> 3.2 Equipment Replacement Fund Activity</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">3.2.1 Ending Balance Reported on Last Year's CMAR</td> <td style="width: 10%; text-align: right;">\$</td> <td style="width: 30%;"><input style="width: 150px;" type="text" value="14,411,000.00"/></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: right;">\$</td> <td><input style="width: 150px;" type="text" value="0.00"/></td> </tr> <tr> <td>3.2.3 Adjusted January 1st Beginning Balance</td> <td style="text-align: right;">\$</td> <td><input style="width: 150px;" type="text" value="14,411,000.00"/></td> </tr> <tr> <td>3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.)</td> <td style="text-align: right;">+</td> <td>\$ <input style="width: 150px;" type="text" value="98,308.00"/></td> </tr> <tr> <td>3.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 3.2.6.1 below*)</td> <td style="text-align: right;">-</td> <td>\$ <input style="width: 150px;" type="text" value="0.00"/></td> </tr> <tr> <td>3.2.6 Ending Balance as of December 31st for CMAR Reporting Year</td> <td style="text-align: right;">\$</td> <td><input style="width: 150px;" type="text" value="14,509,308.00"/></td> </tr> </table> | 3.2.1 Ending Balance Reported on Last Year's CMAR | \$                                                               | <input style="width: 150px;" type="text" value="14,411,000.00"/> | 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: 150px;" type="text" value="0.00"/> | 3.2.3 Adjusted January 1st Beginning Balance | \$ | <input style="width: 150px;" type="text" value="14,411,000.00"/> | 3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.) | + | \$ <input style="width: 150px;" type="text" value="98,308.00"/> | 3.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 3.2.6.1 below*) | - | \$ <input style="width: 150px;" type="text" value="0.00"/> | 3.2.6 Ending Balance as of December 31st for CMAR Reporting Year | \$ | <input style="width: 150px;" type="text" value="14,509,308.00"/> |  |
| 3.2.1 Ending Balance Reported on Last Year's CMAR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | \$                                                | <input style="width: 150px;" type="text" value="14,411,000.00"/> |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
| 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: 150px;" type="text" value="0.00"/>          |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
| 3.2.3 Adjusted January 1st Beginning Balance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$                                                | <input style="width: 150px;" type="text" value="14,411,000.00"/> |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
| 3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | +                                                 | \$ <input style="width: 150px;" type="text" value="98,308.00"/>  |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
| 3.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 3.2.6.1 below*)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | -                                                 | \$ <input style="width: 150px;" type="text" value="0.00"/>       |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |
| 3.2.6 Ending Balance as of December 31st for CMAR Reporting Year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$                                                | <input style="width: 150px;" type="text" value="14,509,308.00"/> |                                                                  |                                                                                                                                                    |    |                                                         |                                              |    |                                                                  |                                                                           |   |                                                                 |                                                                                                                |   |                                                            |                                                                  |    |                                                                  |  |

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All Sources: This ending balance should include all Equipment Replacement Funds whether held in a bank account(s), certificate(s) of deposit, etc.

3.2.6.1 Indicate adjustments, equipment purchases, and/or major repairs from 3.2.5 above.

3.3 What amount should be in your Replacement Fund? \$ 14,509,308.00

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

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

☒ Yes

☐ No

If No, please explain.

0

## 4. Future Planning

4.1 During the next ten years, will you be involved in formal planning for upgrading, rehabilitating, or new construction of your treatment facility or collection system?

☒ Yes - If Yes, please provide major project information, if not already listed below.

☐ No

| Project # | Project Description                                                              | Estimated Cost | Approximate Construction Year |
|-----------|----------------------------------------------------------------------------------|----------------|-------------------------------|
| 1         | Conveyance Projects : 30 Projects                                                | 135066435      | 2021                          |
| 2         | Water Reclamation Facilities(Jones Island and South Shore) Projects: 98 projects | 258485549      | 2021                          |

## 5. Financial Management General Comments

Response #4 above represents planned spending for conveyance and water reclamation facilities(Jones Island and South Shore) projects for the District's 6-year planning cycle beginning in 2016. Additional projects, i.e. watercourse improvement and other projects, as well as debt service, during the same 6-year period will total \$921.2 million. For a complete listing of all projects and expenditures planned for the period 2016 to 2021, refer to the MMSD 2016 Capital Budget.

