

Sanitary Sewer Extension Permit Application Western Lake Superior Sanitary District (WLSSD)

Address: 2626 Courtland Street – Duluth, MN 55806-1894

Phone: 218-722-3336

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Web: ResourceRenew.com



Instructions for Application Submittal

- Submit completed application and required supporting documents and fees to: *Western Lake Superior Sanitary District, ATTN: Planning Department, 2626 Courtland Street, Duluth, MN 55806-1894*
- WLSSD Sanitary Sewer Extension Permit Application can be found at: <https://wlssd.com/doing-business/sewer-extensions/modifications/>
- Applications must be submitted a minimum of 14 days prior to scheduled WLSSD Planning Committee meetings (typically 3rd Tuesday of each month) in order to be on the meeting agenda.
- A completed Minnesota Pollution Control Agency (MPCA) Sanitary Sewer Extension Permit Application and supporting documents must be submitted along with the WLSSD application form. Information on the MPCA application can be found at: <https://www.pca.state.mn.us/water/wastewater-permit-forms>
- A WLSSD staff review will be conducted upon receipt of the completed applications. Incomplete applications will be returned to applicant for resubmittal.
- Completed applications will be reviewed by the WLSSD Planning Committee and if approved forwarded to the full WLSSD Board of Directors for consideration. The WLSSD Board convenes at 5:00 P.M. on the third or fourth Monday of the month in the WLSSD Administration Building at 2626 Courtland Street, Duluth MN. The complete District Board meeting schedule can be found at ResourceRenew.com
- Should the WLSSD Board approve the extension request, the applications and fees will be forwarded by WLSSD to the MPCA for review.
- Should the WLSSD deny the application, it will be returned to the applicant stating the reasons for denial.

Information for Question #2 on MPCA Sanitary Sewer Extension Permit Application (Connections and Flow Components)

- 2A. Design Average Wet Weather (AWW) flow: **48.4 MGD**
- 2B. Actual current annual average daily flow received in the past 12 months: **31.12 MGD**
- 2C. Percent of design flow: **64.30%**

Project Contact Information

1. Project Title:

2. Project Proposer Contact:

Contact Name:

Title:

Name of Firm/Organization:

Address:

Phone:

Email:

3. Design Engineer Contact:

Contact Name:

Title:

Name of Firm/Organization:

Address:

Phone:

Email:

4. Authorized City/Township/Sanitary District Contact:

Contact Name:

Title:

Name of Firm/Organization:

Address:

Phone:

Email:

Proposed Project Details

1. Description of Proposed Project:

2. Location of Proposed Project:

3. Describe the existing and future areas to be served by this extension:

4. Describe how this project is consistent with local land use plans:

5. Where will the proposed flow enter into the WLSSD collection system?

6. Who will be responsible for future operations and maintenance of the new sewer infrastructure?

Information Required for a Complete Application

- Completed and signed WLSSD application form
- Completed and signed Minnesota Pollution Control Agency (application and required fee)
- Completed and attached *MPCA Design Flow and Loading Determination Worksheets*
<https://www.pca.state.mn.us/sites/default/files/wq-wwtp5-20a.xlsx>

Certifications

Project Engineer

"My signature verifies this document 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 evaluate the information submitted. The information submitted is to the best of my knowledge and belief, true, accurate and complete."

Signature: _____ Printed Name: _____ License # _____

Date: _____

City or Township Representative:

I certify that:

- The proposed sewer extension is consistent with local community development/comprehensive plans.
- The municipality is compliant with its Permitted Peak Flow and the WLSSD Inflow and Infiltration Ordinance.
- The proposed sewer extension meets the requirements of the municipalities local sewer use ordinance with regard to management of fats, oils and grease (FOG).

"My signature, or the signature of a delegated official, represents the approval of this project's connection to the sewer system under my jurisdiction and is compliant with the statements above."

Signature: _____ Printed Name: _____

Date: _____