

## NORTH FRONT RANGE WATER QUALITY PLANNING ASSOCIATION 257 Johnstown Center Dr.; Unit 206 Johnstown, CO 80534 970-587-8872 - http://www.nfrwqpa.org

## 208 Areawide Water Quality Management Plan Amendment Interceptors Eligible for Certification

(60-Day Public Notice Required)

To meet the plan amendments minimum requirements, all items are required and must be included to be accepted for review and considered for approval. Submitted references to other materials is not acceptable, i.e., refer to.., or see..

	*	•			•
A. Project and System Infor	mation.				
Applicant / Entity					
Representative Name / Title					
Project Title					
Address					
Email					
Phone					
County					
B. Project Design Company	Information.				
Design Company Name					
Design Engineer			CO License Number	er	
Address					
Addiess					
Email					
Phone			Date of Ap	plication:	
C. Interceptor Hydraulic Capacity Determination.					
Is the Proposed Intercepto people or less.	r design peak	hour hydraulic capa	city equal to or less than	50,000 gpd	serving 667
Yes:		No: 🗌			
If Yes, proceed with the app If No, and the Interceptor d		r hydraulic canacity	is greater than 50 000 and	l and serves	more than 667 people per
day, the Agency's Utility Pla	an must be upd	lated to include the I	Interceptor project before	Site Applica	
D. Current Wastewater Uti					
WUSA Boundary currently	recognized an	d approved:	Proposed Interceptor co		
WUSA map: https://nfrwqpa.colorado .gov/agency-service-area- maps			Maximum Month Average Hydraulic Capacity in million gallons per day (MGD)	5	N/A
Latitude & Longitude of Lift Station			Peak Hour Hydraulic Capacity in million gallons per day (MGD)		MGD
County			Organic Capacity (lbs. BOD <sub>5</sub> /day)		N/A
The current WUSA or proposed W			ement or Operating agency has		

types of water rights within the WUSA boundary. This may be demonstrated by a map illustrating water providers and differing water rights by crosshatched boundaries overlayed on a WUSA Map.

WUSA Population Information					
Current WUSA Population of				Projections:	
Current population:	Current SFEs:				
5 Years:	5 Years:				
10 Years: 15 Years;					
20 Years:			15 Years: 20 Years:		
Population Source:		SFEs Source/Fac		1	
Receiving Agency WWTF pro	jected loads.				
Current or anticipated WW	· ·	urrent or anticipate	ed WWTF Organi	ic loads (lbs. BC	DD5/day):
Design Capacity (mgd)		rganic Design Capa		· · · · · · · · · · · · · · · · · · ·	
Current Flow Load	Cı	urrent Organic Load			
5 Year Flow Load	5	Year Organic Load			
10 Year Flow Load	10	Year Organic Load			
15 Year Flow Load	15	Year Organic Load			
20 Year Flow Load	20	Year Organic Load			
Year at 80% Design Capacity		ear at 80% Design			
Year at 95% Design Capacity	Ye	ear at 95% Design apacity			
<ol><li>NFRWQPA GIS Databa</li></ol>	stewater Utility Service Area Map se; https://data-nfrwqpa.hub.ard		colorado.gov/age	ency-service-are	a-maps
Project Agency Capacity.  Current WWTF load include	ing proposed interceptor.	WWTE Approved	d Canacitus		
Maximum Month Average	ng proposed interceptor:	Maximum Month		1	
Hydraulic Capacity in million gallons per day (MGD)	MG	Hydraulic Capaci	ity in		MGE
Peak Hour Hydraulic Capacity in million gallons per day (MGD) Organic Capacity (lbs.		GD Peak Hour Hydraulic Capacity in million gallons per day (MGD)		MGE	
BOD <sub>5</sub> /day)	lbs. BOD <sub>5</sub> /da				
		Organic Capacity	(lbs. BOD <sub>5</sub> /day)		lbs. BOD <sub>5</sub> /day
E. Funding Process.				16	
Will the State Revolving Fun- finance any portion of the pi	d (SRF) loan program be used to roject?	Yes:□	No:□	If yes, please list project number.	
Is the project self-funded?		Yes:□	No:□		
F. Project Schedule and Co					
Estimated Bid Opening Date		Estimated Cons	struction Start Dat	te:	
Estimated Bid Closing Date: Estimated Project Cost		Estimated Com	nletion Date:		
,	o and Land Use, Appendix C.	Edilliated Colli	ipiotion Bato.		
	erceptor location and current and	d or proposed land u	se zoning maps o	f the WUSA and	interceptor
Project Site.			3		<b>-</b>
Sources of information:					
	Cover Dataset (NLCD, http://www		da gov/		
<ol><li>Colorado State Univer</li></ol>					
4. County and city land		erese deress the			

