

Finger Lakes

~~1115 ROSSETT RD.~~ RESIDENTIAL CENTERLansing, NY 14882-9088  
(607) 533-5000Mileage: 169 MilesApproximate Travel Time: 3 1/2 Hours**Directions from Rensselaer:**

Take the NYS Thruway to Exit 40-Weedsport. Get onto Route 34 South from this exit. Travel on Route 34 South to the Village of North Lansing. The facility is approximately 5 miles South of the Village of North Lansing, on the right-hand side. There are signs marking the property and driveway to the facility.

**Alternate Route from Rensselaer.**

Take the NYS Thruway to Exit 25A. 1-88. Travel on I-88 to the Bainbridge Exit, Turn right onto Route 206 from this exit Travel on Route 206 West to Whitney Point. Take Route 79 West from Whitney Point to Richford Take Route 38 North from Richford to the Village of Dryden. Continue North on Route 38, through Freeville, to the intersection With Route 34B. Turn left onto Route 34B, the Peruville Road Travel on Route 34B approximately 7 miles to the intersection with Route 34 Turn right (North) onto Route 34, Continue approximately 1/2 mile to the facility, on the left-hand side

**Public Transportation:**

Trans World Express Airlines to Ithaca from Albany or New York City; US Airto Ithaca from New York City; Greyhound Bus service to Ithaca from Albany or New York City.

NYS Office of Children and Family Services  
Travel Directory  
Facilities  
27

September 1998

New York State Department of Environmental Conservation

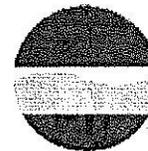
Division of Environmental Permits

NYSDEC HEADQUARTERS

625 BROADWAY

ALBANY, NY 12233

(518) 402-9167



SPDES PERMIT RENEWAL

9/4/2013

LAWRENCE BRADT  
NYS OFFICE OF CHILDREN & FAMILY SERVICE  
52 WASHINGTON ST RM 106 S  
RENSSELAER NY 12144-2735

Permittee Name: NYS OFFICE OF CHILDREN & FAMILY SERVICES  
Facility Name: LANSING RESIDENTIAL CENTER  
Ind. Code: 8999 County: TOMPKINS  
DEC ID: 7-5032-00020/00001 SPDES No.: NY0098302  
Permit Effective Date: 5/1/2014  
Permit Expiration Date: 4/30/2019

-Dear Permittee,

The State Pollutant Elimination System (SPDES) permit renewal for the facility referenced above is approved with the new effective and expiration dates. This letter together with the previous valid permit for this facility effective on 05/01/2009 and any subsequent modifications constitute authorization to discharge wastewater in accordance with all terms, conditions and limitations specified in the previously issued permit(s).

As a reminder, SPDES permits are renewed at a central location in Albany in order to make the process more efficient. All other concerns with your permit, including applications for permit modification or transfer to a new owner, a name change, and other questions, should be directed to:

Deputy Regional Permit Administrator  
NYSDEC REGION 7 CORTLAND SUB-OFFICE  
1285 FISHER AVE  
CORTLAND, NY 13045-1090  
(607) 753-3095

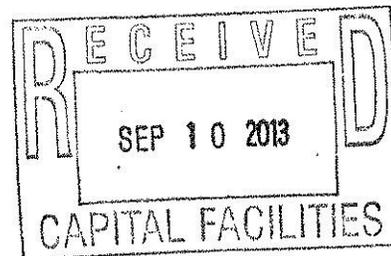
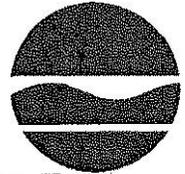
If you have already filed an application for modification of your permit, it will be processed separately by that office.

If you have questions concerning this permit renewal, please contact LINDY SUE CZUBERNAT at (518) 402-9167.

Sincerely,

Stuart MI Fox  
Deputy Chief Permit Administrator

cc: RPA RWE BWP  
BWC



New York State Department of Environmental Conservation  
Division of Environmental Permits, 4<sup>th</sup> Floor

625 Broadway, Albany, New York 12233-1750  
Phone: (518) 402-9167 FAX: (518) 402-9168  
Website: [www.dec.ny.gov](http://www.dec.ny.gov)

Alexander 8. Grannis  
Commissioner

DEC 5, 2008

FACILITY FORM 10

Larry Bradt

NAME: Louis ossett Residential Center

NYS Office of Children and Family Services . LOCATION: Lansing (T)  
52 Washington Street, Room 220 North COUNTY: Tompkins  
Rensselaer, NY 12144

SPDES NO: NY 009 8302

DEC ED NO.: 7-5032-00020/00001

Dear SPDES Permittee:

Enclosed please find a validated NOTICE/RENEWAL APPLICATION/PERMIT form renewing your State Pollutant Discharge Elimination System (SPDES) permit for the referenced facility. This validated form, together with the previously issued permit (see issuance date of this permit in Part 3 of the NOTICE/RENEWAC APPLICATION/PERMIT form), and any subsequent permit modifications constitute authorization to discharge wastewater in accordance with all terms conditions and limitations specified therein.

