

**General Permit for the Discharge of Stormwater Associated with  
Industrial Activity, effective 10/1/2011  
Stormwater Monitoring Report Form**  
General Requirements and Sector G Transportation Facilities Only  
(Do not submit if you have other sector specific requirements)

**Facility Information**

Permittee Name: Greater Hartford Transit District Site Name: First Transit, Inc. #55835  
 Mailing Address: 1 Union Place, Hartford, CT 06103  
 Contact Person: Vicki L. Shotland Title: Executive Director  
 Business Phone: 860-247-5329 ext.: \_\_\_\_\_ Email: vshotland@ghtd.org  
 Site Address: 148 Roberts Street, East Hartford, CT 06108  
 Receiving Water (name/basin): Hockanum River  
 Permit #: GSI GSI002797 Primary SIC: 9199  
 Discharges into an Impaired Waterbody: Yes  No  (If yes, complete the table on page 3 of this form)

**Sample Information**

Sample Location: Outfall 001 Person Collecting Sample: Matthew Lontz  
 Date/Time Collected: 06/25/2019 10:15 Date of Previous Storm Event: 06/21/2019  
 This report is for samples required: Semi-annually  Annually  Other   
 Check here if the sample contains snow or ice melt:   
 Check here if a benchmark exceedance is solely due to background or off site sources  see note below

**Monitoring Results**

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	2.6	5.0 mg/L	<input type="checkbox"/>	EPA 1664	ACT
Rainfall pH	Semi-annual	5.84	n/a		SM4500 H+B	ACT
Sample pH	Semi-annual	5.93	5-9 SU	<input type="checkbox"/>	SM4500 H+B	ACT
COD	Semi-annual	107	75 mg/L	<input checked="" type="checkbox"/>	EPA 410.4	ACT
TSS	Semi-annual	15.5	90 mg/L	<input type="checkbox"/>	SM2540D	ACT
TP	Semi-annual	0.101	0.40 mg/L	<input type="checkbox"/>	SM4500PE	ACT
TKN	Semi-annual	2.83	2.30 mg/L	<input checked="" type="checkbox"/>	SM4500 Norg	ACT
NO <sub>3</sub> -N	Semi-annual	0.675	1.10 mg/L	<input type="checkbox"/>	EPA 300	ACT
Total Copper	Semi-annual	0.02	0.059 mg/L	<input type="checkbox"/>	EPA 200.7	ACT
Total Zinc	Semi-annual	0.27	0.160 mg/L	<input checked="" type="checkbox"/>	EPA 200.7	ACT
Total Lead	Semi-annual	0.93	0.076 mg/L	<input checked="" type="checkbox"/>	EPA 200.7	ACT
24 Hr. LC <sub>50</sub>	Annual-Year 1&2	N/A	n/a			
48 Hr. LC <sub>50</sub>	Annual-Year 1&2	N/A	n/a			

**Exemptions**

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below  
Oil & Grease, pH, COD, TSS, TKN, NO3-N, Total Coper

**NOTE:** Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or

**STORMWATER ACUTE TOXICITY TEST DATA SHEET**  
 (required annually only during Year 1 and Year 2 of the permit)

Site Name:	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)			
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

**REFERENCE TOXICANT RESULTS**

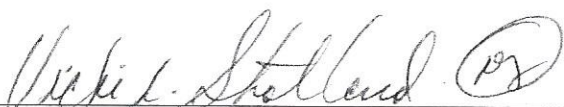
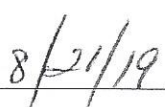
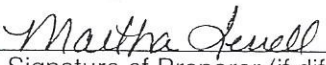
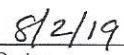
Test Species	Date	Reference Toxicant	Source	LC <sub>50</sub>
<i>Daphnia pulex</i>				



**Additional Monitoring for Discharges to Impaired Waters (if applicable):**

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

**Statement of Certification**

<p>"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."</p>	
	
Signature of Permittee	Date
<b>Vicki L. Shotland</b>	<b>Executive Director</b>
Name of Permittee (print or type)	Title (if applicable)
	
