



Town of Fairfield

Sullivan Independence Hall
725 Old Post Road

Fairfield, Connecticut 06824
Engineering Department

(203) 256-3015
FAX (203) 256-3080

June 4, 2015

Christopher O. Stone, P.E.
Stormwater Permit Coordinator
CT DEP
79 Elm Street
Hartford CT 06106

RE: Town of Fairfield – Stormwater Monitoring Results from PHASE 1 Activities are enclosed
Sample dates: April 20, 2015.

Dear Mr. Stone:

Enclosed are the Town of Fairfield's Stormwater monitoring results for Phase 1. Reference is made to the following:

Fairfield DPW Yard: GSI – 001448

Fairfield/Former Ground Products Site/Current Green Cycle (Compost Facility)
GSI-001871

Fairfield WPCF (Sewage Treatment Plant)
GSI-001992 Site #51-001

Town Marina/Boat Basin results are included
GSI-002240

Notes:

We are also submitting the monitoring results for Phase 2 MS4 also sampled on April 20, 2015.

DPW #3 is now considered inactive/obsolete as site has been re-graded and pipe is bulkheaded.

Please contact me if you have any questions or comments.

Sincerely,

A handwritten signature in blue ink that reads "William Hurley". The signature is fluid and cursive, with the first name "William" and last name "Hurley" clearly distinguishable.

William Hurley, P.E.
Engineering Manager

WH:pal

Enc.



General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems

Stormwater Monitoring Report Form

PERMITTEE INFORMATION

Town: Town of Fairfield
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Eng. Manager Phone: 203-256-3015
Permit Registration #GSM: 000012

SAMPLING INFORMATION

Discharge Location (Lat/Long or other description): Flintlock N41° - 8.742' W73° -17.614'
Please circle the appropriate area description: Industrial, Commercial, or Residential
Receiving Water (name, basin): Mill River
Time of Start of Discharge: est. 7:00 AM
Date/Time Collected: April 20, 2015 Water Temperature: 49°
Person Collecting Sample: Chris Rogers / John Chizmadia
Storm Magnitude (inches): 0.82" Storm Duration (hours): 12hrs
Date of Previous Storm Event: April 17, 2015

MONITORING RESULTS

Parameter	Method	Results (units)	Laboratory
Sample pH	4500H-B	6.47	PH-0116
Rain pH	WPCF Data	4.9	PH-0116
Hardness	200.7	49	PH-0116
Conductivity	2510B	180	PH-0116
Oil & Grease	1664A	ND < 5.0	PH-0116
COD	5220D	39	PH-0116
Turbidity	180.1	11	PH-0116
TSS	2450D	36	PH-0116
TP	365.4	ND < 0.10	PH-0116
Ammonia	350.1	0.23	PH-0116
TKN	351.2	1.5	PH-0116
NO ₃ +NO ₂	300.0	0.43	PH-0116
E. coli	SM9223B	886.4	PH-0535

STATEMENT OF ACKNOWLEDGMENT

I certify that the data reported on this document were prepared under my direction or supervision in accordance with the MS4 General Permit. The information submitted is, to the best of my knowledge and belief, true, accurate and complete.

Authorized Official: William Hurley Eng Manager
Signature: William Hurley Date: 6/4/15



General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems

Stormwater Monitoring Report Form

PERMITTEE INFORMATION

Town: Town of Fairfield
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Eng. Manager Phone: 203-256-3015
Permit Registration #GSM: 000012

SAMPLING INFORMATION

Discharge Location (Lat/Long or other description): Mill Hill Terr. N41° - 8.705' W73° - 17.083'
Please circle the appropriate area description: Industrial, Commercial, or Residential
Receiving Water (name, basin): Sasco Brook
Time of Start of Discharge: est 7:00 AM
Date/Time Collected: April 20, 2015 Water Temperature: 49°
Person Collecting Sample: Chris Rogers / John Chizmadia
Storm Magnitude (inches): 0.82" Storm Duration (hours): 12hrs
Date of Previous Storm Event: April 17, 2015

MONITORING RESULTS

Parameter	Method	Results (units)	Laboratory
Sample pH	4500H-B	6.64	PH-0116
Rain pH	WPCF Data	4.9	PH-0116
Hardness	200.7	20	PH-0116
Conductivity	2510B	48	PH-0116
Oil & Grease	1664A	ND < 5.0	PH-0116
COD	5220D	110	PH-0116
Turbidity	180.1	68	PH-0116
TSS	2450D	200	PH-0116
TP	365.4	0.41	PH-0116
Ammonia	350.1	0.38	PH-0116
TKN	351.2	2.3	PH-0116
NO ₃ +NO ₂	300.0	0.28	PH-0116
E. coli	SM9223B	>72419.6	PH-0535

STATEMENT OF ACKNOWLEDGMENT

I certify that the data reported on this document were prepared under my direction or supervision in accordance with the MS4 General Permit. The information submitted is, to the best of my knowledge and belief, true, accurate and complete.

