

**DORCHESTER CO LOWER DORCHESTER WWTP :  
9077-HD0K-B3B**



WW Collection System Operation & Maintenance

Inspector: Parker Feldman

Start Date: 05/30/2024      Completed Date: 06/03/2024

<b>General Information</b>				
1. Permit Number	SC0038822			
2. Associated NPDES Permit Number	SC0038822			
3. Responsible Official	Larry Harper			
4. Facility Name	Lower Dorchester County			
5. Inspection Date	05/28/2024			
6. Onsite representative				
Name	Title	Company/Agency	Phone Number	Attended Closing Conference
Otis Ward	Operations and Maintenance Manager	Dorchester County Water and Sewer	843-832-0247	X
Jason Coffman	Water & Sewer Principal Engineer	Dorchester County Water and Sewer	843-832-0093	X
Larry Harper	Director	Dorchester County Water and Sewer	843-832-0061	X
7. Department Staff				
Name	Title	Company/Agency	Phone Number	Attended Closing Conference
Parker Feldman	Environmental Health Manager	SCDHEC	843-953-9449	X
Ashley Auerbach	Office Manager	SCDHEC	843-953-0150	X
Buck Graham	Senior Advisor to the Director	SCDHEC	803-542-4048	X
<b>Checklist</b>				
1. Number of staff designated for collection system operation and maintenance?				28
2. Is a list of 24 hour contacts available? (If Yes, include in comments)				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3. Is an emergency equipment list available? (If Yes, include in comments)				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. Hours per week allocated to collection system operation and maintenance?				40
5. Are current and complete map(s) of the collection system available? (Including line sizes, manholes, pump stations, WWTP, etc.)				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5a. How many miles of sewer line/collection system does this system include?				487
5b. What is the oldest known age of system piping? (In years)				64

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<b>Checklist</b>	
6. Total number of pump stations?	129
6a. Were pump stations evaluated during this inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7. Is a preventive maintenance program in effect? (If Yes, include in comments)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7a. Is an O&M manual developed and available?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7b. Maintaining logs/records provided?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7c. Determining equipment/system malfunction rates	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7d. Establishing schedules	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7e. I/I evaluation	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7e.1. Smoke Testing	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7e.2. Videoing	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7e.3. Flow Measurements	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7e.4. Frequency of evaluations?	every 5 years
7f. Manhole inspections are being performed by the permittee?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7f.1. Scheduling of repairs?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7f.2. Were manholes evaluated during this inspection?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7g. Sewer cleaning program	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7g.1. Describe the schedule for cleaning if the permittee has one. Cleanings happen in conjunction with the videoing, I/I evaluation, smoke testing, and off of complaints and/or request	
7g.2. Is 10% line cleaning being achieved annually?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7g.3. Root control program?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7g.4. Grease control program?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7h. Hydrogen sulfide monitoring and control	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7h.1. Evaluating condition of concrete of concrete piping?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7h.2. Repair/replacement work scheduled?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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<b>Checklist</b>	
7i. Lift station operation	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7i.1. Draw down testing conducted?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7i.1.a. Alarm testing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7i.1.b. SCADA system testing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7j. Easement/right of way maintenance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7k. "Walking" or visual observation of lines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
7k.1. Frequency?	annually
7l. Spare parts inventory	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
8. Describe what type of ongoing inspection program for the collection system exists: Weekly checks at least 3 days per week, flow meter and SCADA, The pump stations are checked daily	
8a. How many SSOs >500 gal. have occurred in the last 3 years?	14
8b. How many SSOs >500 gal. requiring public notice have occurred in the last 3 years?	0
9a. Is there a sewer use ordinance?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9b. Is there a grease ordinance?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9c. If either 9.a or 9.b is Yes, enter a responsible name and responsible agency below.	
<b>Name:</b> Ann Marie Chadeayne	<b>Agency:</b> Dorchester County Water and Sewer
10. Describe any sewer use ordinance enforcement practices that exist: Fees and Civil Penalties	
11. Is there an active commercial/residential FOG Program in place. If yes, describe program in the comments area for this question.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12. Is there an active Voluntary Public Notification program in place? If yes, describe in the comments area for this question.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13. Is there a SSO Reporting program?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13a. Volume required according to permit? (In gallons)	500