H. Floodplain (FEMA) or other natural Hazards, Appendix D.				
	in a 100-year floodplain or other nat			
	rsely affected by floodplain or other		are identified at the	
selected site, the report sha	all describe means of mitigating the h	nazard.		
I. Land Ownership, Apper	odiv F			
	ing control of the site for the project	life or showing the ability of the on	tity to acquire the site and	
use it for the project life.		the or showing the ability of the en	tity to acquire the site and	
use it for the project the.	•			
J. Right of Way Easement	ts, Appendix F.			
Legal arrangements showi	ng control of the site or right-of-way	for the project life or showing the a	ability of the entity to acquire	
the site or right-of-way a	nd use it for the project life. Noting			
Application approval.				
·	the agency or receiving agency has			
Receiving Agency Capaci		Current agency/system WWTF a	pproved design capacity	
Applicant Legal		Maximum Month Average		
Representative (e.g.,		WWTF Hydraulic Capacity		
Public Works Director)		in million gallons per day	MGD	
Typed Name:		(MGD)		
Signature:		Peak Hour WWTF Hydraulic		
		Capacity in million gallons per day	MGD	
Doto		(MGD)		
Date:		Organic Capacity (lbs. BOD5/day) - WWTF Only	lbs. BOD₅/day	
L. Receiving Agency Discharge Downstream Distances; NFRWQPA GIS Database; https://data-nfrwqpa.hub.arcgis.com/.				
The applicant must provide	the receiving agency's WWTF discha	arge relationship to other water and	wastewater treatment plants	
in the area by providing a 1	1-mile radius map to all drinking wate	er wells and sources and a 5-mile rac	lius map to all wastewater	
facilities. Providing the distances to the nearest water supply intake, name of supply and the next nearest discharge point, name of the facility, to the proposed WWTF discharge point. The applicant must determine if the new or additional interceptor				
	ther discharges on the stream segmen			
	the discharge point to the nearest dius map of domestic water supplies,		or supply: Address of supply:	
Distance:				
Name of Supply:				
Address of Supply:				
Address of supply.				
	the discharge point to the next near lius map of permitted discharges, App		e user? Address of the user?	
Distance:				
Name of User:				
Address of User:				
, , , , , , , , , , , , , , , , , , , ,				
Will the additional discharg	ge of the Lift Station affect other disc	chargers on the stream segment? Nar	ne of the user? Address of the	
user? No:	Yes: □			