Authorized Official: William Hurley Eng Manager
Signature: William Hurley Date: 6/4/15



General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems

Stormwater Monitoring Report Form

PERMITTEE INFORMATION

Town: Town of Fairfield
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Eng. Manager Phone: 203-256-3015
Permit Registration #GSM: 000012

SAMPLING INFORMATION

Discharge Location (Lat/Long or other description): Timothy St. N41° – 8.952' W73° – 15.125'
Please circle the appropriate area description: Industrial, Commercial, or Residential
Receiving Water (name, basin): Turney Creek
Time of Start of Discharge: est. 7:00 AM
Date/Time Collected: April 20, 2015 Water Temperature: 49°
Person Collecting Sample: Chris Rogers / John Chizmadia
Storm Magnitude (inches): 0.82" Storm Duration (hours): 12hrs
Date of Previous Storm Event: April 17, 2015

MONITORING RESULTS

Parameter	Method	Results (units)	Laboratory
Sample pH	4500H-B	6.52	PH-0116
Rain pH	WPCF Data	4.9	PH-0116
Hardness	200.7	18	PH-0116
Conductivity	2510B	190	PH-0116
Oil & Grease	1664A	ND < 5.0	PH-0116
COD	5220D	98	PH-0116
Turbidity	180.1	59	PH-0116
TSS	2450D	140	PH-0116
TP	365.4	0.29	PH-0116
Ammonia	350.1	0.29	PH-0116
TKN	351.2	1.9	PH-0116
NO ₃ +NO ₂	300.0	0.40	PH-0116
E. coli	SM9223B	1732.9	PH-0535

STATEMENT OF ACKNOWLEDGMENT

I certify that the data reported on this document were prepared under my direction or supervision in accordance with the MS4 General Permit. The information submitted is, to the best of my knowledge and belief, true, accurate and complete.

Authorized Official: William Hurley Eng Manager
Signature: William Hurley Date: 6/4/15



General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems

Stormwater Monitoring Report Form

PERMITTEE INFORMATION

Town: Town of Fairfield
Mailing Address: 725 Old Post Rd
Contact Person: William Hurley Title: Eng. Manager Phone: 203-256-3015
Permit Registration #GSM: 000012

SAMPLING INFORMATION

Discharge Location (Lat/Long or other description): Pequot Ave. N 41° -8.194' W 73° - 17.129'
Please circle the appropriate area description: Industrial, Commercial, or Residential
Receiving Water (name, basin): Horse Tavern to Southport Harbor
Time of Start of Discharge: est. 7:00 am
Date/Time Collected: April 20, 2015 Water Temperature: 49°
Person Collecting Sample: Chris Rogers / John Chizmadia
Storm Magnitude (inches): 0.82" Storm Duration (hours): 12hrs
Date of Previous Storm Event: April 17, 2015

MONITORING RESULTS

Parameter	Method	Results (units)	Laboratory
Sample pH	4500H-B	6.43	PH-0116
Rain pH	WPCF Data	4.9	PH-0116
Hardness	200.7	22	PH-0116
Conductivity	2510B	150	PH-0116
Oil & Grease	1664A	ND < 5.0	PH-0116
COD	5220D	91	PH-0116
Turbidity	180.1	33	PH-0116
TSS	2450D	73	PH-0116
TP	365.4	0.16	PH-0116
Ammonia	350.1	0.33	PH-0116
TKN	351.2	1.6	PH-0116
NO ₃ +NO ₂	300.0	0.29	PH-0116
E. coli	SM9223B	>72419.6	PH-0535

STATEMENT OF ACKNOWLEDGMENT

I certify that the data reported on this document were prepared under my direction or supervision in accordance with the MS4 General Permit. The information submitted is, to the best of my knowledge and belief, true, accurate and complete.

Authorized Official: William Hurley Eng Manager
Signature: William Hurley Date: 6/4/15



General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems

Stormwater Monitoring Report Form

PERMITTEE INFORMATION

Town: Town of Fairfield
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Eng. Manager Phone: 203-256-3015
Permit Registration # GSM: 000012

SAMPLING INFORMATION

Discharge Location (Lat/Long or other description): Beaumont N41°-8.326' W73°-15.957'
Please circle the appropriate area description: Industrial, Commercial, or Residential
Receiving Water (name, basin): Pine Creek
Time of Start of Discharge: est 7:00 am
Date/Time Collected: April 20, 2015 Water Temperature: 49°
Person Collecting Sample: Chris Rogers / John Chizmadia
Storm Magnitude (inches): 0.82" Storm Duration (hours): 12hrs
Date of Previous Storm Event: April 17, 2015

MONITORING RESULTS

Parameter	Method	Results (units)	Laboratory
Sample pH	4500H-B	6.48	PH-0116
Rain pH	WPCF Data	4.9	PH-0116
Hardness	200.7	10	PH-0116
Conductivity	2510B	77	PH-0116
Oil & Grease	1664A	ND < 5.0	PH-0116
COD	5220D	62	PH-0116
Turbidity	180.1	24	PH-0116
TSS	2450D	38	PH-0116
TP	365.4	0.18	PH-0116
Ammonia	350.1	0.38	PH-0116
TKN	351.2	1.6	PH-0116
NO ₃ +NO ₂	300.0	0.29	PH-0116
E. coli	SM9223B	727.0	PH-0535

STATEMENT OF ACKNOWLEDGMENT

I certify that the data reported on this document were prepared under my direction or supervision in accordance with the MS4 General Permit. The information submitted is, to the best of my knowledge and belief, true, accurate and complete.