The instructions and other information that you received with the NOTICE/ RENEWAL APPLICATION/ PERMIT package fully described procedures for renewal and modification of your SPDES permit under the Environmental Benefit Permit Strategy (EBPS) As a reminder, SPDES permits are renewed at a central location in Albany in order to make the process more efficient. All other concerns with your permit such as applications for permit modifications, permit transfers to a new owner, name changes, and other questions should be directed to the Regional Permit Administrator at the following address:

Michael K. Barylski  
NYSDEC Region 7 Sub Office  
1285 Fisher Avenue  
Cortland, NY 13045-1090  
(607) 753-3095

If you have already filed an application for modification of your permit, it be processed separately through our regional office. If you have questions concerning this permit renewal/ please contact Lindy Sue Czubernat at (518) 402-9165,

Sincerely,  
*William R. Alvane*  
Chief Permit Administrator

Enclosure cc: RPA  
RWE

91-20-5 (5/97)

NEW  
STATE

CONSERVATION  
SPDES)  
RECEIVED  
ENVIRONMENTAL PERMITS  
NYSDEC  
08 SEP



RECEIVED  
DEC - 8 2008  
CAPITAL FACILITIES

YORK

DEPARTMENT OF ENVIRONMENTAL

CONSERVATION  
State Pollutant Discharge Elimination System (SPDES)  
NOTICE 1 RENEWAL APPLICATION 1 PR

Please read ALL instructions on the back before completing this application. e TR | INT clear in ink.

PART 1 - NOTICE 07/22/2008

form. p?eäg<sup>2</sup>

Permittee Contact Name, Title, Address

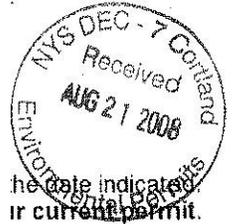
Facility and SPDES Permit information

NYS OFFICE OF CHILDREN & FAMILY SERVICE: LOUIS GOSSETT RESIDENTIAL CENTER  
LARRY BRADT Ind. Code: 8999 County; TOMPKINS  
52 WASHINGTON ST, RM 220 NORTH DEC No.. 7-5032-00020/00001  
RENSSELAER NY 12144 SPDES No.. NY 009 8302  
Expiration Date: 05/01/2009  
Application Due By: 11/02/2008

Are these name(s) & address(es) correct? if not, please write corrections above.

The State Pollutant Discharge Elimination System Permit for the facility referenced above expires on the You are required by law to file a complete renewal application at least 180 days prior to expiration of your cu Note the "Application Due By" date above.

CAUTION: This short application form and attached questionnaire are the only forms acceptable for permit renewal. Sign Part 2 below and mail only this form and the completed questionnaire using the enclosed envelope. Effective April 1, 1994 the Department no longer assesses SPDES application fees.



If there are changes to your discharge, or to operations affecting the discharge, then in addition to this renewal application, you must also submit a permit modification application to the Regional Permit Administrator for the DEC region in which the facility is located, as required by your current permit, See the reverse side of this page for instructions on filing a modification request.

**PART 2 - RENEWAL APPLICATION**

**CERTIFICATION:** I hereby affirm that under penalty of perjury that the information provided on this form and all attachments submitted herewith is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to section 210.45 of the Penal Law.

Larry Bradt Facility Planner  
Name of person signing application (see instructions on back) Title

Larry Bradt for NYS OCFS 8-18-08  
Signature Date

**PART 3 - PERMIT (Below this line - Official Use Only)**

Effective Date: 5.11.09 Expiration Date: 4.30.14

William R. Adriance  
Permit Administrator

Address: NYSDEC - Division of Environmental Permits  
Bureau of Environmental Analysis  
625 Broadway, Albany, NY 12233-1750