Distance:					
Name of User:					
Address of User:					
If yes, explain:					
M. Receiving Agency WWTF D					0 12 11 21 2
The Stream Segment and EPA and Assessment Report here:	Classifications may be obtained	ained with Divisions	Section 305(b)	Integrated Water	Quality Monitoring
https://cdphe.colorado.gov/r	ulemaking-boards-and-com	nmissions/water-qu	ality-control-cor	nmission/water-g	uality-control-
commission	atomating source and con-	minosiono, yyatto, qu	<u> </u>		tation control
Stream Segment WID:					
Stream Segment WID Description	າ:				
Stream Segment Description:				es/Miles:	
Stream Segment IR Category: EPA Classified Use	Assassment	Apalyto	Recreatio		Priority
Aquatic Life Use	Assessment	Analyte	C.	ategory / List	Priority
Recreation					
Agriculture					
Water Supply					
Wetlands					
Aquatic Life Use					
N. Receiving Agency WWTF D					
The Stream Segment TMDLs may		ons Regulation #93 a	and the 303(d) li	st of impaired wat	ers here:
https://cdphe.colorado.gov/in	npaired-waters				
Stream Segment WID:					
Stream Segment WID Description Affected Use	Analyte		Category / List		Priority
Arrected OSC	Anatyce		Category / List		THOTICY
			+		
O. Receiving Agency CDPS Per	rmit Drimary Effluent Lin	oits (DELs), or Noti	co of Authoriza	tion (NOA) require	oments and
constraints, Appendix I.	iiiit, Friiiiary Efficient Liii	illes (PELS), OF NOU	Le of Authoriza	tion (NOA) requir	anients and
CDPS permit or PELs descript	ion and information:				
CDPS #:		Expiration Da	te:		
PELs #:		Expiration Da			
CDPS Status:	Active:	'		stratively Extende	d: □
NOA #:			U.	•	_ <del>_</del>
Other CDPS or PELs info:					
d) Will the interceptor create a	ny difficulties in meeting	the water quality li	mits of the CDPS	S, PELs, or NOA:	
Explain:					
P. Responsible Parties.					
What agency or entity is finan	cially responsible for the c	construction of the i	nterceptor?		
What agency or entity has the	financial responsibility for	owning and long to	arm operating o	mense of the inter	centor?
what agency of entity has the	imancial responsibility for	Owning and tong-te	in operating ex	pense or the litter	серия:

NII	6		1		
What agency or entity has the	financial responsibility for mana	aging a	nd operating expense of	the interceptor af	ter construction?
O 208 Areawide Water Oual	ity Management Plan Considera	tions			
	projects in the region, indicate		nis proiect aligns with th	ne Association's cu	rrent 208 Areawide
Water Quality Management	Plan to ensure present and fut				
protecting, maintaining, or re	estoring water quality.				
R. Agency Point Source Inver	ntory Data: Appendix J.				
	Point Source Inventory Data sun	nmary	for adoption into the 208	3 AWQMP. Example	es may be viewed
	ps://nfrwqpa.colorado.gov/age				·
S. Responsible Party Certific	ation				
	eligible for certification cannot	apply	for a 208 AWOMP amend	ment and must up	date the said
	project before NFRWQPA site a				
System Name					
Project Title					
County					
Receiving Treatment Entity	Information – Certification of A	vailab	le Treatment Capacity		
Receiving Treatment Entity			Receiving Treatment Pl	ant	
CDPS Permit No.			Permit Capacity		
Site Location Approval			Site Location Approved		
No. (Appendix K)			Capacity		
•	capacity impacts on receiving t	reatme	ent plant		
Proposed maximum month av				MGD	
Proposed peak hour hydraulic				MGD	
•	erage organic loading capacity:			lbs BOD₅/day	
·	l increase the receiving treatment	•	, ,		lant capacity)
·	l increase the receiving treatment	<u> </u>	<u> </u>		lant capacity)
~	nent capacity information in ac			<u> </u>	arge permit
	tment plant is not presently receive location approval and discharge				
	proposed treatment works (initial				
	OR				
	tment plant does not currently ha				
	n, or will be in a phased construct t the projected discharge from the				
, , , , , , , , , , , , , , , , , , , ,		,	Estimated date capaci	,	
I certify that the receiving treatme	nt entity information presented above	is corre	•	•	le (or will be
	er produced by the proposed intercep			, , ,	<u> </u>
Receiving Treatment Entity	Representative				
Position/Title:	Typed Name:	Sign	ature:		Date:

Email:	Phone:
NFRWQPA Plan Amendment-Interceptors - Final - Pro	otected.docx

## Recommendation of Review Agencies

Signature of Management Agency (Applicant), if different from other entities listed below  Role	NOTE: N	NOTE: NFRWQPA will route and acquire the required signatures, not the applicant.				
Signature of County Planning Department Role						
Signature of County Planning Department Role Date Typed Name / Agency Signature    Recommend Approval? Yes   No   No   No   No   No   No   No   N	Kole	Date	Typed Name / Agency	Signature		
Signature of County Planning Department Role Date Typed Name / Agency Signature    Recommend Approval? Yes   No   No   No   No   No   No   No   N						
Signature of County Planning Department Role Date Typed Name / Agency Signature    Recommend Approval? Yes   No   No   No   No   No   No   No   N				Percommend Approval? Ves No.		
Role Date Typed Name / Agency Signature    Recommend Approval? Yes	Signature of County Plannin	ng Denartme	ent	Recommend Approvat: Tes     No		
Recommend Approval?   Yes   No     No		· .		Signature		
1. Adjacent Signature of City or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval   No	Role	Date	Typed Name / Agency	Signature		
1. Adjacent Signature of City or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval   No						
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Role Date Typed Name / Agency Signature  Recommend Approval? Yes	1. Adjacent Signature of C	ity or Town	, could be multiple adjacent bound			
Recommend Approval?   Yes   No     No				51 ,		
2. Adjacent Signature of Čity or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval  Role  Date  Typed Name / Agency  Signature  Recommend Approval?   Yes	Role	Date	Typed Name / Agency	Signature		
2. Adjacent Signature of Čity or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval  Role  Date  Typed Name / Agency  Signature  Recommend Approval?   Yes						
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Role   Date   Typed Name / Agency   Signature						
Role Date Typed Name / Agency Signature  Recommend Approval? Yes		lity or Town	, could be multiple adjacent bound	daries of WUSA Amendment being proposed needed		
Recommend Approval? Yes		Date	Typed Name / Agency	Signature		
3. Adjacent Signature of City or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval  Role  Date  Typed Name / Agency  Signature  Recommend Approval?   Yes   No    Signature of Local Health Authority  Role  Date  Typed Name / Agency  Signature  Recommend Approval?   Yes   No    Recommend Approval?   Yes   No    Signature of Other Basin Water Quality Authority, Watershed Association, Watershed Authority, etc., if the facility is located in a Water Quality Control Commission Watershed Protection Control Area.  Role  Date  Typed Name / Agency  Signature  Recommend Approval?   Yes   No    Recommend Approval?   Yes   No    Signature of North Front Range Water Quality Planning Association  NOTE: NFRWQPA signature is obtained, including the Association's recommendation, after the public hearing decision of the 208 plan amendment.  Role  Date  Typed Name / Agency  Signature  Signature		2 4.50	. ypou mame / ngoney	<b>0.5</b>		
