UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5
77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

DEC 10 2015

REPLY TO THE ATTENTION OF:
WC-15J

CERTIFIED MAIL 7014 2870 0001 9580 8990
RETURN RECEIPT REQUESTED

Mr. Gregory A. Swanson
Utilities General Manager
City of Moline, Illinois
30 18th Street
Moline, Illinois 61265

Subject: Wet Weather/Sanitary Sewer System Information Request
Issued Pursuant to Section 308(a) of the Clean Water Act, 33 U.S.C. § 1318(a)
Docket No. V-W-16-308-04

Dear Mr. Swanson:

Protecting water quality is a high priority of the U.S. Environmental Protection Agency. Pollutants such as bacteria discharged to waterways from sewer overflows contribute to poor water quality and impairment of uses of those waterways. As authorized by the Clean Water Act (CWA), the National Pollutant Discharge Elimination System (NPDES) permit program controls water pollution by regulating point sources that discharge pollutants into waters of the United States.

The Illinois Environmental Protection Agency issued NPDES permit number IL0029939 to the City of Moline. The permit authorizes discharges to waters of the United States in accordance with effluent limitations, monitoring requirements and other conditions set forth in the permit. The enclosed Information Request seeks information related to the operation and maintenance of the portion of the City of Moline's sewer collection system that collects and conveys sewage to the Moline STP – South Slope Plant, including information about sewer overflows that may have left the collection system prior to receiving required treatment.

EPA is authorized under Section 308(a) of the CWA, 33 U.S.C. § 1318(a), to require reports and other information necessary to carry out the purpose of the CWA. Accordingly, pursuant to Section 308(a) of the CWA, you are directed to provide EPA with the information requested in the enclosure.

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In accordance with Section V, Paragraph 2 of the Information Request, you must include with your response a statement certifying that all information you submit is true and accurate to the best of your knowledge and belief using the certification language provided in that paragraph. Any questions that do not directly relate to your municipality's sanitary sewer system operations can be addressed with "not applicable" and a brief explanation.

Please exercise care to assure that responses are complete and accurate because Section 309(c)(2) of the CWA, 33 U.S.C. § 1319(c)(2), imposes criminal penalties where false information is knowingly provided to EPA.

You must submit a written response with the information requested in the enclosure within 30 days of receipt of this request to:

Water Enforcement and Compliance Assurance Branch (WC-15J)
U.S. Environmental Protection Agency, Region 5
77 West Jackson Boulevard
Chicago, Illinois 60604-3590
Attention: Donald R. Schwer III.

Thank you for your cooperation in this matter. Should you have any questions, please contact Donald R. Schwer III of my staff at (312) 353-8752 or at schwer.don@epa.gov.

Sincerely,

Patrick F. Kuefler
Chief
Water Enforcement and Compliance Assurance Branch

Enclosure

cc: Bud Bridgewater, Illinois EPA w/enclosure (e-mail)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 5

IN THE MATTER OF:	)	Docket No. V-W-16-308-04
	)	
City of Moline, Illinois	)	
Moline STP - South Slope Plant	)	Proceeding under Section 308(a) of
	)	the Clean Water Act, as amended,
	)	33 U.S.C. § 1318(a)
NPDES Permit No. IL0029939	)	

INFORMATION REQUEST

I. STATUTORY AUTHORITY

The U.S. Environmental Protection Agency is issuing this Information Request to the City of Moline (You) pursuant to the authority vested in the Administrator of EPA by Section 308(a) of the Clean Water Act (CWA), 33 U.S.C. § 1318(a). The Administrator has delegated this authority to the Regional Administrator of EPA, Region 5, who has re-delegated this authority to the Chief of the Water Enforcement and Compliance Assurance Branch of the Water Division, EPA Region 5.

II. INSTRUCTIONS

1. You must respond to this Information Request within 30 calendar days of its receipt by You. Submission instructions are in Section V of this Information Request.

2. You must respond separately to each of the requests. Where a "yes" or "no" answer is requested, You may provide additional information, if desired. Precede each answer with the number of the request to which it corresponds. For each document produced in response to this Information Request, indicate on the document, or in some other reasonable manner, the number of the request to which it corresponds.

3. If You do not have documents responsive to a particular request, state in your written response that You do not have responsive documents.

4. You must keep the reports and all records reviewed or generated in the course of responding to this Information Request until EPA informs You in writing that You are no longer required to keep the reports and records, or for three years, whichever is sooner.

