

STATE OF ALASKA  
DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
Division of Air and Water Quality

AUTHORIZATION NUMBER **1002** UNDER

**Secondary Treated Domestic Wastewater From Waste Stabilization Ponds With Seasonal Discharges For Communities With Populations Less Than 1,000**

General Permit Number 9940-DB004

*See this General Permit for additional permit requirements*

THE FOLLOWING RESPONSIBLE PARTY IS AUTHORIZED TO DISCHARGE IN ACCORDANCE WITH THE TERMS OF GENERAL PERMIT 9940-DB004, THE INFORMATION PROVIDED IN THE APPLICATION, AND ANY SITE SPECIFIC REQUIREMENTS LISTED IN THIS AUTHORIZATION:

**RESPONSIBLE PARTY:**

Name: **Honorable Tommy Phillip Sr., President** Phone Number: **(907) 557-5225**  
Company Name: **The Village of Kongiganak**  
Mailing Address: **P.O. Box 5069**  
City: **Kongiganak** State: **AK** Zip: **99559**  
Email Address:

**FACILITY:**

Facility Name: **Village of Kongiganak Wastewater Lagoon**  
Phone Number: **(907) 557-5225**  
Mailing Address: **P.O. Box 5069**  
City: **Kongiganak** State: **AK** Zip: **99559**  
Physical Address: **Section 33, Township 2 South, Range 79 West, Seward Meridian**

**AUTHORIZED DATES OF DISCHARGE:**

Beginning Date: **November 20, 2002** Ending Date: **January 15, 2002**

**AUTHORIZED DISCHARGE FLOW RATES:**

Average:	<b>720,000</b>	Gallons Per Day
Maximum:	<b>720,000</b>	Gallons Per Day
Estimated Total Discharge Volume:	<b>10,000,000</b>	Gallons
Rate of Pumping:	<b>500</b>	Gallons Per Minute

**AUTHORIZED LOCATION OF DISCHARGE:**

Name of receiving area: **Kongnignanokh River**

Latitude / Longitude of Discharge Point(s) in:

*Decimal Degrees:* Latitude: **59.87972 °** Longitude: **163.05167°**

**MIXING ZONE AUTHORIZATION:**

A mixing zone is allowed for fecal coliform bacteria. The mixing zone for fecal coliform bacteria is defined as the width of the river and as a total length of 950 feet, beginning 50 feet up river from the point of discharge to 900 feet down river from the point of discharge. Effluent limitations for fecal coliform bacteria at the edge of the mixing zone shall be 20 Fecal Coliforms (FC)/100 milliliter (ml) for a monthly average and 40 FC/100 ml for a daily maximum. Sampling for fecal coliform bacteria shall be done every three days during discharge 900 feet down river of the discharge on both shorelines and in the middle of the river, initial samples shall be taken during the first 100,000 gallons of discharge. Warning signs shall be placed on both sides of the river every 100 feet notifying the public that domestic wastewater is being discharged in this area. The signs shall: Provide the identity of the discharger; provide the dates of discharge: inform the public wastewater is being discharged from the village lagoon; inform the public that a mixing zone for fecal coliforms exists and extends 900 feet down river; inform the public that caution should be exercised if using the area due to the presence of domestic wastewater and contact recreation should not take place in the mixing zone. These signs shall also be posted in the washeteria, post office, health clinic, and the tribal buildings.

**ADDITIONAL SITE SPECIFIC PERMIT REQUIREMENTS UNDER THIS AUTHORIZATION:**

ADEC authorizes this one time discharge of wastewater from the Village of Kongiganak Wastewater Lagoon. The discharge is subject to the conditions and stipulations contained in the attached Wastewater General Permit No. 9940-DB004 with the condition of the authorized mixing zone requirements found above. In addition, due to the extended duration of the discharge, the monitoring frequency for all required parameters, at the point of the discharge shall be at least weekly with a minimum of three samples required for each parameter. The method of discharge and placement and location of the diffuser shall be done in accordance with the Notice of Disposal.

**SIGNATURE:**

**SIGNATURE ON FILE**

\_\_\_\_\_  
Signature

William D. McGee

\_\_\_\_\_  
Printed Name

November 19, 2002

\_\_\_\_\_  
Date

Technical Engineer

\_\_\_\_\_  
Title

File Number: 2454.45.001

CC: Ron Godden, Summit Consulting Services, (907) 563-5685