Authorized Official: William Hurley Eng Manager
Signature: William Hurley Date: 6/4/15



General Permit for the Discharge of Stormwater from Small Municipal Separate Storm Sewer Systems

Stormwater Monitoring Report Form

PERMITTEE INFORMATION

Town: Town of Fairfield
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Eng. Manager Phone: 203-256-3015
Permit Registration #GSM: 000012

SAMPLING INFORMATION

Discharge Location (Lat/Long or other description): Black Rock Tpke. N41° - 9.662 W73° -13.806'
Please circle the appropriate area description: Industrial, Commercial, or Residential
Receiving Water (name, basin): Ash Creek
Time of Start of Discharge: est. 7:00 AM
Date/Time Collected: April 20, 2015 Water Temperature: 49°
Person Collecting Sample: Chris Rogers / John Chizmadia
Storm Magnitude (inches): 0.82" Storm Duration (hours): 12hrs
Date of Previous Storm Event: April 17, 2015

MONITORING RESULTS

Parameter	Method	Results (units)	Laboratory
Sample pH	4500H-B	6.41	PH-0116
Rain pH	WPCF Data	4.9	PH-0116
Hardness	200.7	640	PH-0116
Conductivity	2510B	5800	PH-0116
Oil & Grease	1664A	ND < 5.0	PH-0116
COD	5220D	110	PH-0116
Turbidity	180.1	12	PH-0116
TSS	2450D	27	PH-0116
TP	365.4	ND < 0.10	PH-0116
Ammonia	350.1	0.19	PH-0116
TKN	351.2	ND < 1.0	PH-0116
NO ₃ +NO ₂	300.0	ND < 0.10	PH-0116 & PH-0723
E. coli	SM9223B	344.8	PH-0535

STATEMENT OF ACKNOWLEDGMENT

I certify that the data reported on this document were prepared under my direction or supervision in accordance with the MS4 General Permit. The information submitted is, to the best of my knowledge and belief, true, accurate and complete.

Authorized Official: William Hurley Eng. Manager
Signature: William Hurley Date: 6/4/15



**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Stormwater Monitoring Report Form
General Requirements and Sector G Transportation Facilities Only
(Do not submit if you have other sector specific requirements)**

Facility Information

Permittee Name: Town of Fairfield Site Name: WPCF-1
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Engineering Manager
Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org
Site Address: _____
Receiving Water (name/basin): Pine Creek
Permit #: GSI 001992 Primary SIC: _____
Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Information

Sample Location: WPCF-1 Person Collecting Sample: Chris Rogers
Date/Time Collected: 4/20/2015 11:15 am Date of Previous Storm Event: 4/17/2015
This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐
Check here if the sample contains **snow or ice melt**: ☐
Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Monitoring Results

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	7.31	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	6.49	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	19	75 mg/L	<input type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	13	90 mg/L	<input type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	ND < 0.10	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	ND < 1.0	2.30 mg/L	<input type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.120	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual	ND < 0.04	0.059 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Zinc	Semi-annual	0.42	0.160 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	0.014	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

Exemptions

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

NOTE: Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: WPCF-1	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)			
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Hurley
Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Engineering Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
General and Sector G Transportation Facilities Only
Monitoring Requirements**

Permittee Name: <u>Town of Fairfield</u>	Permit #: GSI <u>001992</u>
Site Name: <u>WPCF-1</u>	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

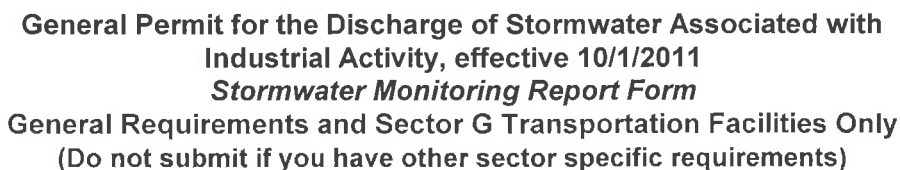
$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	6.49					5-9 S.U.	
COD	19					75 mg/L	
TSS	13					90 mg/L	
TP	ND < 0.10					0.40 mg/L	
TKN	ND < 1.0					2.30 mg/L	
NO ₃ -N	0.120					1.10 mg/L	
Total Copper	ND < 0.04					0.059 mg/L	
Total Zinc	0.42					0.160 mg/L	
Total Lead	0.014					0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) of the General Permit for a more detailed explanation.



Permittee Name: Town of Fairfield Site Name: WPCF-2
 Mailing Address: 725 Old Post Road
 Contact Person: William Hurley Title: Engineering Manager
 Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org
 Site Address: _____
 Receiving Water (name/basin): Pine Creek
 Permit #: GSI 001992 Primary SIC: _____
 Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Location: WPCF-2 Person Collecting Sample: Chris Rogers
Date/Time Collected: 4/20/2015 11:15 am Date of Previous Storm Event: 4/17/2015
This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐
Check here if the sample contains **snow or ice melt**: ☐
Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	7.31	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	6.59	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	220	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	220	90 mg/L	<input checked="" type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	2.6	0.40 mg/L	<input checked="" type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	9.6	2.30 mg/L	<input checked="" type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.171	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual	0.10	0.059 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Zinc	Semi-annual	0.32	0.160 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	0.032	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

Rev. 10/17/11

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: WPCF-2	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)			
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS


Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."