William R. Adriance DEC 5 2008  
Signature Date

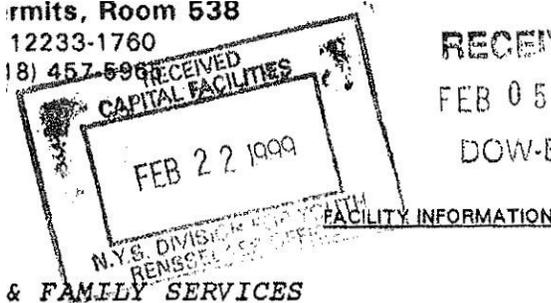
This permit together with the previous valid permit for this facility issued 5.11.04 and subsequent modifications constitute authorization to discharge wastewater in accordance with all terms, conditions and limitations specified in the previously issued valid permit, modifications thereof or issued as part of this permit, including any special or general conditions attached hereto. Nothing in this permit shall be deemed to waive the Department's authority to initiate a modification of this permit on the grounds specified in 6NYCRR 5621.14, 6NYCRR 5754.4 or 6NYCRR 5757.1 existing at the time this permit is issued or which arise thereafter.

Attachments: ~~General Conditions dated~~      /      /     

New York State Department of Environmental Conservation

Division of Environmental Permits, Room 538  
12233-1760  
638 (518) 457-5966

50 wolf Road, Albany, New York  
Phone: (518) 457-2224



RECEIVED  
FEB 05 1999  
DOW-BWP



Room 12233-1760  
FAX: (518) 4

John P. Cahill  
Commissioner

February 04, 1999

RUTH CASE  
OFFICE OF CHILDREN  
250 AUBURN RD

wors GOSSETT RESIDENTIAL CENTER

LANSING, NY 14887

LOCATION        LANSING (T)  
 COUNTY        TOMPKINS  
 DEC            NO            7-5032-00020-  
 00001SPDES NO: NY 009 8302

Dear SPDES Permittee:

Enclosed please find your renewed State Pollutant Discharge Elimination System (SPDES) permit. This renewal permit together with the current valid permit constitute authorization to discharge wastewater in accordance with all terms, conditions and limitations specified in your current permit, including any valid modifications. Under the Environmental Benefit Permit Strategy, SPDES permits are renewed at a central location in Albany in order to make the process more efficient. All other concerns with your permit such as permittee-initiated modifications, permit transfers to a new owner, name changes, and other questions should be directed to the Regional Permit Administrator at the following address:

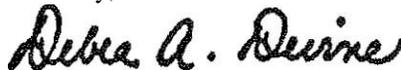
Ralph Manna  
 NYSDEC REGION 7 615  
 Erie Blvd W  
 Syracuse, NY 13204-2400  
 (315) 426-7438

IMPORTANT NOTICE - Your permit is subject to the Discharge Notification Act (DNA), which requires permittees to post a sign near each outfall of a wastewater discharge to surface waters, and to provide a public repository for Discharge Monitoring Reports (DMRs) required by the SPDES permit, to initiate your complying with the provisions of the DNA, the Department has elected to modify your permit during the renewal process, in accordance with Article 17 Title 8 (State Pollutant Discharge Elimination System) and Article 70 (Uniform Procedures) of the Environmental Conservation Law. However, compliance with DNA requirements can be waived in certain circumstances. If an outfall meets any of the circumstances listed in (e) under DISCHARGE NOTIFICATION REQUIREMENTS of the enclosed permit modification, you need only notify the DNA Program Specialist: Bureau of Water Permits, NYSDEC, 50 Wolf Road, Albany, NY 12233-3505 of such fact, in accordance with the language contained therein. In this case, construction of a sign and maintaining Of DMRs in a public repository, for that outfall, is not required.

Requirements will become effective 30 DAYS after the date of this letter, should you object to this DNA modification, you must submit a written statement to the Regional Permit Administrator within 15 days of the date of this letter, giving supporting reasons why the permit should not be modified, or to request a hearing, or both.

If you have questions concerning this permit renewal, please contact me at (518) 457-2224. If you have questions pertaining to the requirements of the Discharge Notification Act, please contact your Regional Water Engineer (see attached list and Region Map), Thank you,

Sincerely,



Debra A. Devine  
 Environmental Analyst

I Enclosures cc: RPA

RWE

BWP

.wpd (12.198)

SPDES Permit No.: NY 009 8302\_\_\_\_\_

Part 1 . Page

1 of 2

Effective Date of Modification: —U-&gt;.1.92—

DISCHARGE NOTIFICATION REQUIREMENTS

- (a) Except as provided in (c), (f) and (g) of these Discharge Notification Act requirements, the permittee shall Install and maintain identification signs at alt outfalls to surface waters (Listed in this permit, such signs shall be installed within 90 days of the Effective Date of this Modification.
- (b) Subsequent modifications to or renewal of this permit does not reset or revise the deadline set forth in (a) above, unless a new deadline Is set explicitly by such permit modification or renewal.
- (c) The Discharge Notification Requirements described herein do not apply to outfalls from which the discharge is composed exclusively of storm water, or discharges to ground water.
- (d) The sign(s) Shall be conspicuous, legible and in as close proximity to the point of discharge as is reasonably possible while ensuring the maximum visibility from the surface water and shore. The signs shall be installed in such a manner to pose minimal hazard to navigation, bathing or other water related activities. If the public has access to the water from the 'and jn the vicinity of the outfall, an identical sign shall be posted to be visible from the direction approaching the surface water.

