1. SCOPE:

1.1 Title: Non-Hazardous Liquid Waste Removal Operations at Naval Station Mayport; accomplish

2. REFERENCES:

2.1 NAVSEA Standard Items

2.2 SOPA (ADMIN) Mayport Instruction 5090.2 Series (Oily Waste/Bilgewater and Sanitary Sewer/CHT Management)

2.3 Coast Guard Operations Manual

3. REQUIREMENTS:

3.1 Accomplish the requirements of 009-09 of 2.1 for the removal of non-hazardous liquid waste, chemical cleaning waste, sludge, and debris as identified in Paragraphs 3.2 through 3.8 in accordance with References 2.2 and 2.3.

3.1.1 Include the assignment of contractor and subcontractor supervisory personnel and safety precautions.

3.2 Control transfer operations to preclude spillage.

3.2.1 Install, adjust, and maintain an oil containment boom throughout the entire availability (defined as 5 days after the start date of the availability or one day prior to the start of transfer operations, whichever comes first), unless otherwise directed by the SUPERVISOR, around the perimeter of the ship, ship's service barges, berthing barges, paint floats, camels, diving vessels, and fuel oil barges during fueling periods when they are alongside/outboard of ship.

3.2.1.1 Ensure each boom is a minimum of 10 feet outboard of the ship's hull. The boom must be anchored forward, amidships, and aft to prevent contact with the ship’s hull. Booms must be maintained in good condition.
3.2.1.2 Ensure each boom has a minimum of 6 inches of flotation above water, with at least a 12-inch skirt below water. Connections between each boom must be oil tight.

3.2.1.3 Operations that do not involve petroleum-based fluids will not require a containment boom.

3.2.2 Report accidental spillage immediately to the Mayport Naval Station Quarterdeck, Harbor Operations, and the SUPERVISOR.

3.2.3 Maintain a spill clean-up kit for each transfer operation involving petroleum, oils, and lubricants (POL). Each kit must consist, as a minimum, of the following:

- Socks, oil absorbent, 200 feet total length, with the ability to string together as needed and to deploy for use.
- Oil absorbent pads, 24-inch by 24-inch (400 total) or 16-inch by 16-inch (500 total), or paper booms (200 feet).
- Oilsorb or equivalent oil absorbent granules, (400 pounds total).

3.2.4 Maintain a spill clean-up kit containing the appropriate absorbent and neutralization agents for the chemical being used for transfer/cleaning operations involving chemicals other than POL’s.

3.2.5 Take immediate action to contain and clean up spillage.

3.2.6 Ensure hoses and hose connections do not leak.

3.2.7 Ensure valves are opened and closed by authorized contractor personnel only.

3.3 Contractor container (tank, tank truck) must be empty upon arrival at the work site, containing no hazardous/non-hazardous waste or residue.

3.3.1 Label containers to include name of contractor, subcontractor, government contract number, emergency point of contact, contents, and date transfer operations commenced. Labels must be maintained and legible at all times.

3.3.2 Comingling of incompatible fluids in the same bulk container is prohibited.

3.4 Accomplish waste determination of liquid waste, sludge, and debris in accordance with applicable federal, state, and local laws, codes, ordinances, and regulations, and Naval Station requirements.

3.5 Oily Waste/Waste Oil, Bilgewater, Compensating Water
3.5.1 Transfer oily wastewater from compensating fuel oil systems into the Oily Waste/Waste Oil (OW/WO) riser system. A description is required on the Oily Waste/Bilgewater Transfer Information Sheet (Attachment A). Prior to discharging any waste to the OW/WO riser, the following are required:

3.5.1.1 Submit one legible copy, in approved transferrable media, of the completed Oily Waste/Bilgewater Transfer Information Sheet, Attachment A, to Public Works Department (PWD) Operating Contractor seven (7) days prior to the date transfer operations are to be accomplished.

3.5.1.1.1 A signed copy of Attachment A must be in the custody of the contractor's on-site representative during transfer operations.

