



**UNITED STATES MARINE CORPS**  
MARINE CORPS BASE  
BOX 555010  
CAMP PENDLETON, CALIFORNIA 92055-5010

**Item No. 16**  
**Supporting Document No. 9a**

IN REPLY REFER TO:

5090.7C  
ENVSEC/42  
August 6, 2008

Mr. John Robertus  
Executive Officer  
California Regional Water Quality Control Board  
9174 Sky Park Court, Suite 100  
San Diego, CA 92123-4340

Dear Mr. Robertus:

**SUBJECT: REQUEST FOR WASTE DISCHARGE REQUIREMENTS WAIVER**

Request the Regional Water Quality Control Board (RWQCB) issue Marine Corps Base Camp Pendleton (MCB CPEN) a waiver allowing the use of tertiary treated reclaimed water pending approval of our application for a new Waste Discharge Requirements (WDR) reclamation permit. If approved, the waiver would allow Camp Pendleton to continue irrigation of the Marine Memorial Golf Course with tertiary treated reclaimed water and operationally test newly installed water reclamation infrastructure at the horse pastures, front gate, and Headquarters areas.

MCB CPEN submitted a timely WDR application on February 15, 2008; however, the requested interim waiver is necessary to meet our construction schedule, and avoid cost delays associated with the planned conversion of three antiquated wastewater treatment plants into sewage lift stations for conveyance of wastewater to our Southern Region Tertiary Treatment Plant. The waiver will not be required after the Board acts on our application.

A revised EPA Form 200 and the Start-up Sequence Map is enclosed for review and approval as directed by your staff. An Engineering Report previously submitted with our WDR application provides supporting technical information. We propose that a compliance monitoring program under the waiver operate in accordance with the requirements of Order No. 2000-45, our current reclamation permit, which allows for the application of secondary treated effluent from sewage treatment plants 1 and 2 at the Marine Memorial Golf Course. The California Department of Public Health indicates that they will provide the RWQCB favorable endorsement of our request.

5090.7C  
ENVSEC/42  
August 6, 2008

If you have any further questions or comments, please do not hesitate to contact me at (760) 725-9753 or Mr. Luis Ledesma at (760) 725-0141.

Sincerely,



K. A. KHAN, Ph.D., P.E.  
Head, Environmental Engineering  
Division  
Assistant Chief of Staff  
Environmental Security  
By direction of the Commanding  
Officer

Enclosures: 1. EPA Form 200  
2. Start-up Sequence Map

Copy to:  
Mr. Sean Sterchi, P.E., T4  
California Department of Public Health  
Drinking Water Field Operations Branch  
1350 Front Street, Room 2050  
San Diego, CA 92101



**APPLICATION/REPORT OF WASTE DISCHARGE  
GENERAL INFORMATION FORM FOR  
WASTE DISCHARGE REQUIREMENTS OR NPDES PERMIT**

**I. FACILITY INFORMATION****A. Facility:**

Name: Marine Corps Base, Camp Pendleton, Southern Regional Tertiary Treatment Plant			
Address: Box 555008			
City: Camp Pendleton	County: San Diego	State: CA	Zip Code: 92055
Contact Person: Khalique Khan		Telephone Number: 760-725-9753	

**B. Facility Owner:**

Name: Marine Corps Base, Camp Pendleton			Owner Type (Check One)	
Address: Building 555010			1. <input type="checkbox"/> Individual	2. <input type="checkbox"/> Corporation
City: Camp Pendleton	State: CA	Zip Code: 92055	3. <input checked="" type="checkbox"/> Governmental Agency	4. <input type="checkbox"/> Partnership Agency
Contact Person: G.W. Storey, COL., USMC		Telephone Number: 760-725-6451	5. <input type="checkbox"/> Other: _____	
			Federal Tax ID:	

**C. Facility Operator (The agency or business, not the person):**

Name: Facilities Maintenance Department			Operator Type (Check One)	
Address: Box 555009			1. <input type="checkbox"/> Individual	2. <input type="checkbox"/> Corporation
City: Camp Pendleton	State: CA	Zip Code: 92055	3. <input checked="" type="checkbox"/> Governmental Agency	4. <input type="checkbox"/> Partnership Agency
Contact Person: Lt. Col. T.A. Kerzie		Telephone Number: 760-725-3807	5. <input type="checkbox"/> Other: _____	

**D. Owner of the Land:**

Name: Marine Corps Base, Camp Pendleton			Owner Type (Check One)	
Address: Box 555010			1. <input type="checkbox"/> Individual	2. <input type="checkbox"/> Corporation
City: Camp Pendleton	State: CA	Zip Code: 92055	3. <input checked="" type="checkbox"/> Governmental Agency	4. <input type="checkbox"/> Partnership Agency
Contact Person: J.B. Seaton, MCB CO		Telephone Number: 760-725-1777	5. <input type="checkbox"/> Other: _____	

