

Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name/Title of Principal Executive Officer or Authorized Agent (Type or Print):

Telephone No.: _____

Signature of Principal Executive Officer or Authorized Agent:

Date (mm/dd/yy): _____

INSTRUCTIONS FOR TREATMENT FACILITY BIOSOLIDS ANNUAL SUMMARY FORM

Each facility permitted to land apply biosolids shall complete this form in accordance with Chapter 62-640, Florida Administrative Code, (F.A.C.). The permittee, by no later than February 19 of the year following the reporting period, shall submit the original completed form to the appropriate Department District Office or delegated local program. Use additional sheets if necessary. All information shall be typed or printed in ink.

Part I - Facility Information

Facility Name/Address: Enter the facility name and mailing address as shown on the facility wastewater permit.

Facility ID: Enter the facility identification number as it appears on the facility wastewater permit.

Monitoring Period: Enter the year of the reporting period. A new facility shall report all information from the start of operation through December 31 of its first year.

Total Quantity of Biosolids Land Applied During Reporting Period: Enter the total quantity of biosolids from this facility that was land applied during the reporting period in dry tons (1 ton = 2000 lb).

Total Number of Biosolids Sites Used During Reporting Period: Enter the total number of biosolids application sites used during this reporting period. These sites must be listed in Part II of this report (**include both Florida and out-of-state sites**).

Part II - Summary of Biosolids sent to Biosolids

Application Sites: Enter the applicable information to document the quantity of biosolids sent to each biosolids application site used by the facility during the reporting period. This includes sites in Florida and out-of-state. Attach additional sheets as needed to identify all the land application sites used by the facility.

Site Name: Enter the site name as identified in the Facility Biosolids Plan.

Site ID: Enter the official DEP site identification number as identified in the Facility Biosolids Plan.

Quantity of Biosolids Sent to Site (Dry Tons): Enter the quantity of biosolids sent to the biosolids application site in dry tons. Be sure to correctly convert quantities (i.e. gallons, wet tons, cubic yards) to dry tons.

Comments: Enter any comments deemed appropriate to provide any relevant information to DEP.

Certification: This report must be signed in accordance with Chapter 62-640, F.A.C. Type or print the name and title of the signing official. Include the telephone number where the official may be reached and the date the report is signed.

Basic Formulas for Calculating Dry Tons

A. Dry tons = Wet tons x Percent Solids (decimal)

Example: 40 wet tons of biosolids at 15% total solids

$$\text{Dry tons} = 40 \times 0.15$$

$$\text{Dry tons} = 6$$

B. Dry tons = gallons of biosolids x 8.34 lb/gallon x ton/2000 lb x Percent Solids (decimal)

Example: 6,000 gallons of biosolids at 4% total solids

$$\text{Dry tons} = 6000 \text{ gal} \times 8.34 \text{ lb/gal} \times \text{ton}/2000 \text{ lb} \times 0.04$$

$$\text{Dry tons} = 1$$

C. Dry tons = cubic yards (wet) of biosolids x Y lb/cubic yard x ton/2000 lb x Percent Solids (Y = site-specific bulk density of biosolids)

Example: 20 cubic yards of biosolids at 15% total solids and 1800 lb/cubic yard

$$\text{Dry tons} = 20 \text{ cu yds} \times 1800 \text{ lb/cu yds} \times \text{ton}/2000 \text{ lb} \times 0.15$$

$$\text{Dry tons} = 2.7$$