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

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## Sanitary Sewer Collection Systems

### 1. CMOM Program

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

● Yes

○ No

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

● Yes (Continue with question 1)

○ No (30 points) (Go to question 2)

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

☒ Goals

Describe the specific goals you have for your collection system:

The MMSD CMOM goals related to the conveyance and storage system as presented in the CMOM Program Annual Report for 2015, are:

1.Continue the support of the CMOM Program within the District organizational structure.

2.Communicate the goals and objectives of the CMOM Program to internal and external stakeholders, monitor the CMOM Program, and institute program modifications.

3.Continue to maintain adequate financial planning.

4.Continue to comply with regulatory requirements.

5.Continue to support and monitor the regional CMOM program.

6.Continue to maintain a safe work environment and facilities and also sustain a competent workforce.

7.Establish CMOM program elements specific to minimizing the number and volume of CSOs.

8.Continue to implement and support the Wet Weather Peak Flow Management Program.

9.Where possible, establish additional practices to prevent SSOs, maintain or improve system performance, and avoid preventable failures.

10.Continue to establish and document level of protection, design, and performance standards for new conveyance assets constructed in the District service area, and consider documented and predicted changes in climate.

11.Minimize the cost of conveyance asset ownership while maintaining necessary stewardship of assets and achieving defined protection levels.

12.Enhance District level of knowledge and understanding of wet weather flows and system response to precipitation and other factors.

13.Provide information receipt, response activity, and feedback regarding customer inquiries.

☒ Organization

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

☒ Ownership and governing body description

☒ Organizational chart

☒ Personnel and position descriptions

☒ Internal communication procedures

☒ Public information and education program

☒ Legal Authority

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

☒ Sewer use ordinance Last Revised Date (MM/DD/YYYY) 01/25/2010

☒ Pretreatment/industrial control Programs

☒ Fat, oil and grease control

☒ Illicit discharges (commercial, industrial)

☒ Private property clear water (sump pumps, roof or foundation drains, etc.)

☐ Private lateral inspections/repairs

☒ Service and management agreements

☒ Maintenance Activities (provide details in question 2)

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☒ Design and Performance Provisions

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

☐ State plumbing code

☒ DNR NR 110 standards

☐ Local municipal code requirements

☒ Construction, inspection, and testing

☐ Others:

☒ Overflow Emergency Response Plan:

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

☒ Alarm system and routine testing

☒ Emergency equipment

☒ Emergency procedures

☒ Communications/notifications (DNR, internal, public, media, etc.)

☒ Capacity Assurance:

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

☒ Current and up-to-date sewer map

☒ Sewer system plans and specifications

☒ Manhole location map

☒ Lift station pump and wet well capacity information

☒ Lift station O&M manuals

Within your sewer system have you identified the following?

☒ Areas with flat sewers

☒ Areas with surcharging

☒ Areas with bottlenecks or constrictions

☒ Areas with chronic basement backups or SSOs

☒ Areas with excess debris, solids, or grease accumulation

☒ Areas with heavy root growth

☒ Areas with excessive infiltration/inflow (I/I)

☒ Sewers with severe defects that affect flow capacity

☒ Adequacy of capacity for new connections

☒ Lift station capacity and/or pumping problems

☒ Annual Self-Auditing of your O&M/CMOM Program to ensure above components are being implemented, evaluated, and re-prioritized as needed

☒ Special Studies Last Year (check only those that apply):

☒ Infiltration/Inflow (I/I) Analysis

☒ Sewer System Evaluation Survey (SSES)

☒ Sewer Evaluation and Capacity Management Plan (SECAP)

☒ Lift Station Evaluation Report

☒ Others:

In 2015, MMSD completed the following special study: Analysis of April 2015 Sanitary Sewer Overflow at Brown Deer Road, Bayside.