Signature of Permittee

6/4/15

Date



Name of Permittee (print or type)



Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
General and Sector G Transportation Facilities Only
Monitoring Requirements**

Permittee Name: Town of Fairfield	Permit #: GSI 001992
Site Name: WPCF-2	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

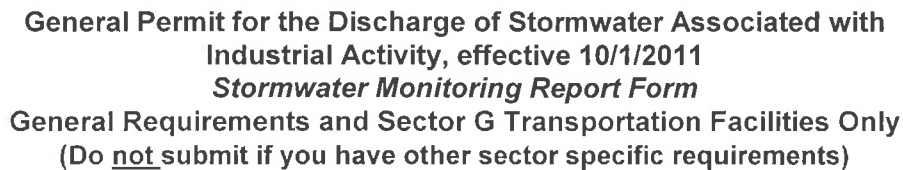
$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	6.59					5-9 S.U.	
COD	220					75 mg/L	
TSS	220					90 mg/L	
TP	2.6					0.40 mg/L	
TKN	9.6					2.30 mg/L	
NO ₃ -N	0.171					1.10 mg/L	
Total Copper	0.10					0.059 mg/L	
Total Zinc	0.32					0.160 mg/L	
Total Lead	0.032					0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) of the General Permit for a more detailed explanation.



Permittee Name: Town of Fairfield Site Name: WPCF-3
 Mailing Address: 725 Old Post Road
 Contact Person: William Hurley Title: Engineering Manager
 Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org
 Site Address: _____
 Receiving Water (name/basin): Pine Creek
 Permit #: GSI 001992 Primary SIC: _____
 Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Location: WPCF-3 Person Collecting Sample: Chris Rogers

Date/Time Collected: 4/20/2015 11:15 am Date of Previous Storm Event: 4/17/2015

This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐

Check here if the sample contains **snow or ice melt**: ☐

Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	7.31	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	6.36	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	44	75 mg/L	<input type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	41	90 mg/L	<input type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	ND < 0.10	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	1.4	2.30 mg/L	<input type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.184	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual	ND < 0.04	0.059 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Zinc	Semi-annual	0.17	0.160 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	ND < 0.013	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

List here any parameter(s) that will not be sampled for the remainder of the permit term: *see note below*

Rev. 10/17/11

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: WPCF-3	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution		Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)		
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Hurley
Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Engineering Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
General and Sector G Transportation Facilities Only
Monitoring Requirements**

Permittee Name: Town of Fairfield	Permit #: GSI 001992
Site Name: WPCF-3	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

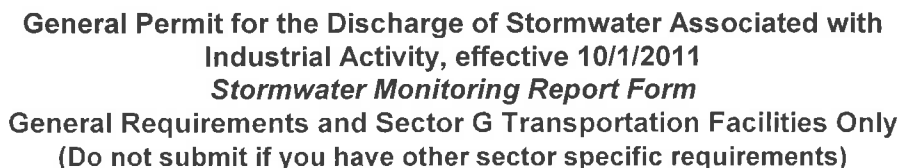
$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	6.36					5-9 S.U.	
COD	44					75 mg/L	
TSS	41					90 mg/L	
TP	ND < 0.10					0.40 mg/L	
TKN	1.4					2.30 mg/L	
NO ₃ -N	0.184					1.10 mg/L	
Total Copper	ND < 0.04					0.059 mg/L	
Total Zinc	0.17					0.160 mg/L	
Total Lead	ND<0.013					0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)(B)(iii) of the General Permit for a more detailed explanation.



Permittee Name: Town of Fairfield Site Name: WPCF-4
 Mailing Address: 725 Old Post Road
 Contact Person: William Hurley Title: Engineering Manager
 Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org
 Site Address: _____
 Receiving Water (name/basin): Pine Creek
 Permit #: GSI 001992 Primary SIC: _____
 Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Location: WPCF-4 Person Collecting Sample: Chris Rogers
Date/Time Collected: 4/20/2015 11:15 am Date of Previous Storm Event: 4/17/2015
This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐
Check here if the sample contains **snow or ice melt**: ☐
Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	7.31	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	6.76	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	91	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	100	90 mg/L	<input checked="" type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	0.31	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	1.9	2.30 mg/L	<input type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.103	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual	0.17	0.059 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Zinc	Semi-annual	0.94	0.160 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	0.071	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

Rev. 10/17/11

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: WPCF-4	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution		Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)		
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Hurley
Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Eng Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
General and Sector G Transportation Facilities Only
Monitoring Requirements**

Permittee Name: <u>Town of Fairfield</u>	Permit #: GSI <u>001992</u>
Site Name: <u>WPCF-4</u>	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	6.76					5-9 S.U.	
COD	91					75 mg/L	
TSS	100					90 mg/L	
TP	0.31					0.40 mg/L	
TKN	1.9					2.30 mg/L	
NO ₃ -N	0.103					1.10 mg/L	
Total Copper	0.17					0.059 mg/L	
Total Zinc	0.94					0.160 mg/L	
Total Lead	0.071					0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) of the General Permit for a more detailed explanation.



