

Mechanical Plant Compliance Inspection

System Name: WHITE CITY WASTEWATER WORKS

Remote Inspection ID: 1166884

Approval No: 00003566-05-00

Population: 3600

Date: 03-JUN-2022 09:30

Announced: No

Person Interviewed: SCHMIDT, GARY

General Section

Wastewater Treatment Type: MECHANICAL **System Classification:** NONE WWT TWO WWC

Sewage Categorization: MUNICIPAL **Discharge Easement:** No

Collection Type: GRAVITY

Comments: INSPECTION WAS CONDUCTED ON JUNE 3RD AND REVIEWED WITH TOWN PUBLIC WORKS MANAGER AND FOREMAN ON JUNE 14 2022.

Contacts

Name	Position	Phone / Fax	Email
SCHMIDT, GARY	OTHER - MANAGER OF PUBLIC WORKS	Cell: (306) 552-3848	GSCHMIDT@WHITECITY.CA
MATTS, NOLAN	OPERATOR IN CHARGE	Cell: (306) 533-1936	NOLAN.MATTS@SASKWATER.COM
LIGGETT, BRENDAN	OPERATOR	Cell: (306) 533-2136	N/A
HINDLE, JEFF	CERTIFIED OPERATOR	Cell: (306) 527-6128	N/A
HODGES, NEIL	UNCERTIFIED OPERATOR	Cell: (306) 540-4999	N/A
STEVENSON, BRUCE	OPERATOR	Cell: (306) 527-0210	N/A
NAMETH, BEN	UNCERTIFIED OPERATOR	Business: (306) 781-2355	N/A
MORGAN, ANDREW	UNCERTIFIED OPERATOR	Business: (306) 781-2355	N/A
LANDRY, RYAN	FOREMAN	Cell: (306) 533-4341	N/A
CHALLAND, JOSH	OPERATOR	Cell: (306) 527-8510	N/A
AUDETTE, RODNEY	ADMINISTRATOR	Cell: (306) 631-3421	RAUDETTE@WHITECITY.CA

SHA, REGINA	OTHER - HEALTH REGION	Phone: (306) 766-7755	ENVIRONMENTALHEALTH@RQHEALTH.CA
TURNER, DON	ENVIRONMENTAL PROJECT OFFICER	Cell: (306) 539-4188	DON.TURNER@WSASK.CA
Complaints: N/A			

Operator Certification Section

Operator Name	Certification Levels		Expiry Date	Operator is a Supervisor
	Wastewater Collection	Wastewater Treatment		
MATTS, NOLAN	TWO	TWO	15-FEB-2024	Yes
LIGGETT, BRENDAN	ONE	ONE	15-JUL-2023	No
HINDLE, JEFF	TWO	TWO	15-SEP-2022	No
STEVENSON, BRUCE	ONE	ONE	15-APR-2023	No

Discharge Area

Discharge Type: INTERMITTENT
Disinfection: No
Effluent Treatment: OTHER
Discharge Area: IRRIGATION
Land Use in Receiving Area: AGRICULTURAL
Nearest Residence: NA
Latitude:N/A **Longitude:**N/A
Discharge Area Comments:
CONNECTED TO WCRM158 WASTEWATER FACILITY.


Pumping Stations

Total Pumping Stations: 5

Pumping Station #	Number of			Mechanical Ventilation	Type of Exhaust	By-Pass			Potable Water Outlet	Adequate Backflow Protection	Backup Power
	Pumps	Wet Wells	Dry Wells			Works	Date	Reported			
5	2	1	0	Y	FORCED DRAFT	N	N/A	N	N	N	Y
4	2	1	0	Y	FORCED DRAFT	N	N/A	N	N	N	Y
3	2	1	0	Y	FORCED DRAFT	N	N/A	N	N	N	Y
6	2	1	0	Y	FORCED DRAFT	N	N/A	N	N	N	Y
2	2	1	0	Y	FORCED DRAFT	N	N/A	N	N	N	Y

Regulatory Section C=Compliant NC=Non-Compliant N/A=Not Applicable

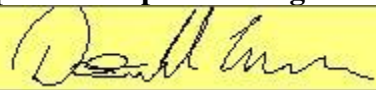
C	NC	NA	General	Comments
X			Approved system EMPA2010 24(1)	
X			Certified operator WWSW 62	CURRENTLY USING SASKWATER AS OVERSEEING CERTIFIED OPERATOR.
			Sewage Pumping Stations	
X			Pumping stations must have mechanically forced air ventilation WWSW 8(1)	
			Reporting	
X			Immediate reporting of upset/bypass condition WWSW 13(2)	
			Records	
X			Maintenance work & failure of treatment components WWSW 15(a)(i)	MAINTENANCE LOGS ARE DOCUMENT ELECTRONICALLY
X			Types, dosages and total amounts of chemicals or other substances added WWSW 15(a)(ii)	TOWN FOREMAN HAS AN ACTIZYME ADDITION MAP FOR EACH YEAR.
X			Site inspections as required by permit EMPA2010 29(1)	
X			Records maintained in appropriate manner: (chronological/factual/initialled/done by permittee) EMPA2010 29(1)	
X			Monthly or annual review of records by permittee EMPA2010 29(1)	



(Operator/Supervisor Signature)



Agree with statements



(EPO Signature)