RESOLUTION 103-2015

RESOLUTION AUTHORIZING THE EXECUTION OF A TREATMENT WORKS APPROVAL PERMIT APPLICATION FOR THE ROUTE 45 PUMP STATION IMPROVEMENTS PROJECT

WHEREAS, Sickles & Associates, Inc., the Borough of Woodbury Heights Engineer, has been authorized by the Borough to prepare plans and specifications for improvements concerning the Route 45 Pump Station Improvements Project; and

WHEREAS, the Borough is required to obtain a Treatment Works Approval ("TWA") Permit from the New Jersey Department of Environmental Protection ("NJDEP") and from the Gloucester County Utilities Authority ("GCUA") prior to commencing construction of the project.

NOW, THEREFORE, BE IT RESOLVED by the Borough Council of the Borough of Woodbury Heights, with the Mayor concurring, that the Mayor and Borough Clerk are hereby authorized to sign and execute all TWA Permit application forms required for this project, upon the recommendation of the Township Engineer that the TWA application forms and accompanying documents are ready to be submitted to the NJDEP, as well as to the GCUA.

BOROUGH OF WOODBURY HEIGHTS

By: _____
Robbie J. Conley, Mayor

ATTEST:

_____
Janet Pizzi, Borough Clerk/Administrator

The foregoing Resolution was dually adopted by the Borough Council of the Borough of Woodbury Heights at the regular meeting held on the 24th day of November, 2015.

_____
Janet Pizzi, Borough Clerk/Administrator

STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Division of Water Quality

Reset Form

STATEMENTS OF CONSENT

A supplement to the TWA-1 or NJPDES-1 Forms

General Information

Applicant/Owner/Operator: Borough of Woodbury Heights

Location of Work Site: 834 Mantua Pike, Woodbury Heights, NJ, 080

Name of Project/Facility: Route 45 Pump Station

Type of permit application (TWA, NJPDES/SIU): TWA

NJPDES Permit Number (if applicable):

A-1 Consent By Governing Body**

(Consent by the municipality in which the project is located.)

As an authorized representative of the governing body, I hereby certify that the

Borough of Woodbury Heights

(Name of Municipality or Municipal Authority)

consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of all municipal ordinances.

Signed*_____ Date

Type Name and Position

*** Cite authorization to sign for the governing body**

Resolution#_ Dated_

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the Governing Body's full resolution, consenting to the project, must be submitted with the application.)

** Note

For most Treatment Works Approval (TWA) applications, this section may be omitted if a sewerage entity (for example, sewerage authority, utilities authority, municipal utilities authority, joint meeting, etc.) has responsibility for regulating the construction and operation of wastewater treatment and conveyance facilities within the municipality. In such cases, the governing body consent requirement may be satisfied by completing Section A-2. Applicants for TWAs for industrial/commercial facilities discharging pursuant to NJPDES/DSW or DGW permits must complete section A-1.

A-2 Consent by Sewerage Authority**

As an authorized representative of this agency, I hereby certify that the

_____

(Name of Agency)

consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of this agency.

Signed* _____ Date_____

Type Name and Position_____

*** Cite authorization to sign for the agency**

Resolution#_____ Dated_____

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the Governing Body's full resolution, consenting to the project, must be submitted with the application.)

** Note

For TWA applications, this section must be completed when a sewerage entity (for example, sewerage authority, utilities authority, municipal utilities authority, joint meeting, etc.) has responsibility for regulating the construction and operation of wastewater treatment and conveyance facilities within the municipality.

A-3 Consent by Owner of Wastewater Treatment Facility**

(For NJPDES/SIU applications only)

As an authorized representative of this agency, I hereby certify that the

_____

(Name of Agency)

consents to the submission of the above listed application to the Department of Environmental Protection for approval. I further certify that the project as proposed conforms with the requirements of this agency and the agency agrees to accept wastewater from the project for treatment.

Signed* _____ Date_____

Type Name and Position_____

*** Cite authorization to sign for the agency**

Resolution#_____ Dated_____

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the Agency's full resolution, consenting to the project, must be submitted with the application.)

** Note

For NJPDES/SIU applications, this section must be completed when the owner of the receiving wastewater treatment plant is different that the entity listed under A-2.

B. Certification by Wastewater Conveyance System Owner**

By agreeing to accept wastewater from the project, I (we) hereby certify that to the best of my (our) knowledge the wastewater conveyance system, into which the project proposed under this application will connect, has adequate capacity in accordance with N.J.A.C. 7:14A-1.2 ("Adequate conveyance capacity"). Furthermore, I (we) am (are) not aware of inadequate conveyance capacity conditions in any portion of the downstream facilities necessary to convey the wastewater from this project to the treatment plant.

Name of Municipality or Authority Borough of Woodbury Heights

Signed* _____ Date

Type Name and Position

* Cite authorization to sign for the governing body

Resolution# Dated

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the governing body's full resolution, consenting to the project, must be submitted with the application.)

** Note

1. For TWA applications, this section must be completed by the owner/operator of the wastewater conveyance system into which the project named herein will directly connect.
2. For NJPDES/SIU applications, this section must be completed when the owner/operator wastewater conveyance system into which the project named herein will directly connect is different that the entity listed under A-3.