the signs shall have minimum dimensions of eighteen inches by twenty-four inches (18" x 24") and shall have white letters on a green background and contain the following Information:

**N.Y.S. PERMITTED DISCHARGE POINT**

SPDES PERMIT No.: NY\_\_\_\_\_

OUTFALL No, .

For information about this permitted discharge contact:

Permittee Name: \_\_\_\_\_

Permittee Contact: t: \_\_\_\_\_

Permittee Phone: ) - ### - ####

OR:

NYSDEC Division of Water Regional Office Address.

NYSDEC Division of Water Regional Phone: ( ) - ### - ####

- (e) For each discharge required to have a sign in accordance with a), the permittee shall, concurrent with the installation of the sign, provide a repository of copies of the Discharge Monitoring Reports (DMRs), as required by the RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS page of this permit. This repository shall be open to the public, at a minimum, during normal daytime business hours. The repository may be at the business office repository of the permittee or at an off-premises location of its choice (such location shall be the village, town, city or county clerk's office, the local library or other location as approved by the Department In accordance with the RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS page of your permit, each DMR shall be maintained on record for a period of three years.

(continued)

SPDES Permit No.: NY OQ9 8302\_\_\_\_\_

Part If Page 2 of 2

- (f) If, upon November 1, 1997, the permittee has installed signs that include the information required by 17-0815 of the ECL, but do not meet the specifications listed above, the permittee may continue to use the existing signs for a period of up to five years, after which the signs shall comply with the specifications listed above.

- (g) All requirements of the Discharge Notification Act, including public repository requirements, are waived for any outfall meeting any of the following circumstances, provided Department notification is made in accordance with (h):
  - (i) such sign would be Inconsistent with any other state or federal statute;
  - (ii) the Discharge Notification Requirements contained herein would require that such sign could only be located in an area that is damaged by ice or flooding due to a one-year storm or storms of less severity;
  - (iii) instances in which the outfall to the receiving water is located on private or government property which is restricted to the public through fencing, patroitings or other control mechanisms. Property which is posted only, without additional control mechanisms does not qualify for this provision;
  - (iv) instances where the outfall pipe or channel discharges to another outfall pipe or channel, before discharge to a receiving water; or
  - (v) instances in which the discharge from the outfall is located in the receiving water, two-hundred or more feet from the shoreline of the receiving water.
- (h) If the permittee believes that any outfall which discharges wastewater from the permitted facility meets any of the waiver criteria listed in (g) above, notification (form enclosed) must be made to the Department's Bureau of Water Permits, Central Office, of such fact, and, provided there is no objection by the Department, a sign and DMR repository for the involved outfall(s) are not required. This notification must Include the facility's name, address, telephone number, contact, permit number, outfall number (sh and reason why such outfall(s) is waived from the requirements of discharge notification. The Department may evaluate the applicability of a waiver at any time, and take appropriate measures to assure that the ECL and associated regulations are complied with,
- (i) The permittee shall periodically inspect the outfall identification signs in order to ensure that they are maintained, are still visible and contain information that is current and factually correct.

37200

7-5032-00020

71134

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

APPLICATION FORM "D"

for a State Pollutant Discharge Elimination System (SPDES) Permit

(A SPOES Application When Signed by Permit Issuing Official Becomes a SPOES Permit)



91-19-1-1385

PLEASE PRINT NAME

APPLICATION Type <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Modification	If RENEWAL OR MODIFICATION. PREVIOUS NY- 0098302
OWNER'S NAME (Corporate, Partnership, Individual) NYS Division for Youth	TYPE OF OWNERSHIP Corporate Individual Partner; hip Public
OWNER'S MRI INC AOORESS Street, City, sate. Zip code) 52 Washington Street, Rensselaer Mew York 12 It4U-27 S	
REFER ALL CORRESPONDENCE TO: (Name. s e Thyagarajan , Director, Facilities Planning 6 Deve looment (address same as above	NUM8ER 518 -473-732Læ