III. DEFINITIONS

1. "Backup" or "Building/Property Backup" shall mean any release of wastewater to public or private property that is caused by Blockages or other conditions in the Sanitary Sewer System. Such releases can include, but are not limited to, those that occur in basements.

2. "Blockage" shall mean the partial or complete interruption of flow as a result of some obstruction in any portion of the Sanitary Sewer System.

3. "Bypass," as defined by 40 C.F.R. § 122.41(m), shall mean the intentional diversion of waste streams from any portion of a treatment facility.

4. "Collection System" shall mean all portions of your sewer system that collect and convey sanitary and/or combined sewage for treatment to the Moline STP – South Slope Plant. The Collection System, for purposes of this Information Request, does not refer to a separate storm sewer system.

5. "Combined Sewer System(s)" shall mean all portions of your sewer system designed to convey municipal sewage (domestic, commercial, and industrial wastewater) and stormwater through a single-pipe system to the wastewater treatment plant or to combined sewer outfalls.

6. "Day" or "days" shall mean a calendar day or calendar days. In computing any period of time under this Information Request, where the last day would fall on a Saturday, Sunday, or federal or state holiday, the period shall run until the close of the next business day.

7. "Force Main" shall mean any pipe that carries wastewater under pressure from the discharge side of a pump to a point of gravity flow downstream.

8. "Gravity Sewer" shall mean a pipe that receives, contains, and conveys wastewater that is not normally under pressure and is intended to flow unassisted under the influence of gravity.

9. "Infiltration" shall mean water, other than wastewater, that enters your Sanitary Sewer System (including sewer service connections) from the ground through such means as defective pipes, pipe joints, connections, or manholes.

10. "Inflow" shall mean water, other than wastewater, that enters your Sanitary Sewer System from sources such as, but not limited to, roof leaders, cellar drains, yard drains, area drains, foundation drains, drains from springs and swampy areas, manhole covers, cross connections between storm sewers and sanitary sewers, catch basins, cooling towers, stormwater, surface runoff, street wash waters, or drainage.

11. "I/I" shall mean the total quantity of water from Infiltration and Inflow without distinguishing the source.

12. "Private Lateral" shall mean that portion of the Sanitary Sewer System(s), not owned by You, used to convey wastewater from a building or buildings to that portion of the Sanitary Sewer System(s) owned by You.

13. "Pump Station" shall mean facilities comprised of pumps or other equipment that lift wastewater to a higher hydraulic elevation, including all related electrical, mechanical, and structural systems necessary to the operation of that pumping station.

14. "Record" or "records" shall mean any recording of information in tangible form. It includes, but is not limited to, documents, memoranda, reports, letters, maps, graphs, charts, log books, notes, emails, computer files, computer printouts, and computer databases.

15. "Sanitary Sewer Overflow" or "SSO" shall mean an overflow, spill, diversion, or release of wastewater from or caused by your Sanitary Sewer System(s). This term shall include: (i) discharges to waters of the United States from the Sanitary Sewer System(s); and (ii) any release of wastewater from the Sanitary Sewer System(s) to public or private property that does not reach waters of the United States, including Backups.

16. "Sanitary Sewer System(s)"shall mean all portions of your sewer system (including all pipes, Force Mains, Gravity Sewer segments, overflow structures, regulators, Pump Stations, manholes, and components thereof), designed and constructed to collect and convey only sewage, and not stormwater, from residences, commercial buildings, industrial plants, and institutions for treatment at the Moline STP – South Slope Plant.

17. "Satellite Sewer System" shall mean a sewer Collection System that collects wastewaters from a legal entity other than You and delivers these wastewaters to your receiving sewer(s) or interceptor(s). Legal entities can include unincorporated areas. The Satellite Sewer System often, but not always, depends on a downstream authority for the treatment of these transferred wastewaters.

18. "Wastewater Treatment Plant(s)" or "WWTP(s)" shall mean the wastewater treatment plant(s) operated by You, the Moline STP – South Slope Plant, National Pollutant Discharge Elimination System (NPDES) Permit Number IL0029939, and located at 2800 48th Avenue, Moline, Illinois 61265, and all components of such sewage treatment plant(s).

19. "You" for purposes of this Information Request refers to the City of Moline and to any agents, employees, contractors, or other entities that performed work or acted in any way on behalf of, or at the direction of, the City of Moline.