C. Certification by Wastewater Treatment Facility Owner**

(For TWA applications that include a sewer connection/extension.)

I (we) hereby certify that the committed flow*** to the

Gloucester County Utilities Authority

(Name of Wastewater Treatment Plant)

does not exceed the presently permitted design capacity and with the additional flow proposed by this application, the permitted design capacity is not anticipated to be exceeded. I (we) further certify that the treatment plant is currently complying with its conventional and non-conventional NJPDES permit requirements (see N.J.A.C. 7:14A-22.17(b)-(d), percent removal and toxicity requirements excluded from this certification) as determined by a rolling average of the three most recent monthly discharge monitoring reports that were required to be submitted to the Department as of this date, and based upon my (our) assessment of all information pertinent to this permit request, is anticipated to continue to do so with the additional flow from this project.

Accepted for Treatment by

(Name of Treating Authority)

Signed* _____ Date

Type Name and Position

Name of project and/or location

* Cite authorization to sign for the governing body

Resolution# Dated

(Submit the resolution with the application. If no such resolution granting authority to sign exists, the governing body's full resolution, consenting to the project, must be submitted with the application.)

** For TWA applications, this section must be completed by the owner of the wastewater treatment facility receiving the wastewater identified in this application.

*** For the purposes of this certification, committed flow means the sum of the 1) actual metered flow, 2) flow from DEP approved TWA applications (not yet operational), and 3) flow from locally approved projects that do not require DEP approval.

Additional Information (For TWA Applications)

1. Approvals, permits, service contracts, or other reservations of flow capacity issued or agreed to by any participating municipality or sewerage agency do not constitute the required approval of the DEP.

2. For computation of actual flow at the receiving wastewater treatment plant, the average flow processed by the facility for the three (3) month period immediately preceding the submission of the application shall be used. Pursuant to the NJPDES regulations (N.J.A.C. 7:14A), no application shall be submitted to the DEP if the wastewater treatment facility is not meeting its discharge permit requirements.

Lack of Consent*

1. The affected sewerage authority or municipality must consent to the application or submit comments to the DEP within 60 days of the applicant's request for consent. Prior to the expiration of the 60-day period to respond to a request for a written statement of consent, the municipality or sewerage authority may request a 30-day time extension.

2. Any document issued by a sewerage authority or municipality which is a tentative, preliminary, or conditional approval shall not be considered a statement of consent.

3. When the affected sewerage authority or municipality does not consent to a project, it shall state all reasons for rejection or disapproval in a resolution and send a certified copy of the resolution to the DEP.

4. When the affected sewerage authority or municipality expressly denies a request for a written statement of consent for a project, the permit application may be determined by the DEP to be incomplete for processing; or in the alternative, the DEP may review the reasons for denial. Any such reasons shall be considered by the DEP in determining whether to issue a draft permit in accordance with N.J.A.C. 7:14A-15.6, or a Treatment Works Approval or sewer connection approval in accordance with N.J.A.C. 7:14A-22.

5. When the affected sewerage authority or municipality does not issue a written statement of consent in accordance with (1) above, or a denial in accordance with (3) above, the DEP, upon receipt of proof that the applicant has delivered to the affected agency a written request for a statement of consent, shall review the reasons therefore, if known on the basis of reasonably reliable information. Any such reasons shall be considered by the DEP in determining whether to issue a draft permit in accordance with N.J.A.C. 7:14A-15.6, or a Treatment Works Approval in accordance with N.J.A.C. 7:14A-22. The DEP, may in its discretion, deem the application to be incomplete pending the expiration of the time period set forth in (1) above.

* This section has been excerpted from the NJPDES regulations for guidance purposes only. Please refer to N.J.A.C. 7:14A-22.8(a)3 for the complete requirements concerning statements of consent.

Notice: False statements, representations, or certifications, in any application, record, or document are subject to fines and penalties as set forth in the Water Pollution Control Act (N.J.S.A. 58:10A-10F 2 and 3.

STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

Reset form

Treatment Works Approval Permit Application

Refer to Instructions on Page 4 and Provide All Applicable Information. Please Print or Type.

1. APPLICANT/OWNER*

Name Borough of Woodbury Heights Telephone (856) 848-2832

Permanent Legal Address 500 Elm Avenue

City or Town Woodbury Heights State NJ Zip Code 08097 E-mail ppwm@bwhnj.com

* *Applicant/Owner should be the eventual owner of the proposed Treatment Works.*

2. LOCATION OF ACTIVITY

Name of Facility/Site **Route 45 Pump Station**

Street Address/Location **834 Mantua Pike**

Lot No. **5.03** Block No. **5**

City or Town **Woodbury Heights** State **NJ** Zip Code 08097

Municipality **Woodbury Heights** County Gloucester

3. NEW JERSEY LICENSED PROFESSIONAL ENGINEER

Name David S. Palgutta, PE, CME N.J. License No. GE44500

Name of Firm, if employee Sickels & Associates, Inc.