**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Stormwater Monitoring Report Form
General Requirements and Sector G Transportation Facilities Only
(Do not submit if you have other sector specific requirements)**

Facility Information

Permittee Name: <u>Town of Fairfield</u>	Site Name: <u>DPW-1</u>
Mailing Address: <u>725 Old Post Road</u>	
Contact Person: <u>William Hurley</u>	Title: <u>Engineering Manager</u>
Business Phone: <u>203-256-3015</u>	ext.: _____ Email: <u>whurley@fairfieldct.org</u>
Site Address: _____	
Receiving Water (name/basin): <u>Pine Creek</u>	
Permit #: GSI <u>001448</u>	Primary SIC: _____
Discharges into an Impaired Waterbody: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If yes, complete the table on page 3 of this form)	

Sample Information

Sample Location: <u>DPW-1</u>	Person Collecting Sample: <u>Chris Rogers</u>
Date/Time Collected: <u>4/20/2015 11:15 am</u>	Date of Previous Storm Event: <u>4/17/2015</u>
This report is for samples required: Semi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other <input type="checkbox"/>	
Check here if the sample contains snow or ice melt : <input type="checkbox"/>	
Check here if a benchmark exceedance is solely due to background or off site sources <input type="checkbox"/> see note below	

Monitoring Results

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	6.4	5.0 mg/L	<input checked="" type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	7.31	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	7.28	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	120	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	150	90 mg/L	<input checked="" type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	0.22	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	1.6	2.30 mg/L	<input type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.146	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual	ND < 0.04	0.059 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Zinc	Semi-annual	0.081	0.160 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	0.016	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

Exemptions

List here any parameter(s) that will not be sampled for the remainder of the permit term: <small>see note below</small>

NOTE: Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: DPW-1	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution		Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)		
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Hurley
Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Eng Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
General and Sector G Transportation Facilities Only
Monitoring Requirements**

Permittee Name: Town of Fairfield	Permit #: GSI 001448
Site Name: DPW-1	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

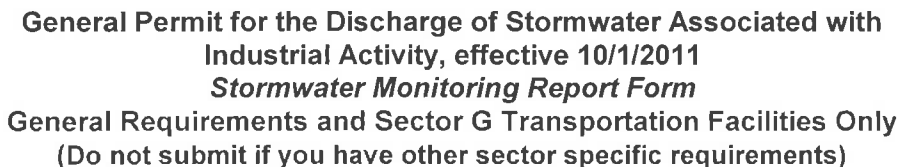
$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	6.4					5.0 mg/L	
Sample pH	7.28					5-9 S.U.	
COD	120					75 mg/L	
TSS	150					90 mg/L	
TP	0.22					0.40 mg/L	
TKN	1.6					2.30 mg/L	
NO ₃ -N	0.146					1.10 mg/L	
Total Copper	ND < 0.04					0.059 mg/L	
Total Zinc	0.081					0.160 mg/L	
Total Lead	0.016					0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) of the General Permit for a more detailed explanation.



Permittee Name: Town of Fairfield Site Name: DPW-2

Mailing Address: 725 Old Post Road

Contact Person: William Hurley Title: Engineering Manager

Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org

Site Address: _____

Receiving Water (name/basin): Pine Creek

Permit #: GSI 001448 Primary SIC: _____

Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Location: DPW-2 Person Collecting Sample: Chris Rogers

Date/Time Collected: 4/20/2015 11:15 am Date of Previous Storm Event: 4/17/2015

This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐

Check here if the sample contains **snow or ice melt**: ☐

Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	7.31	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	6.85	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	91	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	73	90 mg/L	<input type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	0.38	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	2.7	2.30 mg/L	<input checked="" type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.248	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual	ND < 0.04	0.059 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Zinc	Semi-annual	0.061	0.160 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	ND < 0.013	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

Rev. 10/17/11

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: DPW-2	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution		Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)		
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."


Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Eng Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
General and Sector G Transportation Facilities Only
Monitoring Requirements**

Permittee Name: <u>Town of Fairfield</u>	Permit #: GSI <u>001448</u>
Site Name: <u>DPW-2</u>	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

Average = $\frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	6.85					5-9 S.U.	
COD	91					75 mg/L	
TSS	73					90 mg/L	
TP	0.38					0.40 mg/L	
TKN	2.7					2.30 mg/L	
NO ₃ -N	0.248					1.10 mg/L	
Total Copper	ND < 0.04					0.059 mg/L	
Total Zinc	0.061					0.160 mg/L	
Total Lead	ND<0.013					0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) of the General Permit for a more detailed explanation.