IV. REQUESTS

General Information

1. Provide the name and address of the location(s) where You maintain records relative to the operation and maintenance (O&M) of your Sanitary Sewer System(s).

2. Provide the name and title of the primary contact person(s) responsible for Sanitary Sewer System operation and maintenance. Also provide telephone, fax, and email contact information for such person(s).

3. Provide the following documents:

   a. The latest NPDES permit, if applicable, issued to You for the WWTP/Sanitary Sewer System(s), including modifications and the associated permit application.

   b. A map of the service area for the WWTP that identifies the following information:

      i. Delineation of separate and combined sewer areas, if applicable
      ii. Locations of SSOs reported in Question 21, chronic street flooding areas reported in Question 8, and chronic Backup areas reported in Question 33 (can be hand-written/drawn on map)
      iii. Location of all permitted and/or non-permitted outfalls for your Sanitary Sewer System(s) and for your Combined Sewer System(s)

   c. A copy of your most recent sewer use ordinance (SUO)

Collection System/Service Area

4. Provide the following information for your Sanitary Sewer System(s):

   a. Service area (in square miles) _____
   b. Population served _____
   c. System inventory

Miles of Gravity Sewer	Miles of Force Main	Number of Pump Stations

   d. Number of service connections:

   Residential _____ Commercial _____
   Industrial _____ Total _____

e. Provide actual flows experienced for the previous 12 months expressed in million gallons per day (MGD). Cite the source or calculation method from which You obtained these values (e.g., flow meters, billing statements, etc.).

	Average Daily Wastewater Flow (MGD)	Source (*or calculation method*) of Average Daily Wastewater Flow Values	Average Daily Water Consumption (MGD)	Source (*or calculation method*) of Average Daily Water Consumption Values
Residential				
Commercial				
Industrial				
Other				
Total				

f. Minimum wastewater flow experienced in a 24 hour period for the previous 12 months expressed in MGD: _____

g. Do portions of the Collection System operate as a Combined Sewer System?
Yes_____ No_____

If yes, what percent of the Collection System is combined? _____

h. Provide infrastructure age distribution estimates for the Collection System.

Age	Gravity Sewer, miles	Force Mains, miles or feet	Number of Pump Stations
0 - 25 years			
26 - 50 years			
51 - 75 years			
> 76 years			

i. Provide pipe size distribution estimates for the Collection System.

Diameter in inches	Gravity Sewer, miles	Force Mains, miles or feet
8 inches or less		
9 - 18 inches		
19 - 36 inches		
> 36 inches		

5. Indicate or describe a property owner's responsibility for maintenance and repair of Private Laterals (check one):

   a. At main line connection only _____
   b. From main line to property line or easement/cleanout _____
   c. Beyond property line/cleanout _____
   d. Other _____
      Explain _____

6. Describe any atypical local conditions that may increase the complexity or difficulty of the design, construction, operation, and maintenance of the Collection System.

7. Identify whether You do the following to determine if the capacity of the existing Sanitary Sewer System(s) is adequate for new connections.

   a. Is flow metering performed prior to allowing new connections?
      Yes ____ No_____

   b. Do You use a hydraulic model of the Sanitary Sewer System(s) to predict the effects of new connections?
      Yes_____ No_____

   c. Do You require written certification by a licensed professional engineer indicating that the Sanitary Sewer System(s) has been determined to have adequate capacity to accommodate flow from new connections?
      Yes ____ No_____

8. Are there portions of the Collection System service areas that have experienced street flooding, with sewage as a component, in the past five years?
   Yes _____ No _____

   If yes, describe and list all areas that experience chronic street flooding.

Satellite Sewer Systems/Sewer Use Ordinance

9. Does the Collection System receive flow from Satellite Sewer System communities?
   Yes _____ No _____

   If yes, complete the following chart. If additional room is needed, continue on last page or attach a separate table.

Satellite Community Name	% Flow Contributed	Primary Contact Name and Contact Information (address, phone, email) for Satellite

10. Do Satellite Sewer System communities enter into written agreements for wastewater services (contracts, charters, court orders, etc.) with You?
Yes _____ No _____

If yes, please answer the following questions listed below:

a. Do the agreements extend the requirements of the sewer use ordinance (SUO) to the Satellite Sewer System communities?
Yes _____ No _____

b. Do You maintain the legal authority to control the maximum flow introduced into the Collection System from Satellite Sewer System communities?
Yes _____ No _____

c. Is flow metered at locations where flow from the Satellite Sewer System communities directly enters your Sanitary Sewer System(s)?
Yes _____ No _____

d. Do You have the authority to surcharge Satellite Sewer System communities for excessive flows (i.e., for excessive I/I)?
Yes _____ No _____

e. Have You exercised your authority to surcharge Satellite Sewer System communities for excessive flows (i.e., for excessive I/I)?
Yes _____ No _____

If yes, identify the Satellite Sewer System communities for which You took this action, when You took the action, and describe the action You took.