3.5.1.1.2 Contractor must provide the following information to PWD Operating Contractor via phone (904-270-5450): location of discharge to the OW/WO riser system (pier, riser number), quantity of discharge, date, time, how discharge was generated, who generated discharge, person reporting discharge and phone number where they can be reached, prior to discharging any waste to the OW/WO riser.

3.5.1.2 Transfer non-hazardous liquid Monday through Friday during normal working hours (0800 to 1800).

3.5.1.2.1 Transfer operations outside normal hours or those requiring long-term continuous use must be arranged with PWD Operating Contractor a minimum of 24 hours in advance for weekdays and 48 hours in advance for weekends.

3.5.1.2.2 Transfer operations outside working hours must require prior approval of Harbor Operations. To arrange emergency connections after-hours, on weekends, or on holidays contact the NAVSTA Mayport Quarterdeck and the SUPERVISOR.

3.5.1.2.3 Provide adequate lighting to ensure safety and detection of spills.

3.5.1.3 Comply with the following requirements for gravity flow into the OW/WO riser collection system.

3.5.1.3.1 Hook hoses from the contractor's container to the OW/WO riser collection system utilizing an in-line strainer.

3.5.1.3.2 The in-line strainer basket must have a minimum open area 2-1/2 times the area of the connecting pipe and have 1/4-inch perforations.

3.5.1.3.3 Strainer basket must be made of perforated steel.
3.5.1.3.4 Transfer into OW/WO riser collection system must not exceed 200 gallons per minute (GPM). Pumps must be used only in emergency conditions with prior approval of PWD Operating Contractor, Naval Station Harbor Operations, and the SUPERVISOR.

3.5.1.4 Station a watch at the appropriate lift station for the duration of transfer operations. Watch must be in direct communication with the transferring unit and the pumping station, and is responsible for securing transfer operations under the following conditions:

3.5.1.4.1 Lift station wet well level exceeds 6 feet and/or the alarm sounds.

3.5.1.4.2 Lift station pump fails to start when level rises to 3 feet.

3.5.1.4.3 Lift station pump stops for any reason (loss of electricity, thermal overload, mechanical failure, etc.) other than low level.

3.5.1.4.4 Any abnormal or unusual color, odor, or foaming is observed.

3.5.1.4.5 Shutdown the generating flow immediately and contact the PWD Operating Contractor.

3.6 Collection, Holding and Transfer (CHT)

3.6.1 Transfer non-hazardous liquid waste into the Collection, Holding and Transfer (CHT) riser collection system in accordance with the CHT & Sanitary Discharge Guidance, Attachment B, as follows:

3.6.1.1 Prior to discharge, evaluate liquid to ensure none of the prohibited items listed in Attachment B are present (e.g., foam, fuel).

3.6.1.2 Obtain samples, and perform analyses for the following items: pH, Hydrogen Sulfide (H2S), Chemical Oxygen Demand (COD), and salinity. Field test kits/equipment may be used to obtain results; however, samples must be collected, handled, and reported by appropriately trained personnel.

3.6.1.3 Provide copies of the analytical results to the SUPERVISOR to confirm limits in Attachment B are not exceeded before commencing pumping operations.

3.6.1.4 Dispose of wastewater that complies with Appendix B requirements into the CHT riser system.

3.6.1.5 Super-chlorinated and boiler feed water must not be pumped into the bilge.
3.6.2 Transfer non-hazardous liquid Monday through Friday during normal working hours (0800 to 1800).

3.6.2.1 Transfer operations outside normal hours or those requiring long-term continuous use must be arranged with PWD Operating Contractor a minimum of 24 hours in advance for weekdays and 48 hours in advance for weekends.

3.6.2.2 Transfer operations outside working hours must require prior approval of Harbor Operations. To arrange emergency connections after-hours, on weekends, or on holidays contact the NAVSTA Mayport Quarterdeck and the SUPERVISOR.

3.6.2.3 Provide adequate lighting to ensure safety and detection of spills.

3.6.3 Comply with the following requirements for gravity flow into the CHT riser collection system.

3.6.3.1 Hook hoses from the contractor's container to the CHT riser collection system utilizing an in-line strainer.

3.6.3.2 The in-line strainer basket must have a minimum open area 2-1/2 times the area of the connecting pipe and have 1/4-inch perforations.