**E. Address Where Legal Notice May Be Served:**

Address: Box 555008			
City: Camp Pendleton	State: CA	Zip Code: 92055	
Contact Person: Khalique Khan, Env. Engineering Division Head		Telephone Number: 760-725-9753	

**F. Billing Address:**

Address: Box 555008			
City: Camp Pendleton	State: CA	Zip Code: 92055	
Contact Person: Luis Ledesma, Wastewater Branch Head		Telephone Number: 760-725-0141	



**APPLICATION/REPORT OF WASTE DISCHARGE  
GENERAL INFORMATION FORM FOR  
WASTE DISCHARGE REQUIREMENTS OR NPDES PERMIT**



**II. TYPE OF DISCHARGE**

Check Type of Discharge(s) Described in this Application (A or B):

- A. WASTE DISCHARGE TO LAND**                       **B. WASTE DISCHARGE TO SURFACE WATER**

**Check all that apply:**

<input checked="" type="checkbox"/> Domestic/Municipal Wastewater Treatment and Disposal	<input type="checkbox"/> Animal Waste Solids	<input type="checkbox"/> Animal or Aquacultural Wastewater
<input type="checkbox"/> Cooling Water	<input type="checkbox"/> Land Treatment Unit	<input type="checkbox"/> Biosolids/Residual
<input type="checkbox"/> Mining	<input type="checkbox"/> Dredge Material Disposal	<input type="checkbox"/> Hazardous Waste (see instructions)
<input type="checkbox"/> Waste Pile	<input type="checkbox"/> Surface Impoundment	<input type="checkbox"/> Landfill (see instructions)
<input checked="" type="checkbox"/> Wastewater Reclamation	<input type="checkbox"/> Industrial Process Wastewater	<input type="checkbox"/> Storm Water
<input checked="" type="checkbox"/> Other, please describe: <u>Recycling/reuse of tertiary treated wastewater</u>		

**III. LOCATION OF THE FACILITY**

Describe the physical location of the facility.

<p><b>1. Assessor's Parcel Number(s)</b> Facility: Discharge Point:</p>	<p><b>2. Latitude</b> Facility: 33 13' 49" N Discharge Point: 33 09' 46" N</p>	<p><b>3. Longitude</b> Facility: 117 31' 31" W Discharge Point: 117 23' 28" W</p>
---	--	---

**IV. REASON FOR FILING**

New Discharge or Facility                       Changes in Ownership/Operator (see instructions)

Change in Design or Operation                       Waste Discharge Requirements Update or NPDES Permit Reissuance

Change in Quantity/Type of Discharge                       Other: Interim operation to cut over for tertiary treatment

**V. CALIFORNIA ENVIRONMENTAL QUALITY ACT (CEQA)**

Name of Lead Agency: \_\_\_\_\_

Has a public agency determined that the proposed project is exempt from CEQA?     Yes                       No

If Yes, state the basis for the exemption and the name of the agency supplying the exemption on the line below.

Basis for Exemption/Agency: Please see Note #1, Attachment #1

---

Has a "Notice of Determination" been filed under CEQA?                       Yes                       No

If Yes, enclose a copy of the CEQA document, Environmental Impact Report, or Negative Declaration. If no, identify the expected type of CEQA document and expected date of completion.

Expected CEQA Documents:

<input type="checkbox"/> EIR	<input type="checkbox"/> Negative Declaration	Expected CEQA Completion Date: <u>Not applicable</u>
------------------------------	---	--

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY



State of California Regional Water Quality Control Board

APPLICATION/REPORT OF WASTE DISCHARGE GENERAL INFORMATION FORM FOR WASTE DISCHARGE REQUIREMENTS OR NPDES PERMIT



VI. OTHER REQUIRED INFORMATION

Please provide a COMPLETE characterization of your discharge. A complete characterization includes, but is not limited to, design and actual flows, a list of constituents and the discharge concentration of each constituent, a list of other appropriate waste discharge characteristics, a description and schematic drawing of all treatment processes, a description of any Best Management Practices (BMPs) used, and a description of disposal methods. Also include a site map showing the location of the facility and, if you are submitting this application for an NPDES permit, identify the surface water to which you propose to discharge. Please try to limit your maps to a scale of 1:24,000 (7.5' USGS Quadrangle) or a street map, if more appropriate.

