



Village of Red Hook Wastewater System

Red Hook Commons		Village of Red Hook		
Average Daily Flow :	0.007 MGD (Million Gallons per Day)	0.036 MGD (Million Gallons per Day)		
February 2025	<u>Required Samples</u>	<u>Result - Old Plant</u>	<u>Result - New Plant</u>	<u>Compliance</u>
	CBOD	15 mg/L	62 mg/L	5 mg/L
	TSS	13.7 mg/L	110 mg/L	10 mg/L
	NH3	4.9	58.2	0.98 mg/L (June 1 - Oct 31) 1.81 mg/L (Nov 1 - May 31)
	Fecal Coliform	2420/100 mL	2420/100 mL	200/100 mL
	Dissolved Oxygen	2.0 mg/L	2.3 mg/L	7.0 mg/L Minimum
	TKN	7.8mg/L	58.2mg/L	0.4 mg/L Minimum
<u>Deficiencies</u>				
Sand Filter - Red Hook Commons	Sand Filters have never been rebuilt or media replaced. To be reviewed and incorporated into the planning for the Sewer Phase II project.			
Backflow Prev. Replacement - Red Hook Commons	Facilities backflow Preventor in need of replacement.			
UV'S - Red Hook Commons & Village of Red Hook	1 UV on at new plant. C3ND will provide village with pricing on upgraded power supply for the UV system. Ethernet cable was tested and found to be unable to support the energy supply. Awaiting further guidance from Enaqua.			
Treatment Plant Cleaning	Work Completed by Village & C3ND			
Additional Notes:				



WASTEWATER FACILITY OPERATION REPORT FOR THE MONTH OF

February

2025

SPDES PERMIT NO. NY-- 0271420			FACILITY NAME Village of Red Hook Sewer			FACILITY OWNER Village of Red Hook			FACILITY LOCATION 7467 S Broadway Red Hook, NY12571										
Day	Date	Daily Precip in/day	VOLUME OF SEWAGE TREATED			TEMPERATURE (°F.)		pH (S.U)				SETTLABLE SOLIDS		B.O.D.5		SUSPENDED SOLIDS			
			Inst.Max. MGD	Daily Average MGD	Inst. Min MGD	Influent (2)	Effluent (2)	Influent Minimum	Influent Maximum	Effluent Minimum	Effluent Maximum	Influent Maximum	Effluent Maximum	Influent Type	Effluent Type	Influent Type	Effluent Type		
Sat	01	0.52		0.033		46	48		7.1		7.3	30	<0.1						
Sun	02	0.00		0.004		48	47		7.3		7.5	30	<0.1						
Mon	03	0.14		0.031		46	47		7.3		7.4	28	<0.1						
Tue	04	0.00		0.035		47	49		7.1		7.5	3	<0.1						
Wed	05	0.00		0.042		48	47		7.4		7.7	2	<0.1						
Thur	06	0.00		0.035		48	47		7.5		7.5	40	<0.1						
Fri	07	0.22		0.054		49	48		7.0		7.4	25	<0.1		62		110		
Sat	08	0.00		0.034		48	48		7.6		8.0	35	<0.1						
Sun	09	0.38		0.031		48	46		8.2		7.8	40	<0.1						
Mon	10	0.00		0.053		50	49		7.7		7.5	80	<0.1						
Tue	11	0.00		0.031		49	48		7.7		7.6	70	<0.1						
Wed	12	0.00		0.036		48	47		7.8		7.4	65	<0.1						
Thur	13	0.11		0.044		47	47		7.6		7.5	75	<0.1						
Fri	14	0.00		0.024		48	47		7.8		7.4	110	<0.1						
Sat	15	0.00		0.026		47	47		7.6		7.5	130	<0.1						
Sun	16	0.11		0.021		48	47		7.7		7.7	140	<0.1						
Mon	17	0.62		0.006		48	48		7.7		7.5	200	<0.1						
Tue	18	0.82		0.052		47	47		7.8		7.6	200	<0.1						
Wed	19	0.00		0.042		48	47		7.8		7.4	330	<0.1						
Thur	20	0.00		0.046		47	47		6.7		7.3	360	<0.1						
Fri	21	0.00		0.053		47	47		6.7		7.4	15	<0.1						
Sat	22	0.00		0.030		53	54		6.6		7.7	0	<0.1						
Sun	23	0.00		0.044		48	49		6.5		7.7	0	<0.1						
Mon	24	0.00		0.041		50	48		6.9		7.7	130	<0.1						
Tue	25	0.00		0.040		48	48		7.4		7.5	25	<0.1						
Wed	26	0.00		0.040		48	49		6.7		7.4	6	<0.1						
Thur	27	0.02		0.038		46	48		6.6		7.3	0	<0.1						
Fri	28	0.30		0.044		48	50		6.6		7.5	5	<0.1						
	01																		
	02																		
	03																		
Total Precip.				Monthly Average		Average Influent	Average Effluent					Monthly Maximum	Monthly Maximum	30 day flow-weighted avg (1) Inf.(mg/l) Eff.(mg/l) Rem.%			30 day flow-weighted avg (1) Inf.(mg/l) Eff.(mg/l) Rem.%		
3.24				0.036		48	48	6.5	8.2	7.3	8.0	360.0	<0.1		62	#DIV/0!	110	#DIV/0!	
30 Day Quantity												18.65		lbs/day		33.09		lbs/day	