3. Adjacent Signature of City or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval  Role  Date  Typed Name / Agency  Signature  Recommend Approval?   Yes   No    Signature of Local Health Authority  Role  Date  Typed Name / Agency  Signature  Recommend Approval?   Yes   No    Recommend Approval?   Yes   No    Signature of Other Basin Water Quality Authority, Watershed Association, Watershed Authority, etc., if the facility is located in a Water Quality Control Commission Watershed Protection Control Area.  Role  Date  Typed Name / Agency  Signature  Recommend Approval?   Yes   No    Recommend Approval?   Yes   No    Signature of North Front Range Water Quality Planning Association  NOTE: NFRWQPA signature is obtained, including the Association's recommendation, after the public hearing decision of the 208 plan amendment.  Role  Date  Typed Name / Agency  Signature  Signature						
Role Date Typed Name / Agency Signature  4. Adjacent Signature of City or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval Role Date Typed Name / Agency Signature  Signature of Local Health Authority Role Date Typed Name / Agency Signature  Recommend Approval? Yes   No   Signature   No   Signature						
Role Date Typed Name / Agency Signature    Recommend Approval?   Yes   No	3. Adjacent Signature of C	City or Town	i, could be multiple adjacent bound	daries of WUSA Amendment being proposed needed		
Adjacent Signature of City or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval  Role  Date  Typed Name / Agency  Signature  Recommend Approval?  Yes   No   Signature  Recommend Approval?  For a proval  Recommend Approval?  Signature	Role	Date	Typed Name / Agency	Signature		
4. Adjacent Signature of City or Town, could be multiple adjacent boundaries of WUSA Amendment being proposed needed for approval  Role Date Typed Name / Agency Signature  Recommend Approval? Yes	Note	Dute	Typea Name / Agency	J.g. iacai c		
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Role Date Typed Name / Agency Signature  Recommend Approval? Yes						
Role Date Typed Name / Agency Signature  Recommend Approval? Yes		City or Town	, could be multiple adjacent bound	daries of WUSA Amendment being proposed needed		
Recommend Approval? Yes		Date	Typed Name / Agency	Signature		
Signature of Local Health Authority Role Date Typed Name / Agency Signature  Recommend Approval? Yes			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- 3		
Signature of Local Health Authority Role Date Typed Name / Agency Signature  Recommend Approval? Yes						
Role Date Typed Name / Agency Signature  Recommend Approval? Yes				Recommend Approval? Yes   No		
Recommend Approval? Yes	_					
Signature of Other Basin Water Quality Authority, Watershed Association, Watershed Authority, etc., if the facility is located in a Water Quality Control Commission Watershed Protection Control Area.  Role  Date  Typed Name / Agency  Signature  Recommend Approval?  Yes  No  Signature  Signature of North Front Range Water Quality Planning Association  NOTE: NFRWQPA signature is obtained, including the Association's recommendation, after the public hearing decision of the 208 plan amendment.  Role  Date  Typed Name / Agency  Signature	Role	Date	Typed Name / Agency	Signature		
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Role   Date   Typed Name / Agency   Signature				Watershed Authority, etc., if the facility is		
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208 plan amendment.  Role Date Typed Name / Agency Signature				mondation often the mublic beauties desiries of the		
Role Date Typed Name / Agency Signature		is optained,	including the Association's recom	mendation, after the public hearing decision of the		
	-	Date	Typed Name / Agency	Signature		
Recommend Approval?   Yes     No	Note	Date	Typed Name / Agency	Jigilatule		
Recommend Approval? Yes						
				Recommend Approval? Yes No		
		<u> </u>				