Mailing Address 833 Kings Highway

City or Town Woodbury State NJ Zip Code 08096

Telephone (856) 848-6800 Fax (856) 848-8520 E-Mail dpalgutta@sickelsassoc.com

4. ESTIMATED CONSTRUCTION COST AND APPLICATION FEE

A. Cost of treatment works proposed in this application $ 133,250.00
(Attach a breakdown of the cost of all items related to the construction of the proposed treatment works).

B. Application Fee $ 2,345.00
(In accordance with N.J.A.C. 7:1C-1.5 et seq., made payable to Treasurer, State of NJ, Environmental Services Fund).

5. Other Required Permits

If any of the the following applications have been submitted for this project, provide the applicable information.

Permit Type	Application Status Pending (check one)	Application Status Approved* (check one)	Application Date (or Application No.)
• Treatment Works Approval	✓		
• Exemption From Sewer Ban			N/A
• Water Quality Management Plan Amendment			N/A
• CAFRA			N/A
• Stream Encroachment			N/A
• Freshwater Wetlands			N/A
• Tidal or Coastal Wetlands			N/A
• Waterfront Development			N/A
• NJPDES Permits			N/A
• Pinelands Certificate			N/A
• Delaware & Raritan Canal Commission			N/A
• Hackensack/Meadowlands Commission			N/A
• Other Related Approvals			N/A

(If any of the above applications were approved, please provide a copy of the approval with this application).*

6. Project Description (Brief Description of Proposed Treatment Works and Intended Use).

The intent of this project is to reroute the existing 6" force main currently carrying the sanitary sewer flows from the Route 45 pump station. A new force main will be constructed to route the sewer flows to an existing manhole located near Block 32, Lot 8 on Redwood Avenue. The diverted sanitary flow would still ultimately reach the Gloucester County Utilities Authority Wastewater Treatment Plant located at 2 Paradise Rd, Paulsboro NJ.

7. APPLICANT'S AGENT (Optional)

I, _____
(Applicant/Owner's Name)
authorize to act as my agent/representative in all matters pertaining to my application the following person:

Name David S. Palgutta, PE, CME Position Project Manager

Address 833 Kings Highway City Woodbury

State NJ Zip Code 08096 Telephone (856) 848-6800

Signature of Agent _____ Date _____ Signature of Applicant/Owner Janet Pizzi Date _____

8. PROPERTY OWNER'S CERTIFICATION

I hereby certify that _____
(Property Owner's Name)
owns the property identified in this application. As owner, I grant permission for the activity to be permitted under this application and authorize the Department of Environmental Protection to conduct on-site inspections, if necessary. If the construction activity will take place in an easement, I certify that with this application, I presently have or will obtain permission of the property owner(s) prior to initiation of construction of this proposed treatment works.

Janet Pizzi 11/30/2015
Signature of Owner Date

Print or Type: Name and Position Janet Pizzi, Clerk/Admin

9. STATEMENT OF PREPARER OF PLANS, SPECIFICATIONS AND ENGINEER'S REPORT AND/OR ABSTRACT

I hereby certify that the engineering plans, specifications, and engineer's report and/or abstract applicable to this project comply with the current rules and regulations of the Department of Environmental Protection with the exceptions as noted.

David S Palgutta 11-30-15
Signature of Engineer Date

Print or Type: Name and Position DAVID PALGUTTA, PE Project Engineer

PROFESSIONAL ENGINEER'S EMBOSSED SEAL

10. Proper Construction and Operation Clause

I, the Applicant/Owner, _____ agree that the treatment works will be properly constructed and operated in accordance with the engineering plans, specifications and conditions under which approval is granted by the Department of Environmental Protection.

Signature of Applicant/Owner _____ Date 11/30/15

Print or Type: Name and Position Janet Pizzi, Clerk/Admin

11. Certification by Applicant/Owner

I certify, under penalty of law, that the information provided in this application and the attachments is true, accurate, and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate, or incomplete information, including fines and/or imprisonment.

Signature of Applicant/Owner _____ Date 11/30/15

Print or Type: Name and Position Janet Pizzi, Clerk/Admin

Instructions for Completing Form TWA - 1

This form should accompany all Treatment Works Approval permit applications.

1. **General Information** - (items #1 through #4, #6) Complete the requested applicant and project information.
2. **Other Required Permits** (item # 5) - Please list all permits issued for the subject project (in addition to the permits being applied for at this time).
3. **Signatures** (items #7 through #11) - All signatures must comply with N.J.A.C. 7:14A-4.9 and N.J.A.C. 7:14A-22.8. Where indicated under items #1, #10 and #11, the applicant/owner should be the eventual owner of the proposed treatment works. Item #8 shall be completed by the owner of the property.

Should you need assistance in completing the application, please call the appropriate phone number listed below:

• **Bureau of Construction & Connection Permits** (609) 984-4429 Municipal Treatment Works, Industrial Treatment Works, Sewer Extension, Sewer Ban Exemption, Subsurface Disposal Systems	•**Bureau of Nonpoint Pollution Control** (609) 633-7021 Alternate Design Septic Systems (design flow less than 2,000 GPD)