NAME Lansing Campus		FACILITY LOCATION Route 34		CITY, TOWN OR VILLAGE South Lansing	
CIVE DIRECTIONS TO LOCATION Tompkins Route 34 — Miles North of Ithaca <span style="float: right;">Exhibit 1</span>					
OF OR Facility for Youthful Offenders				POPULATION (See Instructions) 240 Residents + Staff	
FREQUENCY OF DISCHARGE <input type="checkbox"/> No If No, SOWN' Number ai Months We-et Yes üNo Ef NO. Specify of Days					
DOES your DISCHARGE CONTAIN OR IS POSSIBLE FOR YOUR DESCHARGE TO CONTAIN ONE OR MORE OF THE FOUOWi',iG SUBSTANCES ADDED A RESULT OF YOUR OPERATIONS. ACTIVITIES OR PROCESSES& check: o Aluminum Ammonia geryEiium O Cadmium Chionne DC reaseOf These					
<input type="checkbox"/> Chromium <input type="checkbox"/> Copper <input type="checkbox"/> Cyanide <input type="checkbox"/> Phenols <input type="checkbox"/> Seienium <input type="checkbox"/> Zinc					
DISCHARGE DATA (u be if (See					
OUTFALL NO. 001	Proposed	TYPE OF WASTE Sanitary (Domestic)	TYPE OF TREATMENT Tertiary — RBC's	DESIGN FLOW 50 0 0	
SURFACE DISCHARGE		If YES. Name Of Receiving Water Tributar to Salmon Creek			Number 237
SUBSURFACE DISCHARGE		if YES. Name Oi Neatest Surface Water			Distance SOIL TYPE Depth oi Water Tab
NO.	Replacement ExoanfOn	OF	TYPE OF TREATMENT	DESIGN FLOW	
SCRFÀCE DISCHARGE		If YES. Name of Receiving Watera			Cassificaejon Waterø index Number
SUBSURFACE DISCHARGE		It YES. oi Neare-sx Sudaee Wacer			Distance SOIL Depth Of Water
OUTFALL NO.	Replacement	OF WASTE	Of	OESICN FLOW Cal. Duv	

I

5CRFACE DESCHARCE It YES. same Oi Receiving Waters CZ\$1dicaon Number

SSURFACE DISCHARGE It YES. Name oi Nearest Surface Water Disance SOIL TYPE Depth 01 Water  
Yes NO

hereby affirm under penalty oi penury that information provided on this form attached supplementul forms is true to the Sest oi my and beiei. F  
tate de berin ate punishabie a Class A misdemeanor pursuant to 210.45 Of Penal

A LI NT'S {CNATU ( Instructions) DATE PRINTED NAME T ITL-E Director, Facilities

x 5/6/91 S Thyagaraj an P an i

PERMIT VALIDATION SECTION APPLICATION NUMBER  
(Department 01 Environmental Conservation use Only) NY— 009 3

This SPOES permit i5 issued in compliance with Title 8 Of Article 17 of the Environmental  
Conservation Law oi New York State and in compliance with the provisions 01 the Federal Water OATE EXPIRATION OATE  
Pollution Control Act. as amended by the Federal Water Pollution Control Act Amendments of May 1, 1994 May 1 1999  
1972, P.L 92,500, October 197: (33 U.S.C. S 1251 et. seq.) (hereinafter referred to as the ATTACHMENTS



(X) Chlorine, Total Residual	Daily Maximum	0.1	mg/l
(X) pH	Range	6.5 - 8.5	SU
(X) Solids, Settleable	Daily Maximum	0.1	ml/l
( )		mg/l as	
(X) Phosphorous	30 day average	1.0	mg/l
(X) Ammonia	30 day average	0.93	mg/l
(X) Dissolved Oxygen	Daily Minimum	7.0	mg/l
(X)			
( )			

**MONITORING REQUIREMENTS**

Parameter	Frequency	Sample Type	Sample Location	
			Influent	Effluent
(X) Flow, [X] MGD [ ] GPD	Continuous	N/A	X	
(X) BOD, 5 - Day, mg/l (1)	1/month	6 hr	X	X
(X) Solids, Suspended, mg/l (1)	1/month	6 hr. comp.	X	X
(X) Coliform, Fecal, No./100 ml <sup>(3)</sup>	1/month	Grab		X
( ) Nitrogen, TKN (as N), mg/l				
(X) Nitrogen, Ammonia (as N), mg/l	1/month	6 hr. comp	X	X
(X) pH, SU (standard units)	1/day	Grab	X	X
(X) Solids, Settleable, ml/l	1/day	Grab	X	X
(X) Chlorine, Total Residual, mg/l <sup>(3)</sup>	1/day	Grab		X
(X) Phosphorus, Total (as P), mg/l	1/month	6 hr. comp	X	X
(X) Temperature, Deg. F	1/day	Grab	X	X
(X) Dissolved Oxygen	1/day	Grab		X
( )				
( )				
( )				
( )				

NOTES:<sup>(1)</sup> and effluent value shall not exceed 15 % of influent values.  
Chlorine, Total Residual

(2) Ultimate Oxygen Demand shall be computed as follows:

$$UOD * 1/2 x CB005 + 4 1/2 x TKN \text{ (Total Kjeldahl Nitrogen)}$$

(3) Monitoring of these parameters is only required during the period when disinfection is required.

