



Recycled Water Annual Report
Part I: Recycled water production and disposition

A. REPORTING PERIOD		
1.	This report is for recycled water produced during the calendar year: 2022	
B. PERMIT INFORMATION		
1.	Permit Type (select one): <input checked="" type="checkbox"/> NPDES or <input type="checkbox"/> WPCF	DEQ File No.: 57613
	DEQ Permit No.: 101514	EPA Permit No.:
C. FACILITY INFORMATION		
1.	Legal name of facility: Molalla Sewer Treatment Plant	
Physical address		
2.	Street Address: 12424 S. Toliver Rd	
	City: Molalla	State: OR Zip code: 97038
Mailing address <input type="checkbox"/> Same as physical address.		
3.	Mailing Address: PO Box 248	
	City: Molalla	State: OR Zip code: 97038
Facility Type (check all that apply)		
4.	<input checked="" type="checkbox"/> Major or Tier 1 facility (design flow of 1 mgd or greater, or serving a population of 10,000 or greater) <input type="checkbox"/> Minor or Tier 2 facility (design flow less than 1 mgd or serving a population less than 10,000) <input type="checkbox"/> Class I wastewater treatment facility (i.e., facility with a pre-treatment program) <input type="checkbox"/> Other, please specify:	
D. CONTACT INFORMATION		
Responsible official		
1.	Name: Andy Peters	Title: Public Works Operations Supervisor
	Email Address: apeters@cityofmolalla.com	Telephone: 503-283-6855
	Mailing Address: PO Box 248	
	City: Molalla	State: OR Zip code: 97038
Recycled water contact <input type="checkbox"/> Same as responsible official		
2.	Name: Seth Kelly	Title: Wastewater Treatment Lead Operator
	Email Address: skelly@cityofmolalla.com	Telephone: 503-302-3600
	Mailing Address: PO Box 248	
	City: Molalla	State: OR Zip code: 97038

E. RECYCLED WATER TREATMENT PROCESSES

Please indicate the recycled water treatment processes used at your facility (mark all that apply)

Treatment technology	Filtration technology	Disinfection technology
<input type="checkbox"/> Primary Clarifier <input type="checkbox"/> Secondary Clarifier <input checked="" type="checkbox"/> DAF <input checked="" type="checkbox"/> Lagoon <input type="checkbox"/> Membrane reactor <input type="checkbox"/> Trickling filter <input type="checkbox"/> Other:	<input type="checkbox"/> Sand filter <input checked="" type="checkbox"/> Mixed media filter <input type="checkbox"/> Bio-filtration <input type="checkbox"/> Artificial wetland <input type="checkbox"/> Other:	<input type="checkbox"/> Ultraviolet <input type="checkbox"/> Chlorine <input type="checkbox"/> Ozone <input type="checkbox"/> Paracetic acid <input type="checkbox"/> Hydrogen peroxide <input checked="" type="checkbox"/> Hypochlorite <input type="checkbox"/> Pasteurization <input type="checkbox"/> Other:

F. RECYCLED WATER SAMPLING and PRODUCTION

Select your facility's regulatory monitoring frequency:

Water Class	A	B	C	D	Non-disinfected
1. Monitoring frequency	<input type="checkbox"/> Daily/hourly	<input type="checkbox"/> 3/week	<input checked="" type="checkbox"/> 1/week	<input type="checkbox"/> Once per month	<input type="checkbox"/> As specified in permit
Parameters	Total Coliform (daily) Turbidity (hr)	Total coliform	Total coliform	<i>E. coli</i>	As Specified in permit

Please indicate total volume of each class of recycled water produced at your facility.

2. Total quantity produced (gal)			99.397		
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G. SUMMARY OF ATTACHMENTS

Information required with some annual reports:


1. Additional copies of tables in Part II for all recycled water produced during the calendar year.
 Laboratory reports showing analytical results only. **NO LAB QA/QC**

Example of documentation held by the permittee and available upon request:

2. Additional land application site information. Nitrogen loading calculations
 Daily irrigation and records. Daily or hourly sampling results

H. SIGNATURE OF LEGALLY AUTHORIZED REPRESENTATIVE

I certify that the information in this report is true, correct and representative of the recycled water produced at my facility to the best of my knowledge and belief. Information and records used or referenced with this report will be maintained and made available to the Oregon Department of Environmental Quality on request.