Signature of Preparer (if different than above)	Date
<b>Martha Terrell</b>	<b>Sr. Environmental Scientist</b>
Name of Preparer (print or type)	Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR  
 BUREAU OF WATER PROTECTION AND LAND REUSE  
 CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION  
 79 ELM STREET  
 HARTFORD, CT 06106-5127



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**Facility Information**

Permittee Name: Greater Hartford Transit District Site Name: First Transit, Inc. #55835  
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 Contact Person: Vicki L. Shotland Title: Executive Director  
 Business Phone: 860-247-5329 ext.: \_\_\_\_\_ Email: vshotland@ghtd.org  
 Site Address: 148 Roberts Street, East Hartford, CT 06108  
 Receiving Water (name/basin): Hockanum River  
 Permit #: GSI GSI002797 Primary SIC: 9199  
 Discharges into an Impaired Waterbody: Yes  No  (If yes, complete the table on page 3 of this form)

**Sample Information**

Sample Location: Outfall 002 Person Collecting Sample: Matthew Lontz  
 Date/Time Collected: 06/25/2019 10:00 Date of Previous Storm Event: 06/21/2019  
 This report is for samples required: Semi-annually  Annually  Other   
 Check here if the sample contains snow or ice melt:   
 Check here if a benchmark exceedance is solely due to background or off site sources  see note below

**Monitoring Results**

Parameter	Required Frequency	Results (units)	Benchmark	Benchmark Exceedance (see pg 4)	Test Method	Laboratory Name
Oil & Grease	Semi-annual	1.8	5.0 mg/L	<input type="checkbox"/>	EPA 1664	ACT
Rainfall pH	Semi-annual	5.84	n/a		SM4500 H+B	ACT
Sample pH	Semi-annual	5.16	5-9 SU	<input type="checkbox"/>	SM4500 H+B	ACT
COD	Semi-annual	76	75 mg/L	<input checked="" type="checkbox"/>	EPA 410.4	ACT
TSS	Semi-annual	14.0	90 mg/L	<input type="checkbox"/>	SM2540D	ACT
TP	Semi-annual	0.072	0.40 mg/L	<input type="checkbox"/>	SM4500PE	ACT
TKN	Semi-annual	2.71	2.30 mg/L	<input checked="" type="checkbox"/>	SM4500 Norg	ACT
NO <sub>3</sub> -N	Semi-annual	0.644	1.10 mg/L	<input type="checkbox"/>	EPA 300	ACT
Total Copper	Semi-annual	0.02	0.059 mg/L	<input type="checkbox"/>	EPA 200.7	ACT
Total Zinc	Semi-annual	0.19	0.160 mg/L	<input checked="" type="checkbox"/>	EPA 200.7	ACT
Total Lead	Semi-annual	<0.02	0.076 mg/L	<input type="checkbox"/>	EPA 200.7	ACT
24 Hr. LC <sub>50</sub>	Annual-Year 1&2	N/A	n/a			
48 Hr. LC <sub>50</sub>	Annual-Year 1&2	N/A	n/a			

**Exemptions**

List here any parameter(s) that will not be sampled for the remainder of the permit term: see note below  
Oil & Grease, pH, COD, TSS, TP, TKN, NO3-N, Total Copper, Total Zinc, Total Lead

**NOTE:** Complete the "Data Tracking Table" (page 4 on this form) to show the parameter is eligible for the monitoring exemption in Section 5(e)(1)(B)(iii) of the general permit. If you are discontinuing monitoring for impaired water parameters (per Section 5(e)(1)(D)), or parameters that are present due to natural or

background levels or off site run-on (per Section 5(e)(1)(B)(V)), attach additional supporting information to this form.