3.6.3.3 Strainer basket must be made of perforated steel.

3.6.3.4 Transfer into CHT riser collection system must not exceed 100 gallons per minute (GPM). Pumps must be used only in emergency conditions with prior approval of PWD Operating Contractor, Naval Station Harbor Operations, and the SUPERVISOR.

3.7 Off-Base Disposal

3.7.1 Dispose of non-hazardous liquid waste (including chemical cleaning non-hazardous liquid waste), bilge water, Aqueous Film Forming Foam (APFF), soaps, detergents, surfactants, non-pumpable sludge, and debris off Mayport Naval Station in accordance with federal, state and local laws, codes, ordinances, and regulations.

3.7.1.1 Submit one legible copy, in approved transferrable media, of completed transport document, i.e., Bill of Lading or Non-Hazardous Waste Manifest, including waste determination, to the SUPERVISOR.

3.7.1.2 The use of current waste profiles for disposal of non-hazardous liquid waste with the exception of chemical cleaning wastes is authorized.

3.7.1.3 Current waste profiles are those approved within the last twelve calendar months. Profiles dated earlier will be rejected by the SUPERVISOR.
3.7.1.4 Provide waste profile documentation, including waste analyses, MSDS, and associated waste approval letter, if applicable, in approved transferrable media to the SUPERVISOR upon request.

3.8 Remove and secure equipment and hoses. Clean area upon completion of transfer operations.

4. NOTES:

4.1 Secure transfer operations during Thunderstorm Condition I, Gale/Storm/Hurricane Condition I, or during local lightning conditions.

4.2 A reservation will be established in the Job Order for off-base disposal of non-hazardous liquid waste.

4.3 Important telephone numbers are listed in Attachment A and B.
ATTACHMENT A

OILY WASTE/BILGEWATER TRANSFER INFORMATION SHEET
(Routine transfers complete Sections I, II, III)
(Ship Repair Contractors complete Sections I, II, IV)

Today’s Date: ___________________________ Pier/Berth: ___________________________

Ship/Activity: ___________________________ Riser No: ___________________________

I. Transfer Start Date: ___________________________ Transfer Start Time: ___________________________
Transfer Stop Date: ___________________________ Transfer Stop Time: ___________________________
Pumping Rate (gpm): ___________________________ Total (gal): ___________________________ No. of Hoses Needed: ________

Harbor Port Operations Approval for after-hours: ___________________________ Date: ___________________________

II. Description of material to be transferred: ____________________________________________

Quantity of material to be transferred (In Gal)
(Fresh/saltwater ballast, compensating water, oily wastewater, etc.) If applicable, note any special circumstances about the generation of the material; fuel spills, odors, appearance, foaming, color, etc.: ___________________________________________

III. HIP CERTIFICATION FOR ROUTINE TRANSFER
I hereby declare that the OW/bilgewater transferred is as described above and does not contain prohibited substances as listed in Enclosure (1) of SOPA (ADMIN) MYPTINST 5090.2G.

__________________________________________  __________________________________________
Authorized Representative (Sign and Print Name)  Date

Phone Number ___________________________ FAX Number: ___________________________

IV. SERMC/CONTRACTOR ___________________________  PWD JON: ___________________________

Contractor: ___________________________  ITEM No. ___________________________
Subcontractor: ___________________________  Source: ___________________________
Surveyor: ___________________________  DSR No: ___________________________

Phone Number: ___________________________  FAX Number: ___________________________

In accordance with NAVFAC SE requirements and applicable Code of Federal Regulations for disposal of waste liquids, certify that the lab analysis has been reviewed and is satisfactory for disposal through the NAVSTA MPT OWWO Pier riser system.