VII. OTHER

Attach additional sheets to explain any responses which need clarification. List attachments with titles and dates below: Please see Note#2. Attachment#1

You will be notified by a representative of the RWQCB within 30 days of receipt of your application. The notice will state if your application is complete or if there is additional information you must submit to complete your Application/Report of Waste Discharge, pursuant to Division 7, Section 13260 of the California Water Code.

VIII. CERTIFICATION

"I certify under penalty of law that this document, including all attachments and supplemental information, were prepared under my direction and supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons 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 fine and imprisonment."

Print Name: Lt. Col. T.A. Kerzie

Title: Facilities Maintenance Officer

Signature: [Handwritten Signature]

Date: 8/6/08

FOR OFFICE USE ONLY

Table with 4 columns: Date Form 200 Received, Letter to Discharger, Fee Amount Received, Check #.

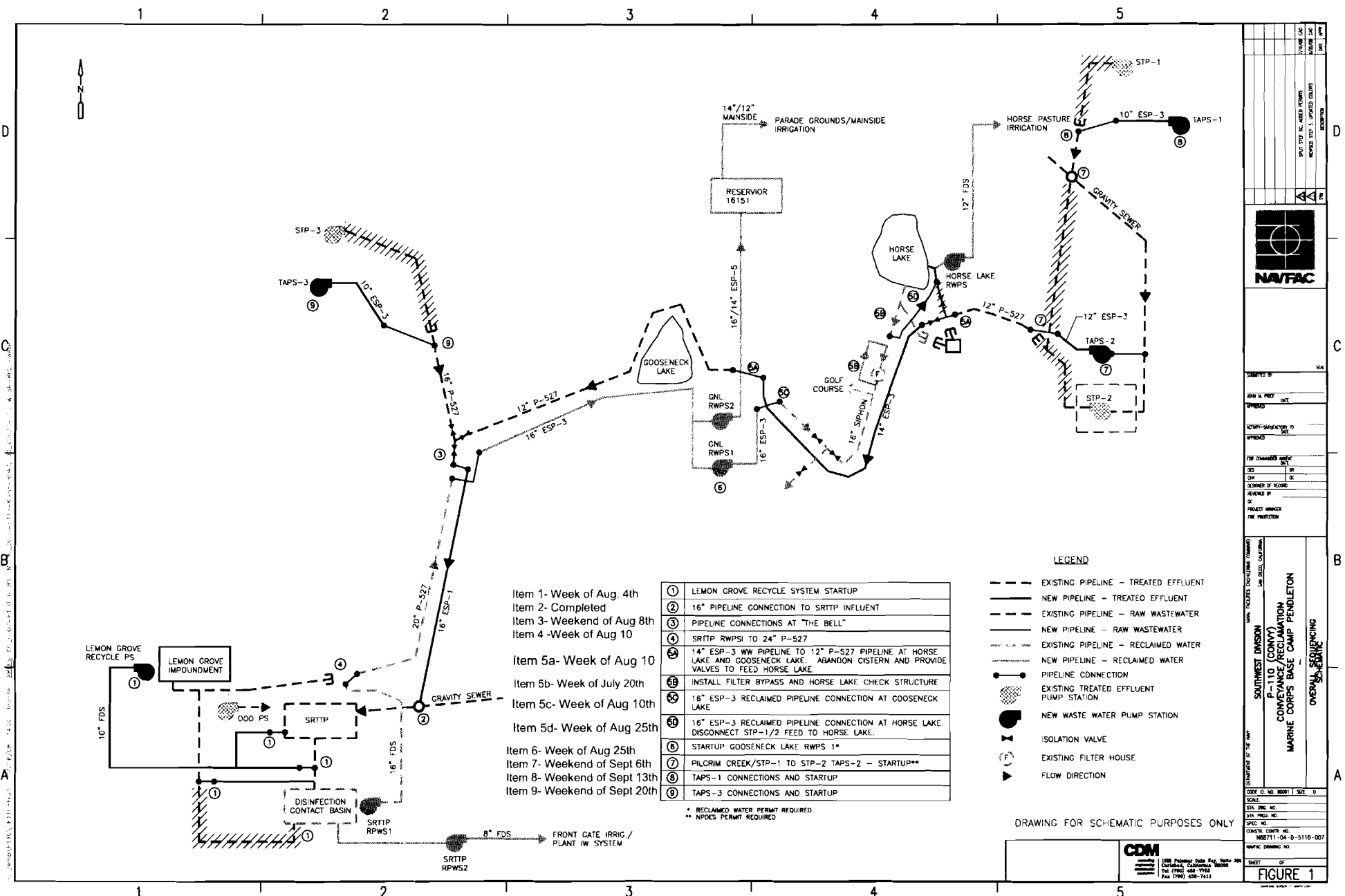
**ATTACHMENT#1 - CAL EPA FORM 200**

**Note #1 (V. California Environmental Quality Act (CEQA))**

Basis for Exemption/Agency: Congress has not authorized Federal agencies to comply with requirements of state environmental planning rules like CEQA, but instead requires NEPA compliance.