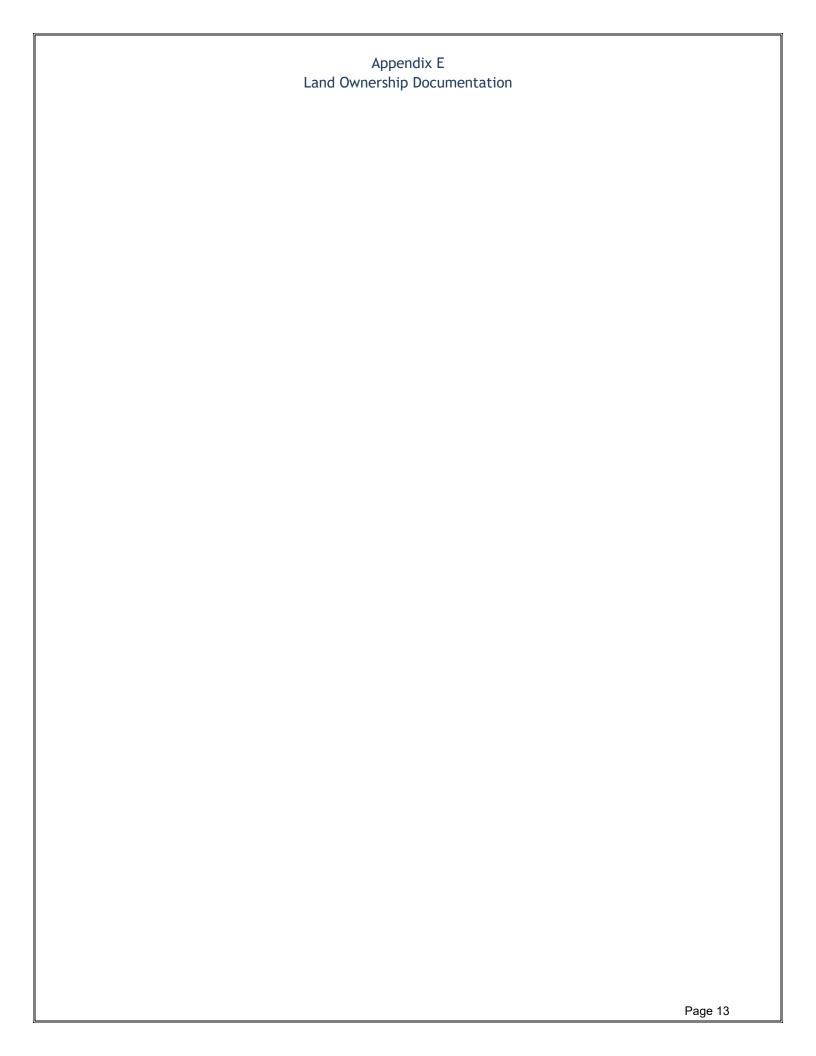
Review Agency Comments:
Page 8

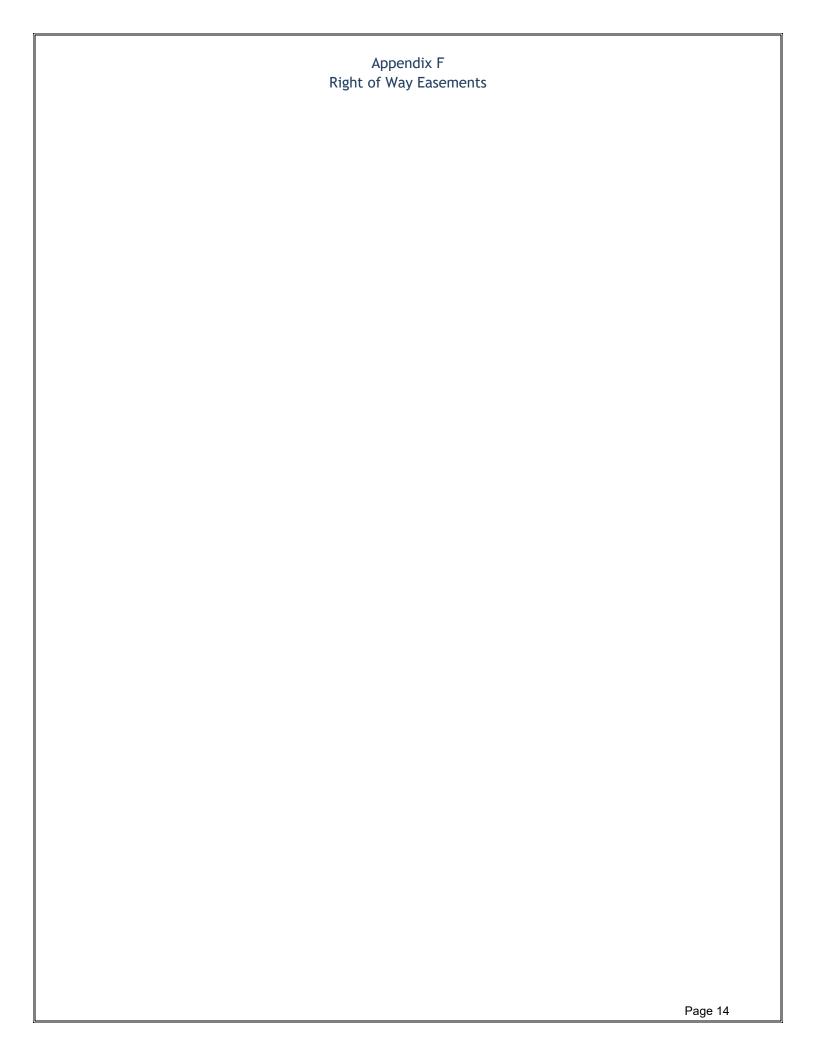
Appendix A Current WUSA Map recognized and approved by NFRWQPA	

