

## **Lagoon Compliance Inspection**

Remote

ID:

System EARL GREY WASTEWATER WORKS Inspection Name:

1208032

Approval

00003149-00-00

Population: 229

No: Date:

09-JUN-2023 14:29

Announced: Yes

Person

OLLINGER, CORLEY **Interviewed:** 

**General Section** 

Wastewater Treatment Type: LAGOON **System Classification:** ONE WWT ONE WWC

Sewage

**MUNICIPAL** 

**Discharge Easement:** 

Yes

**Categorization: Collection Type:** 

**GRAVITY** 

**Comments:** 

LOCATION OF DUMP SITE NOT IDEAL (SE CORNER OF OLD HOLDING CELL). WOULD PREFER TO SEE SEPTIC TRUCKS DUMP INTO THE OLD PRIMARY SIDE OF THE CELL BY THE FORMER DIVIDE. SEPTIC DUMPED IN AT CURRENT SITE WILL SHORT CIRCUIT AND NOT RECEIVE AS MUCH TREATMENT TIME AS IS REQUIRED. SOME MINOR CATTAIL AND BULLRUSH GROWTH THAT CAN BE TENDED TO IN CELL ONE.

## Contacts

Name	Position	Phone / Fax	Email
HUPKA BUTZ, DEBBIE	MAYOR	Business: (306) 939-2007	N/A
HUBER, COURTNEY	ADMINISTRATOR	Phone: (306) 939-2062 Cell: (306) 540- 7097	EARLGREYVILLAGE@SASKTEL.NET
REGINA, SHA	OTHER - HEALTH REGION	Phone: (306) 766-7755	ENVIRONMENTALHEALTH@RQHEALTH.CA
OLLINGER, CORLEY	OPERATOR	Phone: (306) 718-7040	EARLGREYFOREMAN@SASKTEL.NET
HODGES, NEIL	ENVIRONMENTAL PROJECT OFFICER	Cell: (306) 630- 6045	NEIL.HODGES@WSASK.CA

## **Operator Certification Section**

	Certifica	Certification Levels		Omewater is a	
Operator Name	Wastewater Collection	Wastewater Treatment	Expiry Date	Operator is a Supervisor	
OLLINGER, CORLEY	SMALL SYSTEMS	SMALL SYSTEMS	15-JAN-2024	Yes	

**Discharge Area** 

**Discharge Type:** <u>INTERMITTENT</u>

**Disinfection:** No

**Effluent Treatment:** FACULTATIVE LAGOON

Discharge Area: OVERLAND SLOUGH

Land Use in Receiving Area:

PASTURE/SLOUGH

**Nearest Residence:** 

1 KM

**Latitude:** 505614.73 **Longitude:** -1044141.61

**Discharge Area Comments:** 

**Sludge Handling** 

Final Sludge Disposal:

N/A

Final Sludge

Handling:

N/A

Total Pumping Stations Pumping

**Stations:** 

**By-Pass** Number of Potable Adequate Backup **Pumping** Mechanical Type of Water **Backflow** Station # Wet Dry Ventilation Exhaust **Power** Pumps Works Date Reported Outlet Protection Wells Wells FORCED N 2 0 Y N/A N N N Y 1 1 DRAFT

1

**Total Storage Total Treatment** Lagoons <u>1</u> 2 Cells: Cells:

Cell Number	Cell Type	Freeboard Estimate (m)	Odour	Liquid Color	Dyke Condition	Seepage
1 AND 2	TREATMENT	0.7	NONE	CLOUDY BROWN GREEN	GOOD	NONE EVIDENT
3	STORAGE	0.7	NONE	CLEAR GREEN	EXCELLENT	NONE EVIDENT

**Lagoon Discharge** 

Cell Number	Date Started	<b>Date Finished</b>	Starting Freeboard (m)	Ending Freeboard (m)	Volume Discharged (m <sup>3</sup> )
3	May 8, 2023	May 10, 2023	0.9m	1.5m	339.3m <sup>3</sup>

Regulatory Section
C=Compliant NC=Non-Compliant N/A=Not Applicable

C	NC	NA	General	Comments
X			Approved system EMPA2010 24(1)	
X			Certified operator WWSW 62	
X			No interconnection between sanitary sewer and storm sewer WWSW 7	
			Sewage Pumping Stations	
X			Pumping stations must have mechanically forced air ventilation WWSW 8(1)	
			Lagoons	
X			Lagoon cells inspected on frequency as specified in permit EMPA2010 29(1)	
X			Inter cell transfer valve closed prior to discharge EMPA2010 29(1)	OVERFLOW STRUCTURE IN USE YEAR ROUND. TRANSFER VALVE IS ALWAYS CLOSED WHEN IN OPERATION.
X			Lagoon discharged after spring runoff and before November 1st EMPA2010 29(1)	
X	Notification of downstream affected landown prior to discharge EMPA2010 29(1)		Notification of downstream affected landowners prior to discharge EMPA2010 29(1)	
			Facultative Lagoon	
X			Two basins in series WWSW 12	
X			Lagoon design standards WWSW 12 & Table 2	
			Reporting	
X	Immediate reporting of upset/bypass condition WWSW 13(2)			
			Records	
X			Maintenance work & failure of treatment components WWSW 15(a)(i)	PLEASE KEEP RECORDS OF VISITS TO THE LAGOON AS WELL AS ANY MAINTENANCE, CHEMICAL ADDITION

		AND DISCHARGES FROM THE LAGOON.
X	Types, dosages and total amounts of chemicals or other substances added WWSW 15(a)(ii)	DIGESTER IN USE AND ADDED AT A RATE OF 10L/MONTH. JULY AND AUGUST SLUDGE SHARKS ADDED IN THE PRIMARY CELL AT THE INLET PIPE.
X	Dates of discharge of treated effluent and volumes of discharge WWSW 15(a)(iii)	
X	Locations from which samples are taken WWSW 15(a)(iv)	
X	Results of any tests WWSW 15(a)(v)	
X	Site inspection as required by permit EMPA2010 29(1)	
X	Records maintained in appropriate manner: (chronological/factual/initialed/done by permittee) EMPA2010 29(1)	
X	Monthly or annual review of records by permittee EMPA2010 29(1)	
	Testing	
X	Sampling done as required (see permit) EMPA2010 29(1)	MONITORING WELL SAMPLES (WELL#1, 2, 3, 4, AND 5 SAMPLES WERE COMPLETED ON JULY 05, 2022. MONITORING WELL SAMPLES MUST BE COMPLETED ONCE PER YEAR DURING THE PERIOD OF JUNE TO AUGUST. LAST SAMPLE WAS SUBMITTED FROM THE LAGOON EFFLUENT DISCHARGE ON MAY 09, 2023. PLEASE ENSURE SAMPLES ARE TAKEN AS PER THE PERMIT TO OPERATE WHEN DISCHARGING THE LAGOON. PLEASE MAKE SURE THAT SAMPLES ARE ANALYZED FOR THE GROUP 2 PANEL.
X	Accredited lab used for analysis EMPA2010 29(1)	

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Agree with statements

(Operator/Supervisor Signature)

(EPO Signature)