11. Indicate whether the SUO contains procedures for the following:

a. Inspection standards Yes _____ No _____
b. Pretreatment requirements Yes _____ No _____
c. Building/sewer permit issues Yes _____ No _____
d. Inflow prohibition Yes _____ No _____

12. Indicate whether the SUO contains procedures and enforcement authority to control the following:

a. Fats, oils, and grease Yes _____ No _____

b. I/I Yes _____ No _____
c. Building structures over the sewer lines Yes _____ No _____
d. Stormwater connections to sanitary lines Yes _____ No _____
e. Defects in Private Laterals Yes _____ No _____
f. Sump pump or air conditioner discharge Yes _____ No _____

Force Mains

13. Identify the total number of Force Main failures that have occurred in the last five years.

_____

14. Provide a description of the cause(s) of each Force Main failure that has occurred in the last five years.

Pump Stations

15. Provide the following information related to Pump Stations in your Collection System:

a. Total number of Pump Stations in the Collection System _____
b. Number of Pump Stations with on-site pump capacity redundancy _____
c. Number of Pump Stations with dry weather capacity limitations _____
d. Number of Pump Stations with wet weather capacity limitations _____
e. Number of Pump Station failures resulting in SSOs, or Backups, in the last five years _____
f. Number of Pump Stations fed with electrical power from at least two independent electrical power grid feeds _____
g. Number of Pump Stations with permanently installed backup power generators onsite that automatically activate when supplied power is interrupted _____
h. Number of Pump Stations with backup power capability, but only with portable generators to be brought to the Pump Station site from other locations _____
i. Number of Pump Stations with "pump around" capability (i.e., where Pump Station wet well can be evacuated and pumped with portable pump to nearby downstream Sanitary Sewer System manhole) _____
j. Number of Pump Stations where conditions are monitored remotely and that trigger an alarm at a central monitoring location (e.g., at the WWTP or central public works center) _____

Wastewater Treatment Plant

16. Provide the following design flow ratings for the WWTP in MGD.

    a. Design Average Daily Flow _____
    b. Design Peak Wet Weather Flow _____

17. Provide the following peak actual flows experienced at the WWTP in the last five years in MGD.

    a. Peak Daily Flow _____
    b. Peak Hourly Flow _____
    c. Peak Instantaneous Flow _____

18. Describe any processes or operations that can limit the treatment capacity or efficiency at the WWTP (e.g., pump capacity, flow restrictions, tank size, etc.).

19. Provide the following data for each year for the last five years:

    a. Dates and descriptions of WWTP effluent limit exceedances
    b. Dates and volumes of flows from the Collection System that did not receive full secondary treatment
    c. Dates of treatment upsets at the WWTP due to wet weather flow

20. For each event identified in response to Question 19b, indicate whether the discharge condition is authorized under your NPDES permit. If the discharge condition is permitted, specify the permit provision authorizing such discharge.

Sanitary Sewer Overflows

21. Describe each SSO that has occurred in the Collection System within the last five years. Include the following information for each SSO (create a supplemental table as necessary to list the data below):

    a. Date of the SSO
    b. Location of the SSO
    c. Estimated volume of the SSO (in gallons or million gallons (MG))
    d. Cause of the SSO
    e. How You determined that the SSO occurred
    f. Depth of precipitation (in inches) received (if any) contributing to the SSO
    g. Peak WWTP flow (in MGD) on the day that the SSO occurred
    h. Disposition of the SSO (i.e., did the release reach a waterway, flow to storm sewer, paved areas, etc.)
    i. Actions taken to mitigate the SSO
    j. Whether or not You reported the SSO to the state environmental agency
    k. How soon after the SSO You reported it

l. Whether any samples of the SSO discharge were collected and analyzed

22. Identify the number of SSOs that originated from each of the following sources in the last five years:

a. Manholes _____
b. Pump Stations _____
c. Main and trunk sewers _____
d. Lateral and branch sewers _____
e. Structural Bypasses or relief points _____
f. Force Mains _____
g. Other, explain: _____ _____