Supervisory Surveyor: ___________________________  ___________________________

IMPORTANT TELEPHONE NUMBERS:
AFTER-HOURS EMERGENCIES: NAVSTA Mayport Quarterdeck: (904) 270-5401; Command Duty Officer: (904) 219-9705/234-3557
HARBOR PORT OPERATIONS: (904) 270-5266 OR (904) 270-5250 ext. 301
PWD Mayport BOS CONTRACTOR OFFICE: (904) 270-6761, FAX: (904) 249-9752
PWD Mayport BOS Contractor OWWO TREATMENT PLANT: (904) 270-5450
NAVSTA Mayport ENVIRONMENTAL: (904) 270-6730
PWD Utilities: (904) 270-3182/3180
ATTACHMENT B


Contaminant discharge limits listed below are based on the ability of the NAVSTA Mayport WWTF to meet limits in the Installation Commander’s Discharge Permit (FL0000922). Any such discharges increase the risk of violations, which are reported to the State of Florida and are subject to possible Notices of Violation (NOVs) and fines. Therefore, when these contaminants are identified, actions will be taken such as shutting down lift stations and/or disconnecting ships from risers. Complying with and enforcing this guidance is mandatory.

<table>
<thead>
<tr>
<th>CONTAMINANT</th>
<th>LIMIT</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFFF Fire Fighting Materials</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Ballast Water / Sea Water / Salt Water</td>
<td>Notify BEFORE DISCHARGE if &gt;20,000 gallons within 24-hr period</td>
</tr>
<tr>
<td>Bilge Water</td>
<td>NOT ALLOWED (Send to OWTP)</td>
</tr>
<tr>
<td>Compensating Water</td>
<td>NOT ALLOWED (Send to OWTP)</td>
</tr>
<tr>
<td>Concentrated Soaps, Detergents, Surfactants</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Industrial Wastewater</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Disinfectants</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Hazardous Materials (e.g., mercury and mercury-containing products, items with expired shelf life, misc. chemicals)</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>High and low pH substances (e.g., acids, bases)</td>
<td>NOT ALLOWED if pH is &lt; 6.5 or &gt; 8.5 (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Fuels, Oils, Greases, Hydraulic Fluids, Lubricants</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Cooking Oil, Cooking Grease/Fat</td>
<td>NOT ALLOWED Take to Recycle Ctr, Bldg 412, Ph: (904) 270-5095; or complete DD Form 1348-1 to arrange pickup by Hazardous Waste Facility, Ph: (904) 270-6468</td>
</tr>
<tr>
<td>Toxic Substances</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Pharmaceuticals</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Plating/Surface Finishing Chemicals (e.g., metal etching or pre-treating chemicals, rust or scale remover)</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Mercury (e.g., contents from fluorescent light bulbs or thermometers)</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Rags and feminine hygiene products</td>
<td>NOT ALLOWED</td>
</tr>
<tr>
<td>Solvents and Degreasers</td>
<td>NOT ALLOWED (Off-Site Disposal Required)</td>
</tr>
<tr>
<td>Hydrogen Sulfide (H₂S)</td>
<td>&gt; 100 mg/L NOTIFICATION/APPROVAL REQUIRED</td>
</tr>
<tr>
<td>Chemical Oxygen Demand (COD)</td>
<td>&gt; 800 mg/L NOTIFICATION/APPROVAL REQUIRED</td>
</tr>
<tr>
<td>Biological Oxygen Demand (BOD)</td>
<td>&gt; 500 mg/L NOTIFICATION/APPROVAL REQUIRED</td>
</tr>
</tbody>
</table>

CONTACT INFORMATION:

Notification/Questions:
- DURING DUTY HOURS:
  o PRIMARY: Base Operating Services Contractor (904) 270-6761
  o ALTERNATES: PWD Mayport (904) 270-3515/3180/3182
- AFTER DUTY HOURS:
  o PRIMARY: Call Command Duty Officer at (904) 219-9705
  o ALTERNATE: Call Fluor Federal Services at (904) 270-5149

Reporting Instructions:
- PROVIDE THE FOLLOWING:
  o Name of substance
  o Volume (gallons), estimate of volume of water and waste included in CHT system to be discharged
- Estimated volume of substances(s) for which discharge is requested

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ITEM NO: 099-51SE

FY-19