ī	Арр Лар Identifying Stream Segment WID,	pendix B WWTF, discharge location, and Intercept	or
			Page 10

Appendix C Land use and Zoning Map of WUSA and Interceptor Project Site	
	Page 11

Appendix D FEMA Flood Plain Maps identifying the proposed Lift Station site	
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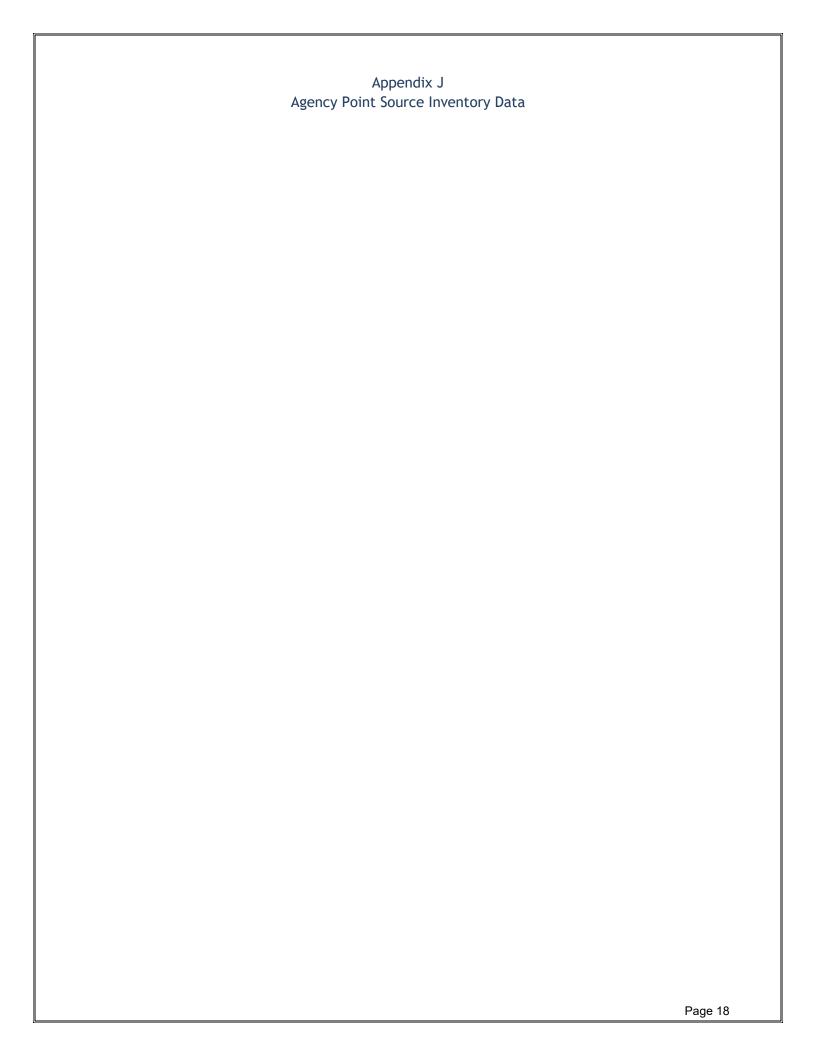




Appendix G 1-mile Radius Map Identifying Drinking Water wells or	water sources
	Page 15

Appendix H 5-mile Radius Map Identifying other permitted discharges sources	
	Page 16

CDPS Permit, Pr	imary Effluent Limits (PEL	Appendix I _s), or Notice of Authorization (NOA) requirement constraints	s and
		F	Page 17



Appendix K Wastewater Treatment Facility Site Application Approval	
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