23. Identify the volume of SSOs expressed in gallons or MG from each of the following sources in the last five years:

a. Pump Stations _____
b. Force Mains _____
c. Manholes _____
d. Other, explain: _____ _____

24. Identify the number of SSOs caused by the following in the last five years:

a. Debris buildup _____
b. Collapsed pipe _____
c. Root intrusion _____
d. Capacity limitations _____
e. Excessive I/I _____
f. Fats, oil, and grease _____
g. Vandalism _____
h. Power interruption and/or lack of backup power source _____
i. Mechanical or electronic failure _____
j. Pump failure and/or lack of backup (or duplex) pumps _____
k. Other, explain: _____ _____

25. For the SSOs to waterways that are identified in response to Question 21, how many were to surface waters that could affect:

a. Primary contact recreation (swimming, bathing, waterskiing, etc.) _____
b. Shellfish growing areas _____
c. Drinking water sources _____

26. What equipment is available to You for responding to SSOs?

27. Describe how You monitor SSO occurrence and frequency.

28. Identify whether You have developed and adopted written procedures or instructions for the following:

a. Identifying SSOs	Yes _____	No _____
b. Emergency response for SSOs	Yes _____	No _____
c. Reporting all SSOs to the state regardless of size	Yes _____	No _____
d. Containment or cleanup to mitigate the effect of SSOs	Yes _____	No _____
e. Problem evaluation and resolution	Yes _____	No _____

29. Describe your procedure for reporting SSOs to the state environmental agency.

Backups

30. Describe how You document the occurrence of, and response to, Backups.

31. Indicate the month and year when You began to document Backups: _____

32. Provide the following information related to Backups:

    a. Number of Backups that have occurred in each year for the last five years
    b. Number of Backups in each year for the last five years for which You were responsible

33. Are there portions of the Collection System that have chronic problems with Backups?
    Yes _____ No _____

    If yes, list and describe each area and the reasons for chronic Backups in that area.

Blockages

34. Describe how You document the occurrence of, and response to, Blockages.

35. Provide the following information related to Blockages that have occurred in your Collection System in each year for the last five years:

    a. Number of Blockages for each year
    b. Average time to clear a Blockage (minutes)
    c. Number of Blockages resulting in SSOs and/or Backups for each year
    d. Total volume of SSOs (gallons or MG) that resulted from Blockages for each year

Infiltration and Inflow

36. Provide the following information for I/I in the Sanitary Sewer System(s):

    a. Have You done an assessment to determine the extent of I/I?
    Yes _____ No _____ If yes, when?_____(mo/yr)

b. Has it been demonstrated that it is more cost effective to eliminate rather than treat I/I?
Yes _____ No _____

c. Have You performed a sewer system evaluation study (SSES), as defined in the U.S. EPA Handbook for Sewer System Evaluation and Rehabilitation (December 1975)?
Yes _____ No _____ If yes, when? _____ (mo/yr)

d. Have rehabilitation projects been prioritized for correcting I/I problems?
Yes _____ No _____

If yes, how far has the I/I elimination program progressed?

e. Do You or any of your Satellite Sewer System communities have a private source I/I reduction program?
Yes _____ No _____

If yes, describe the program.

Operation and Maintenance

37. Have You developed a Capacity, Management, Operation, and Maintenance (CMOM) program, as defined in the U.S. EPA Guide for Evaluating Capacity, Management, Operation, and Maintenance Programs at Sanitary Sewer Collection Systems (January 2005)?
Yes _____ No _____ If yes, when? _____(mo/yr)

If yes, please submit a copy of the latest CMOM plan.

38. Describe the operation and maintenance (O&M) procedures You have in place to locate and eliminate problems in your Collection System that would cause or contribute to SSOs and Backups. These procedures can include, but are not limited to, grease control, root control, sewer cleaning, I/I evaluation, problem area targeting, downspout disconnection program, etc.

39. Indicate whether You have developed and adopted written procedures or instructions for the following:

a. Collection system maintenance Yes _____ No _____
b. Collection system capacity management Yes _____ No _____

40. Does the Sanitary Sewer System(s) experience chronic O&M problems that are attributed to design problems?
Yes _____ No _____

If yes, provide a brief explanation.