(4) The classification of this stream is supposed to be upgraded to Class C during the duration of this permit.

91-20-2b (1/39)

SPDES No.: NY 009 8302

**EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS**

During the period beginning EDP and lasting until EDP + 5 years  
the discharges from the permitted facility shall be limited and monitored by the permittee as specified below:

LIMITATIONS APPLY: [ Alt Year [X] Seasonal from October 1 to March 31  
Outfall Number 001

**EFFLUENT LIMITATIONS**

(X) Flow	30 day arithmetic mean	<u>0.05</u>	[X] MGD	[ ] GPD	
(X) BOD, 5 - Day	30 day arithmetic mean	<u>5</u>	mg/l and		lbs/day <sup>(1)</sup>
( ) BOD, 5 - Day	7 day arithmetic mean		mg/l and		lbs/day
( ) UOD <sup>(2)</sup>			mg/l and		lbs/day
(X) Solids, Suspended	30 day arithmetic mean	<u>10</u>	mg/l and		lbs/day <sup>(1)</sup>
( ) Solids, Suspended	7 day arithmetic mean		mg/l and		lbs/day
(X) Effluent disinfection required:	[X] All Year [ ] Seasonal		from		to
(X) Coliform, Fecal	30 day geometric mean shall not exceed	200/100 ml			
( ) Coliform, Fecal	7 day geometric mean shall not exceed	400/100 ml			
(X) Chlorine, Total Residual	Daily Maximum	<u>0.1</u>	mg/l		
(X) pH	Range	<u>6.5 - 8.5</u>	SU		
( ) Solids, Settleable	Daily Maximum		ml/l		
( )			mg/l as		
(X) Phosphorous	30 day average	<u>1.0</u>	mg/l		
(X) Ammonia	30 day average	<u>1.4</u>	mg/l		
(X) Dissolved Oxygen	Daily Minimum	<u>7.0</u>	mg/l		
( )					
( )					

**MONITORING  
REQUIREMENTS**

Parameter	Frequency	Sample Type	Sample Location	
			Influent	Effluent
(X) Flow, [X] MGD [ ] GPD	Continuous	N/A	X	
(X) BOD, 5 - Day, mg/l (1)	1/month	6 hr. comp	X	X
(X) Solids, Suspended, mg/l (1)	1/month	6 hr. comp	X	X
(X) Coliform, Fecal, No./100 ml <sup>(3)</sup>	1/month	Grab		X
( ) Nitrogen, TKN (as N), mg/l				
(X) Nitrogen, Ammonia (as N), mg/l	1/month	6 hr. comp	X	X
(X) pH, SU (standard units)	1/day	Grab	X	X
(X) Solids, Settleable, ml/l	1/day	Grab	X	X
(X) Chlorine, Total Residual, mg/l <sup>(3)</sup>	1/day	Grab		X
(X) Phosphorus, Total (as P), mg/l	1/month	6 hr. comp	X	X
(X) Temperature, Deg. F	1/day	Grab	X	X
(X) Dissolved Oxygen	1/day	Grab		X
( )				
( )				
( )				

Parameter Influent Effluent

NOTES: (1) and effluent Value shall not exceed 15 % of Influent values,

(2) Ultimate Oxygen Demand shall be computed as follows:

$$wOO = 1 \frac{1}{2} \times CBOD5 + 4 \frac{1}{2} \times TKN \text{ (Total Kleidaht Nitrogen)}$$

(3) Monitoring of these parameters Is only required during the period when disinfection is required.

9920-21 (1/59)

SPDES No.: NY 009 8302

**RECORDING, REPORTING AND ADDITIONAL MONITORING REQUIREMENTS**

- a) The permittee shall also refer to the General Conditions (Part II) of this permit for additional information concerning monitoring and reporting requirements and conditions.
- b) The monitoring Information required by this permit shall be summarized, signed and retained for a period of three years from the date of the sampling for subsequent inspection by the Department or its designated agent. Also;

(X) (if box is checked) monitoring information required by this permit shall be summarized and reported by submitting completed and signed Discharge Monitoring Report (DMR) forms for each month reporting period to the locations specified below. Blank forms are available at the Department's Albany office listed below. The first reporting period begins on the effective date of this permit and the reports will be due no later than the 28th day of the month following the end of each reporting period.