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**Checklist**

13b. Facility is properly reporting SSOs as required? If no, describe in the comments area for this question.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13c. Facility is meeting all record keeping requirements? (If No, explain in the comments area for this question.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13c. Based on facility history of SSO reporting or facility self responding, are worst case areas prone to problems being addressed or active corrective actions being taken? If no, describe in the comment area for this question.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14. Is collection system properly operated and maintained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Closing Conference**

1. Has a closing conference with the Responsible Party been performed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1a. If no closing conference was performed with the Responsible Party during the inspection, was contact made with the Responsible Party afterwards to perform the closing conference? Only if a closing conference with the RP was performed onsite, enter NA.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
1b. If no closing conference was able to be performed, explain why and what efforts were made to perform one. Only if a closing conference was performed, enter NA. NA	

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<b>General Information</b>											
1. Permit Number	SC0038822										
2. Associated NPDES Permit Number	SC0038822										
3. Responsible Individual	Larry Harper										
4. Name of Facility	Lower Dorchester County										
5. Inspection Date	05/28/2024										
6. Onsite representative	<table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Company/Agency</th> <th>Phone Number</th> </tr> </thead> <tbody> <tr> <td>Otis Ward</td> <td>Operations and Maintenance Manager</td> <td>Dorchester County Water and Sewer</td> <td>843-832-0247</td> </tr> </tbody> </table>			Name	Title	Company/Agency	Phone Number	Otis Ward	Operations and Maintenance Manager	Dorchester County Water and Sewer	843-832-0247
Name	Title	Company/Agency	Phone Number								
Otis Ward	Operations and Maintenance Manager	Dorchester County Water and Sewer	843-832-0247								
<b>Pump Station (1)</b>											
Date of Inspection	05/28/2024										
Inspection Time	11:30 AM										
Pump Station name/number/etc:	Pump Station 33										
1. Pump station is fenced or secured in an approved locked building/enclosure or located in a restricted access area to prevent access by unauthorized persons?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
2. An approved weather durable sign, with a 24-Hr. emergency telephone number, is located at a conspicuous point on the fence or structure of the pump station? (Unless the pump station is located in a restricted access area.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA										
3. At least 2 functional pumps (of same capacity and capable of handling peak flow) or pneumatic ejectors are provided? (Unless the pump station serves only 1 residential lot or 1 building.) If 3 or more units, are they designed to fit actual flow conditions and have the capacity to handle peak flows using only 2 units?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
4. Pump float switches work properly?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA										
5. Pump station has an alarm system designed to function if power is not available for any pump? (In remote and/or environmentally sensitive areas the Department may require back-up battery pack for auto-dialing and/or audible/visible high water alarms.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
6. Type of alarm system at this pump station?	Audible Alarm										
<div style="border: 1px solid black; padding: 2px;">                     SCADA alarm is also sent in conjunction with an audible alarm                 </div>											

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<b>Pump Station (1)</b>	
7. When high wet well alarm is triggered, alarm system initiates when tested?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. Are the Wet Well and/or dry well properly vented with a weather durable material? (e.g. stainless steel screened and inverted "J" tube.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9. Are pump stations with duplex pumps designed to operate in a lead/lag sequence and alternating cycle? (Alternate designs may be considered if more than 2 pumps.)	Yes
10. Is there a shutoff valve and a check valve located on the discharge line from each pump?	Yes
11. Is the check valve located between the shutoff valve and the pump?	Yes
12. If an additional shutoff valve is required, is the shutoff valve located outside of the wet well in a separate pit or valve box?	Yes
13. Is the pit or valve box water tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14. Is there a means of dewatering back to the wet well?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15. Is the check valve located outside of the wet well in a separate valve pit or dry well?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
16. Is the pump station fully operational during flooding or (in the case of industrial facilities) can the influent flow into the pump station be stopped?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17. Is an all weather road provided and maintained to the pump station?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18. Is the electrical junction box located outside of the wet well or made of material suitable for use under corrosive conditions?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19. Is an emergency operation plan provided for the pump station?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20. For areas determined by the Department to be environmentally sensitive, is auxiliary power or approved equivalent plan on site?	Yes
21. Does the (alternate) plan include methods showing how the pump station will be continuously operable in the event of a power failure, natural disaster, etc.? (i.e. standby generator, 2 separate utility substations with automatic switching, wet well capacity above the pump on level to contain WW during the longest power outage of the last 5 years (excluding catastrophic storms), a method of pumping into a force main downstream of the check valve, adequate utility owned portable generators with a transfer switch, industrial facilities that have shown the ability to stop their process and that have adequate storage so as to not overflow.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