**General Permit for the Discharge of Stormwater Associated with  
Industrial Activity, effective 10/1/2011  
Data Tracking Sheet  
General and Sector G Transportation Facilities Only  
Monitoring Requirements**

Permittee Name: <b>Greater Hartford Transit District</b>	Permit #: GSI <b>GSI002797</b>
Site Name: <b>First Transit, Inc. #55835</b>	
Site Address: <b>148 Roberts Street, East Hartford, CT 06118</b>	
Sample Location: <b>Outfall 001</b>	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Quality for exemption?
	1	2	3	4			
Sample Date	03/23/18	09/10/18	03/22/19	06/25/19			
O&G	<1.0	1.9	1.8	2.6	1.70	5.0 mg/L	Yes
Sample pH	7.12	6.81	6.68	5.93	6.64	5-9 S.U.	Yes
COD	31	50	29	107	54.25	75 mg/L	Yes
TSS	9.5	32.0	122.0	15.5	44.75	90 mg/L	Yes
TP	2.48	0.140	<0.01	0.101	0.68	0.40 mg/L	No
TKN	0.871	2.06	1.06	2.83	1.71	2.30 mg/L	Yes
NO <sub>3</sub> -N	0.297	0.260	<0.20	0.675	0.33	1.10 mg/L	Yes
Total Copper	0.01	0.02	<0.01	0.02	0.02	0.059 mg/L	Yes
Total Zinc	0.08	0.63	0.12	0.27	0.28	0.160 mg/L	No
Total Lead	<0.02	<0.02	<0.02	0.93	0.24	0.076 mg/L	No

\*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

If the sample result reported by the testing laboratory was below detection limit, for the purpose of averaging, use a value that is 1/2 the detection limit for that parameter in the formula above. For example, if the result for Oil & Grease was <2.0 mg/L, use a value of 1.0 mg/L for determining the average. Please refer to Section 5 e(1)B(iii) of the General Permit for a more detailed explanation.

**General Permit for the Discharge of Stormwater Associated with  
Industrial Activity, effective 10/1/2011  
Data Tracking Sheet  
General and Sector G Transportation Facilities Only  
Monitoring Requirements**

Permittee Name: <b>Greater Hartford Transit District</b>	Permit #: GSI <b>GSI002797</b>
Site Name: <b>First Transit, Inc. #55835</b>	
Site Address: <b>148 Roberts Street, East Hartford, CT 06118</b>	
Sample Location: <b>Outfall 002</b>	

Enter the sample dates and the data reported for the four (4) most recent semi-annual sample results at this discharge location into the chart below. To determine the average for the four samples add up each of the four results and then divide that number by 4.

$$\text{Average} = \frac{(\text{Sample 1} + \text{Sample 2} + \text{Sample 3} + \text{Sample 4})}{4}$$

Parameter	Sample Result				Average	Benchmark*	Qualify for exemption?
	1	2	3	4			
Sample Date	<b>03/23/18</b>	<b>09/10/18</b>	<b>03/22/19</b>	<b>06/25/19</b>			
O&G	<b>&lt;1.0</b>	<b>1.5</b>	<b>1.6</b>	<b>1.8</b>	<b>1.35</b>	5.0 mg/L	<b>Yes</b>
Sample pH	<b>6.34</b>	<b>5.98</b>	<b>6.51</b>	<b>5.16</b>	<b>6.00</b>	5-9 S.U.	<b>Yes</b>
COD	<b>4</b>	<b>34</b>	<b>17</b>	<b>76</b>	<b>32.75</b>	75 mg/L	<b>Yes</b>
TSS	<b>8.0</b>	<b>9.0</b>	<b>17.5</b>	<b>14.0</b>	<b>12.13</b>	90 mg/L	<b>Yes</b>
TP	<b>0.087</b>	<b>0.180</b>	<b>&lt;0.01</b>	<b>0.072</b>	<b>0.10</b>	0.40 mg/L	<b>Yes</b>
TKN	<b>0.386</b>	<b>1.05</b>	<b>0.646</b>	<b>2.71</b>	<b>1.20</b>	2.30 mg/L	<b>Yes</b>
NO <sub>3</sub> -N	<b>&lt;0.20</b>	<b>&lt;0.20</b>	<b>&lt;0.20</b>	<b>0.644</b>	<b>0.24</b>	1.10 mg/L	<b>Yes</b>
Total Copper	<b>0.01</b>	<b>0.01</b>	<b>&lt;0.01</b>	<b>0.02</b>	<b>.02</b>	0.059 mg/L	<b>Yes</b>
Total Zinc	<b>0.10</b>	<b>0.11</b>	<b>0.05</b>	<b>0.19</b>	<b>0.11</b>	0.160 mg/L	<b>Yes</b>
Total Lead	<b>&lt;0.02</b>	<b>&lt;0.02</b>	<b>&lt;0.02</b>	<b>&lt;0.02</b>	<b>&lt;0.02</b>	0.076 mg/L	<b>Yes</b>