Send the original (top sheet) of each DMR page to:

Department of Environmental Conservation  
Division of Water  
Bureau of Wastewater Facilities Operations 50  
Wolf Road  
Albany, New York 12233-3506  
Phone: (518) 457-3790

Tompkins County Health Department  
401 Harris B. Dates Drive  
Ithaca, NY 14850-1386

Send the first (second sheet) of each DMR page to:

Department of Environmental Conservation  
Regional Water Engineer, Region 7  
615 Erie Blvd., West  
Syracuse, NY 13204

- c) A monthly \*Wastewater Facility Operation Report... (form 92:15-7) shall be submitted (if box is checked) to the [ Regional Water Engineer and/or ( ) County Health Department or Environmental Control Agency listed above.
- d) Noncompliance with the provisions of this permit shall be reported to the Department as prescribed in the attached General Conditions (Part II)
- e) Monitoring must be conducted according to test procedures approved under 40 CFR Part 136, unless other test procedures have been specified in this permit.
- o) If the permittee monitors any pollutant more frequently than required by the permit, using test procedures approved under 40 CFR Part 136 or as specified in this permit, the results of this monitoring shall be included in the calculations and recording of the data on the Discharge Monitoring Reports.
- g) Calculation for all limitations which require averaging of measurements shall utilize an arithmetic mean unless otherwise specified in this permit.
- h) Unless otherwise specified, all information recorded on the Discharge Monitoring Report shall be based upon measurements and sampling carried out during the most recently completed reporting period.
- i) Any laboratory test or sample analysis required by this permit for which the State Commissioner of Health issues certificates of approval pursuant to section five hundred two of the Public Health Law shall be conducted by a laboratory which has been issued a certificate of approval. Inquiries regarding laboratory certification should be sent to the Environmental Laboratory Accreditation Program, New York State Health Department Center for Laboratories and Research, Division of Environmental Sciences, The Nelson A. Rockefeller Empire State Plaza, Albany, New York 12201.

MEMORANDUM



New York State  
Office of  
Children & Family

Governor John A. Johnson

Services  
George E. Pataki  
Commissioner

Capital View Office Park  
52 Washington Street  
Rensselaer, NY 12144-2796

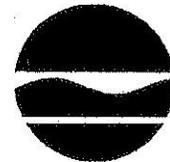
Enclosed is information on Gossett's SPDES permit. Please forward to your wastewater contractors and retain a copy for yourself.

Enclosure

An Equal Opportunity Employer

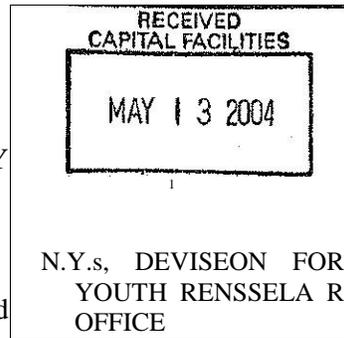
Louis Gossett, Jr., Residential  
Center  
FROM: Larry Bradt  
Capital Services Bureau  
SUBJECT: SPDES Permit Information  
DATE: May 18, 2004  
TO: Jeff Georgia G:\facility\gossett\Georgia.Bradt.Memo-re SPDES Permit information.doc  
New York State Department of Environmental  
Conservation  
Division of Environmental Permits, 4<sup>th</sup> Floor  
625 Broadway, Albany, New York 12233-1750  
Phone: (518) 402-9167 • FAX: (518) 402-9168  
Website: www.dec.state.ny.usErin M. Crotty

*Gossett*



Commissioner

May 13, 2004  
NYS OFFICE OF CHILDREN & FAMILY SERVICES LARRY  
BRADT  
52 WASHINGTON ST, RM 220 NORTH  
RENSSELAER, NY 12144



Re: Department Initiated

Permit Modification

DEC D: 750.320002000001  
SPDES Number: 0098302 Dear

Permittee:

The purpose of this correspondence is to notify you of a Department initiated modification to the above-referenced State Pollutant Discharge Elimination System (SPDES) permit. This modification is undertaken in accordance with the provisions of the Uniform Procedures Act [6 NYCRR 621.14(a)(4)] and is due to the amendment of the existing regulation governing the administration of SPDES permits (6 NYCRR 750). The amendments incorporate provisions of the 'Part II General Conditions' supplement that serves as an additional set of dditional requirements to your SPDES permit. These amendments may be found in the enclosed copy of 6 NYCRR 750 in Section 750-2, entitled 'Operating in Accordance with a SPDES Permit. \* You may also access this regulation from the internet on the Department's website at [hit ://www.dec.state.n .us/website/re S/750.htm](http://www.dec.state.ny.us/website/re_S/750.htm) for html format or [htt ://www.dec.state.n .us/website/dow/ art750. dff](http://www.dec.state.ny.us/website/dow/art750.dff) for a two-sided format suitable for binding and copying. .