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<b>Pump Station (1)</b>	
22. When main power is disengaged, does backup power function properly?	Yes
23. Float switches are free of excessive grease/debris?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24. Wet well is free of excessive grease/debris?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25. Is there evidence of high water levels in wet well?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
26. Is there evidence of an SSO from the wet well?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
27. Are routine visits documented?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
28. Describe routine visits. Pumps, Manholes, Floats are cleaned if need and tested along with the Alarms	
29. Frequency of inspection visits?	Per Day
<b>Pump Station (2)</b>	
Date of Inspection	05/28/2024
Inspection Time	12:00 PM
Pump Station name/number/etc:	Pump station 59
1. Pump station is fenced or secured in an approved locked building/enclosure or located in a restricted access area to prevent access by unauthorized persons?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2. An approved weather durable sign, with a 24-Hr. emergency telephone number, is located at a conspicuous point on the fence or structure of the pump station? (Unless the pump station is located in a restricted access area.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
3. At least 2 functional pumps (of same capacity and capable of handling peak flow) or pneumatic ejectors are provided? (Unless the pump station serves only 1 residential lot or 1 building.) If 3 or more units, are they designed to fit actual flow conditions and have the capacity to handle peak flows using only 2 units?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4. Pump float switches work properly?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
5. Pump station has an alarm system designed to function if power is not available for any pump? (In remote and/or environmentally sensitive areas the Department may require back-up battery pack for auto-dialing and/or audible/visible high water alarms.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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<b>Pump Station (2)</b>	
6. Type of alarm system at this pump station?	Audible Alarm <input type="text" value="SCADA system also used"/>
7. When high wet well alarm is triggered, alarm system initiates when tested?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. Are the Wet Well and/or dry well properly vented with a weather durable material? (e.g. stainless steel screened and inverted "J" tube.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9. Are pump stations with duplex pumps designed to operate in a lead/lag sequence and alternating cycle? (Alternate designs may be considered if more than 2 pumps.)	Yes
10. Is there a shutoff valve and a check valve located on the discharge line from each pump?	Yes
11. Is the check valve located between the shutoff valve and the pump?	Yes
12. If an additional shutoff valve is required, is the shutoff valve located outside of the wet well in a separate pit or valve box?	Yes
13. Is the pit or valve box water tight?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14. Is there a means of dewatering back to the wet well?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15. Is the check valve located outside of the wet well in a separate valve pit or dry well?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
16. Is the pump station fully operational during flooding or (in the case of industrial facilities) can the influent flow into the pump station be stopped?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17. Is an all weather road provided and maintained to the pump station?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
18. Is the electrical junction box located outside of the wet well or made of material suitable for use under corrosive conditions?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
19. Is an emergency operation plan provided for the pump station?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20. For areas determined by the Department to be environmentally sensitive, is auxiliary power or approved equivalent plan on site?	Yes



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<b>Pump Station (2)</b>	
21. Does the (alternate) plan include methods showing how the pump station will be continuously operable in the event of a power failure, natural disaster, etc.? (i.e. standby generator, 2 separate utility substations with automatic switching, wet well capacity above the pump on level to contain WW during the longest power outage of the last 5 years (excluding catastrophic storms), a method of pumping into a force main downstream of the check valve, adequate utility owned portable generators with a transfer switch, industrial facilities that have shown the ability to stop their process and that have adequate storage so as to not overflow.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
22. When main power is disengaged, does backup power function properly?	Yes
23. Float switches are free of excessive grease/debris?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24. Wet well is free of excessive grease/debris?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25. Is there evidence of high water levels in wet well?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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27. Are routine visits documented?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
28. Describe routine visits. Pumps, Manholes, Floats are cleaned if need and tested along with the Alarms	
29. Frequency of inspection visits?	Per Day

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Violation List

No Violations Found