## MARYLAND DEPARTMENT OF THE ENVIRONMENT

Land Management Administration • Resource Management Program 1800 Washington Boulevard • Suite 610 • Baltimore, Maryland 21230-1719

410-537-3314 • 800-633-6101 x3314 • http://www.inde.maryland.gov

## Sewage Sludge Analysis Report

4. Analys	is Results (	Must Attach a Co	py of Laboratory Rep	Sampling Date: it losts	
Sample Type:	☐ Grab )	8-hr Composite	24-hr Composite	Other	
Constituents Analyzed		Result	Detection Limit	Units in Dry Weight**	
Solids content		57.5		%	
)H		7.21	_		
Ammonium nitrogen	NH <sub>4</sub>	0.985	0.0742	%	
Vitrate nitrogen	NO <sub>3</sub>	620	25.9	mg/kg	
Total phosphorus	TP	34100	1690	mg/kg	
Total potassium	TK	2500	166	mg/kg	
Total arsenic	As	10.4	4.Z	mg/kg	
Cotal cadmium	Cd	3.5	6.83	mg/kg	
otal copper	Си	480	1.7	mg/kg	
otal lead	Pb	70.0	3.3	mg/kg	
otal mercury	Hg	. 0.89	0.11	mg/kg	
otal molybdenum	Mo	11.4	1.7	mg/kg	
otal nickel	Ni	25.0	1.7	mg/kg	
otal selenium	Se	6.6	6.6	mg/kg	
otal zinc	Zn	771	6.6	mg/kg	
olychlorinated Biphenyls	PCBs	_	<del>-</del>	mg/kg	
otal Kjeldahl nitrogen	TKN	3.68	6.344	%	
Calcium Carbonate or Equiv	/t.*	NA	NA	%	
ne stabilized Sewage Sludge on re constituents within Co	eiling Conc	entrations? Wva	nd on dry weight basis only		
ample Medium: ☐ Liquid Cake ≥ 15% ☐ Particulate ≥ 7 Oried ≥ 35% ☐ Pellets ≥ 90%	< 15% Solid	7. Treatment Treated to Meet [ [503.32(b)(2	7. Treatment Method***: Untreated  Treated to Meet: [503.32(a)(2)] [503.32(a)(3)-(8)]  [503.32(b)(2)] [503.32(b)(3)] [503.32(b)(4)] or  Other:		

Form Number: MDE/LMA/PER.020 Date: May 20, 2015

TTY Users: 1-800-735-2258 \*\*

Page 1 of 2



1	TESTING FREQUI	ENCY	- Section			
Amount of Sewage Slud (per 365 day period – dr		Testing Frequency				
Greater than zero but less that (Greater than zero but less than		Once every year				
Equal to or greater than 290 but less (Equal to or greater than 319.67 but less	Once eve	Once every quarter (four times every year)				
Equal to or greater than 1,500 but les (Equal to or greater than 1,653.47 but le	Once ev	Once every 60 days (6 times every year)				
Equal to or greater than 15, (Equal to or greater than 16,		Once every month (12 times every year)				
8. Is Facility in operation?	Yes No Facility 1	Ocsign Flow: N/	A Peak Flow: mgd.			
REPORTING SCHEDULE						
Sampling Frequency Required	Submittal Deadline					
☐ Once every yes	Once every year		☐ June 1 of the sampling year			
☐ Once every quarter (4 time	es every year)	☐ June 1 an	d December 1 of each year			
Once every 60 days (6 time	☐ Feb. 30, April 30, June 30, Aug 30, Oct. 30, and Dec. 30 of each year					
Once every month (12 time	No later than end of the following month  As approved by the Department					
This Notice is provided pursuant to § 10-624 of the State Government Article of the Maryland Code. The personal information requested on this form is intended to be used in confirming the supplied information. Failure to provide the information requested materiality and intended to be used in confirming the supplied information. Failure to provide the information requested materiality and its constitute a violation of COMAR 26.04.06. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment ("MDE") is a public agency and subject to the Maryland Public Information Act. This completed form may be made available on the Internet via MDE's website and is subject to inspection or copying, in whole or in-part, by the public, interest groups and other governmental agencies, if not protected by federal or State law.  CERTIFICATION:  If as an authorized representative of the Facility named on this form, do solemnly affirm under the penalties of perjury, that the contents of this document are true to the best of my knowledge, information, and belief. Information in this form is subject to audit by the Maryland Department of the Environment (the "Department"). I hereby authorize the representatives of the Department, upon request, to have access to any records supporting the information provided in this form.						
THOMAS FANTOM Name (Printed)	PROJECT MAN	AGER	VEGCTA WATER Representing (Town, Company, etc.)			
Signature		410-354-1636 Phone Number				
NA	Eliom As. FAN	TOM @ UFOC	9			
Facsimile Number	Email Address					

Form Number: MDE/LMA/PER.020 Date: May 20, 2015 TTY Users: 1-800-735-2258

Page 2 of 2