41. Does the Sanitary Sewer System(s) experience chronic O&M problems that are the result of construction issues in the system?
    Yes _____ No _____

    If yes, provide a brief explanation.

42. Do You physically inspect all sanitary system manholes on a defined frequency?
    Yes _____ No _____

    If yes, on what frequency: every _____ months (e.g., every 36 months)

43. List the frequency of cleaning sewers and manhole basins for the following:

    a. Largest sewers: every _____months (e.g., every 36 months)
    b. Smaller sewers: every _____months

44. Do You conduct internal smoke testing to evaluate the condition of the Collection System?
    Yes _____ No _____

    If yes, on what frequency? Every _____ months (e.g., every 36 months)

45. Do You televise the sewers to evaluate the condition of the Collection System?
    Yes _____ No _____

46. Do You operate an industrial pretreatment program approved by EPA or the State?
    Yes _____ No _____

Wastewater User and Customer Complaints

47. Describe how You receive, document, and respond to citizen complaints regarding the Sanitary Sewer System.

48. Provide the following information related to Sanitary Sewer System user complaints:

    a. Number of user complaints received each year for the last five years
    b. Number of user complaints received each year for the last five years that were your responsibility
    c. Number of claims received and damages paid each year for the last five years

49. Provide the number of public health or other warnings You issued that were attributed to wastewater each year for the last five years and the dates of each such warning.

V. SUBMITTALS

1. Please submit your response to this Information Request within 30 days of your receipt of the Information Request to:

   Water Enforcement and Compliance Assurance Branch (WC-15J)
   U.S. Environmental Protection Agency, Region 5
   77 West Jackson Boulevard
   Chicago, Illinois 60604-3590
   Attention: Donald R. Schwer III

2. You must submit all requested information under an authorized signature with the following certification:

   > I certify under penalty of law that this response and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person(s) who manage the system, or those person(s) directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of a fine and imprisonment for knowing violations.

3. If You find at any time after submitting information to EPA that any portion of the submittal is false or incorrect, You must notify EPA immediately. Knowing submittal of false information to EPA in response to this Information Request may subject You to criminal prosecution under Section 309(c) of the CWA, 33 U.S.C. § 1319(c), and 18 U.S.C. §§ 1001 and 1341.

4. You may not withhold information because You claim it is confidential. However, pursuant to 40 C.F.R. Part 2, Subpart B, You may assert a claim of business confidentiality regarding any portion of the information submitted in response to this Information Request, as provided in 40 C.F.R. § 2.302(a)(2). The regulations provide that a person may assert a business confidentiality claim covering part or all of the information furnished to EPA when that person submits the information. The manner of asserting such claims is specified in 40 C.F.R. § 2.203(b). Effluent data (as defined in 40 C.F.R. § 2.302(A)(2)) and information in NPDES permit applications is not entitled to confidential treatment. 40 C.F.R. § 122.7. Information subject to a business confidentiality claim is available to the public only to the extent, and by means of the procedures, set forth in 40 C.F.R. Part 2, Subpart B. If You do not assert a claim of business confidentiality when You submit the information, EPA may make the information available to the public without further notice.

5. This Information Request is not subject to the Paperwork Reduction Act, 44 U.S.C. § 3501 *et seq.*, because it seeks collection of information from specific individuals or entities as part of an administrative action or investigation.

6. EPA may use the information submitted in response to this Information Request in an administrative, civil or criminal action.

7. Neither the issuance of this Information Request by EPA nor your compliance with this Information Request relieves You of liability for any penalty, fine, remedy or sanction authorized to be imposed pursuant to Section 309(b), (c), (d), or (g) of the CWA, 33 U.S.C. § 1319(b), (c), (d), or (g), including but not limited to those related to any violations addressed by this Information Request. EPA specifically reserves the right to seek any of the remedies specified in Section 309(b), (c), (d), or (g) of the CWA, 33 U.S.C. § 1319(b), (c), (d), or (g).

8. There can be significant civil or criminal penalties for failing to adequately respond to requests for information issued under the Section 308(a) of the CWA, 33 U.S.C. § 1318(a).

9. Please contact Donald R. Schwer of my staff by telephone at (312)353-8752, or via email at schwer.don@epa.gov, if You have any questions about this Information Request.

Partick F. Kuefler
Chief, Water Enforcement and Compliance Assurance Branch
U.S. Environmental Protection Agency, Region 5

12/10/15
Date