FACILITY MAILING ADDRESS (Street, City, State, Zip code) 14 Old Route 199 Red Hook, NY 12571					TELEPHONE NUMBER 845-244-0129		CHIEF OPERATOR'S NAME C3ND ENVIRONMENTAL		CERTIFICATION GRADE 2A	
		TOTAL PHOSPHORUS(mg/l)		Ultra Violet		FECAL COLIFORM		REMARKS Enter any other comments, observations, operating problems, equipment failure, etc		
		Influent Type	Effluent Type	MW/CM2		Effluent MF or MPN/100ml				
Day	Date			#1	#2					
Sat	01			100%	0%			Red Hook Commons UV'S not currently working & in need of replacement of Bulb's.		
Sun	02			100%	0%			There has been customer complaints referencing odor from wastewater treatment plant, intial investigation found that some odors are coming from odoris wastewater discharge, while other investigations have found that the odor seems to be coming from the facilities EQ tank vent. The village is aware & are working on a remdiation for the odors from the EQ vent line.		
Mon	03			100%	0%					
Tue	04			100%	0%					
Wed	05			100%	0%					
Thur	06			100%	0%					
Fri	07			100%	0%	24196				
Sat	08			100%	0%					
Sun	09			100%	0%					
Mon	10			100%	0%					
Tue	11			100%	0%					
Wed	12			100%	0%					
Thur	13			100%	0%					
Fri	14			100%	0%					
Sat	15			100%	0%					
Sun	16			100%	0%					
Mon	17			100%	0%					
Tue	18			100%	0%					
Wed	19			100%	0%					
Thur	20			100%	0%					
Fri	21			100%	0%					
Sat	22			100%	0%					
Sun	23			100%	0%					
Mon	24			100%	0%					
Tue	25			100%	0%					
Wed	26			100%	0%					
Thur	27			100%	0%					
Fri	28			100%	0%					
	01									
	02									
	03									
		30 day flow-weighted avg.(1)		Monthly		30 day Geometric Mean (1)				
		Influent(mg/l)	Effluent(mg/l)	Minimum(1)	Maximum					
				0	1	24196				
		lbs/day								

(1) Refer to current edition of "Notice to SPDES Permittees Regarding Use of the National Pollutant Discharge Elimination System (NPDES) Discharge Monitoring Report Form" for procedures to calculate loadings, flow-weighted average, geometric mean, maximum minimum, percent removal, etc.

Note: Refer to current SPDES permit for specific monitoring requirements. Sample type for chlorine residual and fecal coliforms is grab.

[illegible]

a. Chlorine	_____	lbs.
b. Sodium Hypochlorite	_____	gal.
c. <u>soda Ash</u>	_____	lbs.
d. _____	_____	lbs.
e. _____	_____	lbs.
f. _____	_____	lbs.

a. Commercial _____ kilowatt hours

b. Stand-by _____ kilowatt hours

a. Natural Gas _____ cubic feet
b. Oil _____ gallons
c. Gasoline _____ gallons
d. Coal _____ tons
e. Digester Gas _____ cubic feet
f. Propane _____ gallons

[illegible]

Signature of Chief Operator or Designated Facility Representative