The amendment of 6 NYCRR 750 duplicates many of the provisions of the 'Part II General Conditions' supplement, and includes some revisions and additions to those conditions. The following is a general list of locations within section of 6 NYCRR 750-2 that contain new and significant information pertaining to your permit.

- 750.1 General Provisions of a SPDES Pen-nit (b), (f), and (k)
- 750-2.3 Inspection and Entry (f)
- 750-2.4 Operator and Permittee Liability
- 750-2.5 Routine Monitoring Recording and Re ortin
  - (a)- (2)-(iii) and (v); (4); (5)
  - (b)- (1); (2); (3)
  - (c)- (1); (2)-(vii)
  - (a)- (d)- (1)-(i) and (ii); (2); (3)-(2)-(iii) and .
- 750-2.6 Special Reporting Requirements for Dischargers that are not POTWs
- 750-2.7 Incident Reporting
- 750.43-DisppsaL\$utgnOperation and Quality Control
  - (a)- (1); (2)-(i); (5); (6)
  - (c)- (2)
  - (d)
  - (f)
- 750-2.9 Additional Conditions A) licable to Publicly Owned Treatment Works

- (a)- (2); (4)
- (b)- (1); (2); (3); (4); (5); (6); (7)
- (c)

- 750-2.10 Special Provisions- New or Modified Disposal Systems or Service

- Areas

- (a); (b); (d); (e); (f); (g); (h); (i)

- 750-2.11 Closure Requirements for Disposal Systems

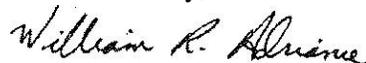
Also, please note that the telephone number designated by the Regional Water Engineer to receive after business hours reports (as set forth in 6 NYCRR 750-1.2(a)(73) is now (518)-457-7362.

The Department initiated modification to your permit deletes the 'Part II General Conditions' and all references to them from your permit, and further amends the permit requiring you to comply with 6 NYCRR 750-2. The specific language of the modification is contained in the attached modification page that is to be appended to your existing permit.

The Department's Uniform Procedures Act affords permittees the right to comment on Department initiated permit changes [6 NYCRR 621.14(d)]. After reviewing the content of 6 NYCRR 750-2 and its effect on your SPDES permit, should you have any objections to the permit modification, you may submit a written statement to the Department giving reasons why the permit should not be modified, request a hearing, or both. Any statement or request for hearing must be made within 15 calendar days of the mailing of this letter. Failure to submit a timely request or statement will result in the modification of your permit, becoming effective June 01, 2004.

If you have any questions on this action, please contact Andrea Sheeran at the above address, or by telephone at (518) 402-9179.

Sincerely,



William R. Adriance  
Chief Permit Administrator cc:

RPA

RWE

BurP

New York State Department of Environmental  
Conservation

Division of Environmental Permits, 4<sup>th</sup> Floor

625 Broadway, Albany, New York 12233-1750

Phone: (518) 402-9167 • FAX: (518) 402-9168

Website: [www.dec.state.ny.us](http://www.dec.state.ny.us)



Erin M. Crow  
Commissioner

**STATEMENT OF STATE POLLUTANT DISCHARGE**  
**ELIMINATION**  
**SYSTEM (SPDES) PERMIT MODIFICATION**  
**TO BE KEPT WITH SPDES PERMIT NUMBER NY 0098302.**  
**LOUIS GOSSETT RESIDENTIAL CENTER**  
**DEC ID 750320002000001**  
**EFFECTIVE DATE JUNE 01, 2004**

Per Department of Environmental Conservation amendment to the regulations governing the administration of the State Pollutant Discharge Elimination System Permit, this permit is hereby modified to mandate compliance with New York State Environmental Conservation Law, 6 NYCRR Part 750 entitled State Pollutant Discharge Elimination System SPDES Permits.

This Department initiated modification to your permit deletes the former Part II General Conditions' requirements and all references to them from your permit, and further amends the permit requiring you to comply with 6 NYCRR 750-2, entitled Operating in Accordance with a SPDES Permit.