\*If the average of the four (4) most recent samples is less than the benchmark listed, your facility is no longer required to sample semi-annually for that parameter for the rest of the permit (current permit expires 9/30/2016). If your facility qualifies for an exemption from monitoring for sample pH, your facility is also exempt from monitoring rainfall pH for the remainder of the permit.

If the average of the four (4) most recent samples is equal to or greater than the benchmark listed, check the appropriate box on page 1. If so, you have exceeded the benchmark and must continue to sample this parameter semiannually until the average is below the benchmark. See Section 5(e)(1)(B) of the General permit for requirements when exceeding a benchmark.

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**STORMWATER ACUTE TOXICITY TEST DATA SHEET**  
 (required annually only during Year 1 and Year 2 of the permit)

Site Name:	
Date/Time Begin:	Date/Time End:
Sample Hardness:	Sample Conductivity:
Test Species: <i>Daphnia pulex</i> < 24 hrs old	Dilution Water Hardness:

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)			
	Hour	00	24	48	00	24	48	00	24	48	00	24	48
CONTROL 1													
CONTROL 2													
CONTROL 3													
CONTROL 4													
6.25% A													
6.25% B													
6.25% C													
6.25% D													
12.5% A													
12.5% B													
12.5% C													
12.5% D													
25% A													
25% B													
25% C													
25% D													
50% A													
50% B													
50% C													
50% D													
100% A													
100% B													
100% C													
100% D													

**REFERENCE TOXICANT RESULTS**

Test Species	Date	Reference Toxicant	Source	LC <sub>50</sub>
<i>Daphnia pulex</i>				

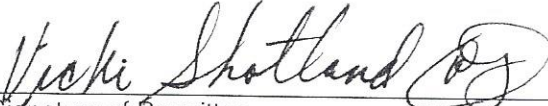
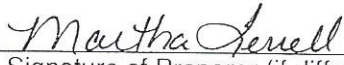


**Additional Monitoring for Discharges to Impaired Waters (if applicable):**

Parameter	Frequency	Results (units)	Test Method	Laboratory Name

**Statement of Certification**

"I have personally examined and am familiar with the information submitted in this document and all attachments thereto, and I certify that based on reasonable investigation, including my inquiry of the individuals responsible for obtaining the information, the submitted information is true, accurate and complete to the best of my knowledge and belief. I understand that a false statement in the submitted information may be punishable as a criminal offense, in accordance with section 22a-6 of the General Statutes, pursuant to section 53a-157b of the General Statutes, and in accordance with any other applicable statute."

	<u>8/22/19</u>
Signature of Permittee	Date
<b>Vicki L. Shotland</b>	<b>Executive Director</b>
Name of Permittee (print or type)	Title (if applicable)
	<u>8/2/19</u>
Signature of Preparer (if different than above)	Date
<b>Martha Terrell</b>	<b>Sr. Environmental Scientist</b>
Name of Preparer (print or type)	Title (if applicable)

Please send all completed forms to:

WATER TOXICS PROGRAM COORDINATOR  
 BUREAU OF WATER PROTECTION AND LAND REUSE  
 CT DEPARTMENT OF ENERGY & ENVIRONMENTAL PROTECTION  
 79 ELM STREET  
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