**Note #2 (VII. Other)**

MCB CPEN has been engaged in a long term capital improvement project for the reuse of tertiary treated wastewater for irrigation. This project involves transfer of sewage treatment operations from existing secondary treatment facilities to a regional tertiary treatment facility. At the interim stage, before all wastewater from our southern region is sent directly to the SRTTP for treatment, secondary treated water from STPs 1, 2 & 3 will get tertiary treatment before being used for irrigation. Upon connecting the new pipeline, there will be a one time slug of effluent remaining from STPs 1, 2 and 3 that will mix with the effluent from the tertiary treatment plant for irrigation at the golf course. Once this remnant is expended all irrigation water will be from the southern region tertiary treatment plant for use at the horse pasture, the parade grounds, and the front gate. With the conveyance piping in service, the new pump stations at the site of STPs 1, 2 and 3, will be connected, abandoning the secondary treatment plants, resulting in all wastewater in the southern region being transported directly to the SRTTP for tertiary treatment prior to reuse.



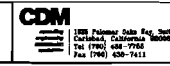
- Item 1- Week of Aug. 4th
- Item 2- Completed
- Item 3- Weekend of Aug 8th
- Item 4-Week of Aug 10
- Item 5a- Week of Aug 10
- Item 5b- Week of July 20th
- Item 5c- Week of Aug 10th
- Item 5d- Week of Aug 25th
- Item 6- Week of Aug 25th
- Item 7- Weekend of Sept 6th
- Item 8- Weekend of Sept 13th
- Item 9- Weekend of Sept 20th

①	LEMONT GROVE RECYCLE SYSTEM STARTUP
②	16" PIPELINE CONNECTION TO SRITP INFLUENT
③	PIPELINE CONNECTIONS AT "THE BELL"
④	SRITP RWPS1 TO 24" P-527
⑤a	14" ESP-3 WW PIPELINE TO 12" P-527 PIPELINE AT HORSE LAKE AND GOOSENECK LAKE. ABANDON CISTERN AND PROVIDE VALVES TO FEED HORSE LAKE.
⑤b	INSTALL FILTER BYPASS AND HORSE LAKE CHECK STRUCTURE
⑤c	16" ESP-3 RECLAIMED PIPELINE CONNECTION AT GOOSENECK LAKE
⑤d	16" ESP-3 RECLAIMED PIPELINE CONNECTION AT HORSE LAKE. DISCONNECT STP-1/2 FEED TO HORSE LAKE.
⑥	STARTUP GOOSENECK LAKE RWPS 1*
⑦	PILGRIM CREEK/STP-1 TO STP-2 TAPS-2 - STARTUP**
⑧	TAPS-1 CONNECTIONS AND STARTUP
⑨	TAPS-3 CONNECTIONS AND STARTUP

\* RECLAIMED WATER PERMIT REQUIRED  
 \*\* NPDES PERMIT REQUIRED

- LEGEND**
- EXISTING PIPELINE - TREATED EFFLUENT
  - NEW PIPELINE - TREATED EFFLUENT
  - EXISTING PIPELINE - RAW WASTEWATER
  - NEW PIPELINE - RAW WASTEWATER
  - EXISTING PIPELINE - RECLAIMED WATER
  - NEW PIPELINE - RECLAIMED WATER
  - PIPELINE CONNECTION
  - EXISTING TREATED EFFLUENT PUMP STATION
  - NEW WASTE WATER PUMP STATION
  - ⊘ ISOLATION VALVE
  - ⊘ EXISTING FILTER HOUSE
  - ▶ FLOW DIRECTION

DRAWING FOR SCHEMATIC PURPOSES ONLY



PROJECT NO. 168711-04-0-5110-007 SHEET NO. 1 OF 1 DATE: 08/13/04 DRAWN BY: JRM CHECKED BY: JRM APPROVED BY: JRM	PROJECT NAME: MARINE CORPS BASE CAMP PENDLETON OVERALL SEWERING
SOUTHWEST DAWSON P.L.L.C. (CONTRACTOR) CONVEYANCE/RECLAMATION MARINE CORPS BASE CAMP PENDLETON OVERALL SEWERING	PROJECT MANAGER: JRM PROJECT ENGINEER: JRM
DRAWING FOR SCHEMATIC PURPOSES ONLY	
<b>FIGURE 1</b>	