0

## 2. Operation and Maintenance

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

Cleaning 

0.81

 % of system/year

Root removal 

0

 % of system/year

Flow monitoring 

85

 % of system/year

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|                                                                                                                                |                                                          |                           |
|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------|
| Smoke testing                                                                                                                  | <input type="text" value="0"/>                           | % of system/year          |
| Sewer line televising                                                                                                          | <input type="text" value="3.76"/>                        | % of system/year          |
| Manhole inspections                                                                                                            | <input type="text" value="0"/>                           | % of system/year          |
| Lift station O&M                                                                                                               | <input type="text" value="16.3"/>                        | # per L.S./year           |
| Manhole rehabilitation                                                                                                         | <input type="text" value="2.92"/>                        | % of manholes rehabbed    |
| Mainline rehabilitation                                                                                                        | <input type="text" value="0"/>                           | % of sewer lines rehabbed |
| Private sewer inspections                                                                                                      | <input type="text" value="0.7"/>                         | % of system/year          |
| Private sewer I/I removal                                                                                                      | <input type="text" value="0.2"/>                         | % of private services     |
| Please include additional comments about your sanitary sewer collection system below:                                          |                                                          |                           |
| <input type="text"/>                                                                                                           |                                                          |                           |
| <b>3. Performance Indicators</b><br><b>3.1 Provide the following collection system and flow information for the past year.</b> |                                                          |                           |
| <input type="text" value="32.84"/>                                                                                             | Total actual amount of precipitation last year in inches |                           |
| <input type="text" value="34.76"/>                                                                                             | Annual average precipitation (for your location)         |                           |
| <input type="text" value="318"/>                                                                                               | Miles of sanitary sewer                                  |                           |
| <input type="text" value="19"/>                                                                                                | 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="11"/>                                                                                                | Number of complaints                                     |                           |
| <input type="text" value="87"/>                                                                                                | Average daily flow in MGD (if available)                 |                           |
| <input type="text" value="121"/>                                                                                               | Peak monthly flow in MGD (if available)                  |                           |
| <input type="text" value="333"/>                                                                                               | Peak hourly flow in MGD (if available)                   |                           |
| <b>3.2 Performance ratios for the past year:</b>                                                                               |                                                          |                           |
| <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="0.01"/>                                                                                              | Sanitary sewer overflows (number/sewer mile/yr)          |                           |
| <input type="text" value="0.00"/>                                                                                              | Basement backups (number/sewer mile)                     |                           |
| <input type="text" value="0.03"/>                                                                                              | Complaints (number/sewer mile)                           |                           |
| <input type="text" value="1.4"/>                                                                                               | Peaking factor ratio (Peak Monthly:Annual Daily Avg)     |                           |
| <input type="text" value="3.8"/>                                                                                               | Peaking factor ratio (Peak Hourly:Annual Daily Avg)      |                           |
| <b>4. Overflows</b>                                                                                                            |                                                          |                           |

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

|   | Date                                          | Location                                                                                              | Cause | Estimated Volume (MG) |
|---|-----------------------------------------------|-------------------------------------------------------------------------------------------------------|-------|-----------------------|
| 0 | 4/9/2015 9:28:00 AM -<br>4/9/2015 12:18:00 PM | WPDES 263 -Gravity overflow bypass relief sewer at<br>Green Tree Rd at Milwaukee River in River Hills | Rain  | 1.67 - 1.67           |
| 1 | 4/9/2015 1:00:00 PM -<br>4/9/2015 6:00:00 PM  | MMSD MIS Manhole 15604 on Brown Deer Rd                                                               | Rain  | 0.36 - 0.36           |

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

What actions were taken, or are underway, to reduce or eliminate SSO or TFO occurrences in the future?

A root cause analysis was completed and concluded that the main causes of the overflow in E. Brown Deer Road were precipitation and inadequate conveyance capacity of the 72-inch MIS from W. Mill Road and N. Sidney Place upstream to W. Green Tree Road and N. River Road, compounded by inadequate conveyance capacity in the 15-inch MIS in W. Brown Deer Road. A planning analysis for both the 72-inch diameter MIS and the 15-inch diameter MIS is scheduled to begin in 2016. The study will include the evaluation of capacity improvements, as well as the feasibility of removing the overflow at Green Tree Road.