**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Stormwater Monitoring Report Form
General Requirements and Sector G Transportation Facilities Only
(Do not submit if you have other sector specific requirements)**

Facility Information

Permittee Name: Town of Fairfield Site Name: Ground Products 1
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Engineering Manager
Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org
Site Address: _____
Receiving Water (name/basin): Pine Creek
Permit #: GSI 001871 Primary SIC: _____
Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Information

Sample Location: Ground Products 1 Person Collecting Sample: Chris Rogers
Date/Time Collected: 4/20/2015 11:15 am Date of Previous Storm Event: 4/17/2015
This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐
Check here if the sample contains **snow or ice melt**: ☐
Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Monitoring Results

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	10	5.0 mg/L	<input checked="" type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	7.31	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	7.05	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	770	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	870	90 mg/L	<input checked="" type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	2.8	0.40 mg/L	<input checked="" type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	13	2.30 mg/L	<input checked="" type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.242	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual	0.13	0.059 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Zinc	Semi-annual	0.46	0.160 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	0.068	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

Exemptions

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

NOTE: Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: Ground Products 1	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)			
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Hurley
Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Eng Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
General and Sector G Transportation Facilities Only
Monitoring Requirements**

Permittee Name: <u>Town of Fairfield</u>	Permit #: GSI <u>001871</u>
Site Name: <u>Ground Products 1</u>	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	10					5.0 mg/L	
Sample pH	7.05					5-9 S.U.	
COD	770					75 mg/L	
TSS	870					90 mg/L	
TP	2.8					0.40 mg/L	
TKN	13					2.30 mg/L	
NO ₃ -N	0.242					1.10 mg/L	
Total Copper	0.13					0.059 mg/L	
Total Zinc	0.46					0.160 mg/L	
Total Lead	0.068					0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) of the General Permit for a more detailed explanation.



**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Stormwater Monitoring Report Form**
General Requirements and Sector G Transportation Facilities Only
(Do not submit if you have other sector specific requirements)

Facility Information

Permittee Name: Town of Fairfield Site Name: Ground Products 2
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Engineering Manager
Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org
Site Address: _____
Receiving Water (name/basin): Pine Creek
Permit #: GSI 001871 Primary SIC: _____
Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Information

Sample Location: Ground Products 2 Person Collecting Sample: Chris Rogers
Date/Time Collected: 4/20/2015 11:15 am Date of Previous Storm Event: 4/17/2015
This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐
Check here if the sample contains **snow or ice melt**: ☐
Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Monitoring Results

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	7.31	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	6.88	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	2200	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	1300	90 mg/L	<input checked="" type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	7.4	0.40 mg/L	<input checked="" type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	19	2.30 mg/L	<input checked="" type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.438	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual	0.42	0.059 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Zinc	Semi-annual	0.96	0.160 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	0.14	0.076 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

Exemptions

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

NOTE: Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: Ground Products 2	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution		Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)		
Hour	00	24	48	00	24	48	00	24	48	00	24	48	
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
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25% C													
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50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Hurley
Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Eng Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
General and Sector G Transportation Facilities Only
Monitoring Requirements**

Permittee Name: <u>Town of Fairfield</u>	Permit #: GSI <u>001871</u>
Site Name: <u>Ground Products 2</u>	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	6.88					5-9 S.U.	
COD	2200					75 mg/L	
TSS	1300					90 mg/L	
TP	7.4					0.40 mg/L	
TKN	19					2.30 mg/L	
NO ₃ -N	0.438					1.10 mg/L	
Total Copper	0.42					0.059 mg/L	
Total Zinc	0.96					0.160 mg/L	
Total Lead	0.14					0.076 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) of the General Permit for a more detailed explanation.



General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Stormwater Monitoring Report Form
Sector H - Marinas, Yacht Clubs & Boat Dealers

Facility Information

Permittee Name: Town of Fairfield Site Name: Marina 1
Mailing Address: 725 Old Post Road
Contact Person: William Hurley Title: Engineering Manager
Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org
Site Address: _____
Receiving Water (name/basin): LIS
Permit #: GSI 002240 Primary SIC: _____
Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Information

Sample Location: Marina 1 Person Collecting Sample: Chris Rogers
Date/Time Collected: 4/20/2015 10:15 am Date of Previous Storm Event: 4/17/2015
This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐
Check here if the sample contains **snow or ice melt**: ☐
Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Monitoring Results

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	6.63	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	6.65	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	85	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	110	90 mg/L	<input checked="" type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	0.15	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	1.8	2.30 mg/L	<input type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.167	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual for the entire permit term	ND < 0.04	n/a		200.7	PH-0116
Total Zinc	Semi-annual	0.13	0.160 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	ND < 0.013	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

*See Additional Sector H Monitoring Section on page 3 of this form

Exemptions

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

NOTE: Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: Marina 1	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)			
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
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50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring: Sector H

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Total Iron	Semi-annual	2.9	1.0 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Aluminum	Semi-annual	1.3	0.75 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

Signature of Permittee

Date

Name of Permittee (print or type)

Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
Sector H –Marinas, Yacht Clubs & Boat Dealers**

Permittee Name: Town of Fairfield	Permit #: GSI 002240
Site Name: Marina 1	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location in the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

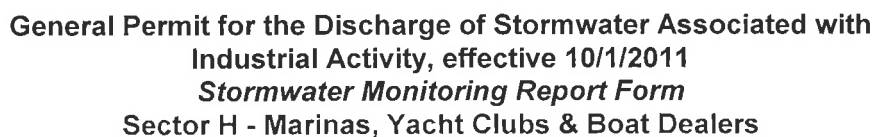
$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND					5.0 mg/L	
Sample pH	6.65					5-9 S.U.	
COD	85					75 mg/L	
TSS	110					90 mg/L	
TP	0.15					0.40 mg/L	
TKN	1.8					2.30 mg/L	
NO ₃ -N	0.167					1.10 mg/L	
Total Zinc	0.13					0.160 mg/L	
Total Lead	ND < 0.04					0.076 mg/L	
Total Iron	2.9					1.0 mg/L	
Total Aluminum	1.3					0.75 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit. There is no monitoring exemption for copper for this sector. Facilities in this sector must monitor for copper semi-annually for the entire permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) for a more detailed explanation.



