



ENVIRONMENTAL PROTECTION DIVISION

HIGH RATE STUDY DATA SUBMITTAL FORM

GENERAL INFORMATION

Name of Facility: _____ WSID No: _____

County: _____

Permitted Flow Rate: _____ MGD Proposed Flow Rate: _____ MGD

Permitted Filter Rate: _____ gpm/ft² Proposed Filter Rate: _____ gpm/ft²

Raw Water Turbidity: Year Max. _____ NTU Year Avg. _____ NTU
Year Min. _____ NTU

Water Plant Operator(s): _____ Certification Level: _____
_____ Certification Level: _____
_____ Certification Level: _____
_____ Certification Level: _____

PLANT INFORMATION

Instrumentation

Raw Water Turbidimeter: Online ___ Grab ___ Streaming Current Monitor: Yes ___ No ___

Particle Counter(s): Yes ___ No ___ Influent sensor(s) location: _____
Effluent sensor(s) location: _____

Chemical Addition

Pre-Chemicals (Cl₂, alum, polymer, etc.): _____

Taste and Odor Control: _____

Iron and Manganese Removal: _____

Flocculation

Number of Flocculators: _____

Type of Flocculators (baffles, mechanical, plates, etc.): _____

Mechanical Flocculator Stages: _____ (If applicable); Functional: _____ Yes/No

Theoretical Detention Time: _____ Minutes (at current capacity)

Theoretical Detention Time: _____ Minutes (at proposed capacity)

Sedimentation Basins

Number of Basins: _____

Baffles in Sedimentation basin(s): Yes ___ No ___ Plate or Tube Settlers: Yes ___ No ___

**HIGH RATE STUDY DATA SUBMITTAL FORM
(CONTINUED)**

Weir Overflow Rate: _____ gpd/foot of weir length (at current capacity).

Weir Overflow Rate: _____ gpd/foot of weir length (at proposed capacity)

Theoretical Basin Detention Time: _____ Minutes (at current capacity)

Theoretical Basin Detention Time: _____ Minutes (at proposed capacity)

Filters: _____

Number of Filters: _____

Filter Media Configuration:

Type: Single: _____ Dual: _____ Multi / Mixed: _____

Other: _____

Size and Depth of Media: Layer# I (Top): _____

Layer #2 (Middle or Bottom): _____

Layer #3 (Bottom- if applicable): _____

Support Layer: _____

Date Verified: _____ Backwash Flow Rate: _____ gpm/ ft²

Filter Sweeps: Yes _____ No _____ type: _____ Air Scour: Yes _____ No _____

Finished Water Turbidimeter(s): Online _____ Grab _____ Sensor(s) location: _____

BACKWASH/ SLUDGE HANDLING

Describe Sludge Handling/Removal Facilities: _____

LABORATORY EQUIPMENT

List all daily (raw, treated, finished) water parameter's tested: _____

Jar Test Equipment: Yes _____ No _____

Microbiological Test Equipment: Yes _____ No _____ Certified: Yes _____ No _____

Note: Attach additional pages if necessary.