	Lead Operator	01/11/2023
Signature	Title	Date
Print Name: Seth Kelly		



State of Oregon
 Department of Environmental Quality
 700 NE Multnomah St. Suite 600, Portland, OR 97232

Recycled Water Annual Report
Part II: Sampling and Monitoring Summary

DEQ use only

I. RECYCLED WATER CLASSIFICATION														
	Month	Turbidity (NTU)				Total Coliform (organisms/100mL)					E. coli (organisms/100mL)			
		Max 24hr Mean	Avg 24 hr mean	Max	Ave	# of samples	Max 7day median	Avg 7day median	Max	Ave	# of samples	Max 30day log mean	Avg 30day log mean	Max
1.	Jan													
2.	Feb													
3.	Mar													
4.	Apr													
5.	May													
6.	Jun													
7.	Jul			.5	.3	26	4.2	6	8.6	2.7				
8.	Aug			.6	.4	23	1.7	1.5	12.2	6.3				
9.	Sep			.6	.5	30	10.4	1.6	11.0	5.1				
10.	Oct			.5	.4	18	<1	<1	2.0	<1				
11.	Nov													
12.	Dec													
13.														
14.														
15.	Annual													

Attach additional pages as needed to report all sampling.

*** Please attach laboratory report showing sample results only. No lab QA/QC.*

J. RECYCLED WATER CHARACTERIZATION

	Month	pH (SU)			Residual Cl (mg/L)				Sodium (mg/L)				
		# of samples	Min	Max	Ave	# of samples	Min	Max	Ave	# of samples	Min	Max	Ave
1.	Jan												
2.	Feb												
3.	Mar												
4.	Apr												
5.	May												
6.	Jun												
7.	Jul	8	6.7	7.5	7.1	26	0.57	4.30	1.64				
8.	Aug	9	6.9	7.5	7.2	28	0.29	3.20	1.15				
9.	Sep	9	7.0	7.3	7.2	30	0.26	2.17	0.93				
10.	Oct	6	7.3	7.4	7.4	18	0.60	3.90	1.39				
11.	Nov												
12.	Dec												
13.													
14.													
15.	Annual												

Attach additional pages as needed to report all sampling.

**** Please attach laboratory report showing sample results only. No lab QA/QC.**

K. RECYCLED WATER NUTRIENT

Month	Nitrogen TKN (mg/L)			Nitrogen NO2 + NO3 (mg/L)			Ammonia NH3-N (mg/L)			Phosphate PO4 (mg/L)			Potassium K (mg/L)		
	# of samples	Max	Ave	# of samples	Max	Ave	# of samples	Max	Ave	# of samples	Max	Ave	# of samples	Max	Ave
Jan															
Feb															
Mar															
Apr															
May															
Jun	1	10.6	10.6	1	2.06	2.06	1	7.87	7.87	1	0.051	0.051			
Jul															
Aug															
Sep															
Oct	1	8.62	8.62	1	2.53	2.53	1	11.1	11.1	1	0.052	0.052			
Nov															
Dec															
Annual															

Attach additional pages as needed to report all sampling.

**** Please attach laboratory report showing sample results only. No lab QA/QC.**

L. RECYCLED WATER APPLICATION

Month	Site Name: North Coleman				Site Name: South Coleman				Site Name: Cemetary				Site Name: WWTP			
	Class: A				Class: A				Class: A				Class: A			
	Use or Crop: Pasture				Use or Crop: Pasture				Use or Crop: Ornamental				Use or Crop: Ornamental			
Area (acres): 270				Area (acres): 163				Area (acres): 3.4				Area (acres): 8.1				
Agronomic rate: 50 N/ac				Agronomic rate: 50 N/ac				Agronomic rate:				Agronomic rate:				
Soil moisture monitoring: Moisture Blocks				Soil moisture monitoring: Moisture Blocks				Soil moisture monitoring: Moisture Blocks				Soil moisture monitoring: Moisture Blocks				
Additional N sources: Manure				Additional N sources: Manure				Additional N sources:				Additional N sources:				
# of days discharging	Total Volume applied	Ave Daily Loading	Max Daily Loading	# of days discharging	Total volume applied	Ave Daily Loading	Max Daily Loading	# of days discharging	Total Volume applied	Ave Daily Loading	Max Daily Loading	# of days discharging	Total Volume applied	Ave Daily Loading	Max Daily Loading	
	gal	in	in		gal	in	in		gal	in	in		gal	in	in	
Jan																
Feb																
Mar																
Apr																
May																
Jun																
Jul	23	18.121			17	7.103										
Aug	26	22.209	0.1	0.2	19	10.562	0.1	0.2	7	.407	0.1	0.4				
Sep	30	22.994	0.1	0.2	13	5.684	0.1	0.1	2	.018	0.0	0.0				
Oct	10	5.996	0.1	.1	15	6.276	0.1	0.1								
Nov																
Dec																
Annual	89	69.32	0.1	.2	64	29.625	0.1	.2	9	4.25	0.1	0.4				

Attach additional pages as needed to report all sites.

$$\text{Daily Loading (inches)} = \frac{\text{Volume Applied (gallons)}}{\text{Area (acres)} \times 27,152 \left(\frac{\text{gallons}}{\text{acre inches}}\right)}$$