Permittee Name: Town of Fairfield Site Name: Marina 3
 Mailing Address: 725 Old Post Rd
 Contact Person: William Hurley Title: Engineering Manager
 Business Phone: 203-256-3015 ext.: _____ Email: whurley@fairfieldct.org
 Site Address: _____
 Receiving Water (name/basin): LIS
 Permit #: GSI 002240 Primary SIC: _____
 Discharges into an Impaired Waterbody: Yes ☐ No ☒ (If yes, complete the table on page 3 of this form)

Sample Location: Marina 3 Person Collecting Sample: Chris Rogers
Date/Time Collected: 4/20/15 10:15 am Date of Previous Storm Event: 4/17/2015
This report is for samples required: Semi-annually ☒ Annually ☐ Other ☐
Check here if the sample contains **snow or ice melt**: ☐
Check here if a benchmark exceedance is solely due to background or off site sources ☐ see note below

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	6.63	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	7.18	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	140	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	280	90 mg/L	<input checked="" type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	0.32	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	1.9	2.30 mg/L	<input type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.111	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual for the entire permit term	ND < 0.04	n/a		200.7	PH-0116
Total Zinc	Semi-annual	0.19	0.160 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	ND < 0.013	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below

Rev. 10/17/11

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: Marina 3	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution		Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)		
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring: Sector H

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Total Iron	Semi-annual	6.5	1.0 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Aluminum	Semi-annual	4.3	0.75 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Hurley
Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Eng Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
Sector H –Marinas, Yacht Clubs & Boat Dealers**

Permittee Name: <u>Town of Fairfield</u>	Permit #: GSI <u>002240</u>
Site Name: <u>Marina 3</u>	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location in the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

Average = $\frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	7.18					5-9 S.U.	
COD	140					75 mg/L	
TSS	280					90 mg/L	
TP	0.32					0.40 mg/L	
TKN	1.9					2.30 mg/L	
NO ₃ -N	0.111					1.10 mg/L	
Total Zinc	0.19					0.160 mg/L	
Total Lead	ND < 0.013					0.076 mg/L	
Total Iron	6.5					1.0 mg/L	
Total Aluminum	4.3					0.75 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit. There is no monitoring exemption for copper for this sector. Facilities in this sector must monitor for copper semi-annually for the entire permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) for a more detailed explanation.



**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Stormwater Monitoring Report Form
Sector H - Marinas, Yacht Clubs & Boat Dealers**

Facility Information

Permittee Name: <u>Town of Fairfield</u>	Site Name: <u>Marina 7</u>
Mailing Address: <u>725 Old Post Rd</u>	
Contact Person: <u>William Hurley</u>	Title: <u>Engineering Manager</u>
Business Phone: <u>203-256-3015</u> ext.: _____	Email: <u>whurley@fairfieldct.org</u>
Site Address: _____	
Receiving Water (name/basin): <u>LIS</u>	
Permit #: GSI <u>002240</u>	Primary SIC: _____
Discharges into an Impaired Waterbody: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If yes, complete the table on page 3 of this form)	

Sample Information

Sample Location: <u>Marina 7</u>	Person Collecting Sample: <u>Chris Rogers</u>
Date/Time Collected: <u>4/20/2015 10:15 am</u>	Date of Previous Storm Event: <u>4/17/2015</u>
This report is for samples required: Semi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other <input type="checkbox"/>	
Check here if the sample contains snow or ice melt : <input type="checkbox"/>	
Check here if a benchmark exceedance is solely due to background or off site sources <input type="checkbox"/> <small>see note below</small>	

Monitoring Results

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	6.63	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	6.71	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	85	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	60	90 mg/L	<input type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	0.12	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	1.5	2.30 mg/L	<input type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.202	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual for the entire permit term	ND < 0.04	n/a		200.7	PH-0116
Total Zinc	Semi-annual	0.071	0.160 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	ND < 0.013	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

***See Additional Sector H Monitoring Section on page 3 of this form**

Exemptions

List here any parameter(s) that will not be sampled for the remainder of the permit term: <small>see note below</small>

NOTE: Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: Marina 8	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution		Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)		
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring: Sector H

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Total Iron	Semi-annual	2.4	1.0 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Aluminum	Semi-annual	1.4	0.75 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Huley
Signature of Permittee

6/4/15
Date

William Huley
Name of Permittee (print or type)

Eng Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION
79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
Sector H –Marinas, Yacht Clubs & Boat Dealers**

Permittee Name: <u>Town of Fairfield</u>	Permit #: GSI <u>002240</u>
Site Name: <u>Marina 7</u>	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location in the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	6.71					5-9 S.U.	
COD	85					75 mg/L	
TSS	60					90 mg/L	
TP	0.12					0.40 mg/L	
TKN	1.5					2.30 mg/L	
NO ₃ -N	0.202					1.10 mg/L	
Total Zinc	0.071					0.160 mg/L	
Total Lead	ND < 0.013					0.076 mg/L	
Total Iron	2.4					1.0 mg/L	
Total Aluminum	1.4					0.75 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit. There is no monitoring exemption for copper for this sector. Facilities in this sector must monitor for copper semi-annually for the entire permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is ½ the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) for a more detailed explanation.