### 5. Infiltration / Inflow (I/I)

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

- ☒ Yes
- ☐ No

If Yes, please describe:

Infiltration and Inflow in satellite municipal collection systems is the primary contributor of peak flows from the separate sewer area of the MMSD system. The PPI/I Program, implemented in 2011, intends to encourage and assist development and implementation of satellite municipality private property work to reduce I/I from private property sources.

#### 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:

Infiltration and inflow (I/I) in satellite municipal collection systems is the primary contributor of peak flows from the separate sewer area of the MMSD conveyance system and is one of the primary causes of separate sewer overflows from the MMSD system.

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

MMSD believes that I/I has been reduced over the past year. Twenty-five of the twenty-eight member municipalities have PPI/I reduction projects completed or in progress in the first 5 years of the PPI/I Program. Many of the municipalities also completed public sector I/I reduction projects. Municipalities have entered into a stipulation with the state to continue I/I reduction work. MMSD has adopted peak flow performance standards in its Chapter 3 revisions which require tributary municipalities to reduce I/I. In addition, all municipalities have developed and implemented CMOM programs.

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

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MMSD continues sewer rehab through Operation and Maintenance, and Capital programs. As part of this program, the District has installed approximately 143 area velocity meters in strategically selected sanitary sewers within its service area to more accurately measure wastewater flows under both dry and wet weather conditions. The area velocity meters replaced previously installed level sensors, which were used to calculate wastewater flows based on a Manning equation; however, this method of flow measurement does not work under surcharged conditions. The area velocity meters will use depth and average velocities to more accurately calculate flows and will work under surcharged conditions. Most of the flow measurements are recorded on a real time basis and displayed on the District's conveyance SCADA system. All of the flow measurements are recorded in five minute intervals in the District's historical flow data repository. The measured peak flows will be compared to the allowable peak flows listed in Chapter 3 of the District's rules. Action will be taken for any metersheds that are identified as exceeding the allowable peak flows. MMSD is continuing to work with satellite municipalities to reduce inflow and infiltration with the wet weather peak flow management program. MMSD has implemented the Private Property Inflow and Infiltration (PPI/I) Reduction Program in 2011 to support municipal work in reducing I/I from local private property sources. Twenty-five of the twenty-eight member municipalities have PPI/I reduction projects completed or in progress in the 5th year of the PPI/I Program. MMSD completed and implemented the MMSD CMOM program in 2007 and continued implementation in 2012.

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

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## Grading Summary

WPDES No: 0036820

| SECTIONS                         | LETTER GRADE | GRADE POINTS | WEIGHTING FACTORS | SECTION POINTS |
|----------------------------------|--------------|--------------|-------------------|----------------|
| Influent                         | A            | 4            | 3                 | 12             |
| BOD/CBOD                         | A            | 4            | 10                | 40             |
| TSS                              | A            | 4            | 5                 | 20             |
| Phosphorus                       | 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             |
| TOTALS                           |              |              | 32                | 128            |
| GRADE POINT AVERAGE (GPA) = 4.00 |              |              |                   |                |

### Notes:

A = Voluntary Range (Response Optional)

B = Voluntary Range (Response Optional)

C = Recommendation Range (Response Required)

D = Action Range (Response Required)

F = Action Range (Response Required)

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## Resolution or Owner's Statement

Name of Governing

Body or Owner:

MMSD Commission

Date of Resolution or

Action Taken:

09/26/2016

Resolution Number:

Date of Submittal:

ACTIONS SET FORTH BY THE GOVERNING BODY OR OWNER RELATING TO SPECIFIC CMAR SECTIONS (Optional for grade A or B. Required for grade C, D, or F):

Influent Flow and Loadings: Grade = A

Effluent Quality: BOD: Grade = A

Effluent Quality: TSS: Grade = A

Effluent Quality: Phosphorus: Grade = A

Biosolids Quality and Management: Grade = A

Staffing: Grade = A

Operator Certification: Grade = A

Financial Management: Grade = A

Collection Systems: Grade = A

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

ACTIONS SET FORTH BY THE GOVERNING BODY OR OWNER RELATING TO THE OVERALL GRADE POINT AVERAGE AND ANY GENERAL COMMENTS

(Optional for G.P.A. greater than or equal to 3.00, required for G.P.A. less than 3.00)

G.P.A. = 4.00