**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Stormwater Monitoring Report Form
Sector H - Marinas, Yacht Clubs & Boat Dealers**

Facility Information

Permittee Name: <u>Town of Fairfield</u>	Site Name: <u>Marina 8</u>
Mailing Address: <u>725 Old Post Rd</u>	
Contact Person: <u>William Hurley</u>	Title: <u>Engineering Manager</u>
Business Phone: <u>203-256-3015</u>	ext.: _____ Email: <u>whurley@fairfieldct.org</u>
Site Address: _____	
Receiving Water (name/basin): <u>LIS</u>	
Permit #: GSI <u>002240</u>	Primary SIC: _____
Discharges into an Impaired Waterbody: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If yes, complete the table on page 3 of this form)	

Sample Information

Sample Location: <u>Marina 8</u>	Person Collecting Sample: <u>Chris Rogers</u>
Date/Time Collected: <u>4/20/2015 10:15 am</u>	Date of Previous Storm Event: <u>4/17/2015</u>
This report is for samples required: Semi-annually <input checked="" type="checkbox"/> Annually <input type="checkbox"/> Other <input type="checkbox"/>	
Check here if the sample contains snow or ice melt: <input type="checkbox"/>	
Check here if a benchmark exceedance is solely due to background or off site sources <input type="checkbox"/> see note below	

Monitoring Results

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	ND < 5.0	5.0 mg/L	<input type="checkbox"/>	1664A	PH-0116
Rainfall pH	Semi-annual	6.63	n/a		4500H-B	PH-0116
Sample pH	Semi-annual	7.04	5-9 SU	<input type="checkbox"/>	4500H-B	PH-0116
COD	Semi-annual	96	75 mg/L	<input checked="" type="checkbox"/>	5220D	PH-0116
TSS	Semi-annual	78	90 mg/L	<input type="checkbox"/>	2540D	PH-0116
TP	Semi-annual	0.19	0.40 mg/L	<input type="checkbox"/>	365.4	PH-0116
TKN	Semi-annual	2.0	2.30 mg/L	<input type="checkbox"/>	351.2	PH-0116
NO ₃ -N	Semi-annual	0.217	1.10 mg/L	<input type="checkbox"/>	300.0	PH-0723
Total Copper	Semi-annual for the entire permit term	ND < 0.04	n/a		200.7	PH-0116
Total Zinc	Semi-annual	0.081	0.160 mg/L	<input type="checkbox"/>	200.7	PH-0116
Total Lead	Semi-annual	ND < 0.013	0.076 mg/L	<input type="checkbox"/>	200.7	PH-0116
24 Hr. LC ₅₀	Annual-Year 1&2		n/a			
48 Hr. LC ₅₀	Annual-Year 1&2		n/a			

***See Additional Sector H Monitoring Section on page 3 of this form**

Exemptions

List here any parameter(s) that will not be sampled for the remainder of the permit term: <small>see note below</small>

NOTE: Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.

STORMWATER ACUTE TOXICITY TEST DATA SHEET
(required annually only during Year 1 and Year 2 of the permit)

Site Name: Marina 8	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)			
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

REFERENCE TOXICANT RESULTS

Test Species	Date	Reference Toxicant	Source	LC ₅₀
<i>Daphnia pulex</i>				

Additional Monitoring: Sector H

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Total Iron	Semi-annual	2.8	1.0 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116
Total Aluminum	Semi-annual	1.6	0.75 mg/L	<input checked="" type="checkbox"/>	200.7	PH-0116

Additional Monitoring for Discharges to Impaired Waters (if applicable):

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

Statement of Certification

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

William Hurley
Signature of Permittee

6/4/15
Date

William Hurley
Name of Permittee (print or type)

Eng Manager
Title (if applicable)

Signature of Preparer (if different than above)

Date

Name of Preparer (print or type)

Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR
BUREAU OF WATER PROTECTION AND LAND REUSE
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79 ELM STREET
HARTFORD, CT 06106-5127

**General Permit for the Discharge of Stormwater Associated with
Industrial Activity, effective 10/1/2011
Data Tracking Sheet
Sector H –Marinas, Yacht Clubs & Boat Dealers**

Permittee Name: <u>Town of Fairfield</u>	Permit #: GSI <u>002240</u>
Site Name: <u>Marina 8</u>	
Site Address: _____	
Sample Location: _____	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location in the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	4/20/15						
O&G	ND < 5.0					5.0 mg/L	
Sample pH	7.04					5-9 S.U.	
COD	96					75 mg/L	
TSS	78					90 mg/L	
TP	0.19					0.40 mg/L	
TKN	2.0					2.30 mg/L	
NO ₃ -N	0.217					1.10 mg/L	
Total Zinc	0.081					0.160 mg/L	
Total Lead	ND < 0.013					0.076 mg/L	
Total Iron	2.8					1.0 mg/L	
Total Aluminum	1.6					0.75 mg/L	

*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit. There is no monitoring exemption for copper for this sector. Facilities in this sector must monitor for copper semi-annually for the entire permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

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