

U.S. Postal Service™

# CERTIFIED MAIL™ RECEIPT

*(Domestic Mail Only; No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)®

## OFFICIAL USE

|   |    |
|---|----|
| Postage   | \$ |
| Certified Fee                                     |    |
| Return Receipt Fee<br>(Endorsement Required)      |    |
| Restricted Delivery Fee<br>(Endorsement Required) |    |
| Total Postage & Fees                              | \$ |

Postmark  
Here

Sent To

Street, Apt. No.;  
or PO Box No.

City, State, ZIP+4

Raymond Bologna  
Robinson Power Co. LLC  
PO Box 127  
Burgettstown, PA 15021-0127

9454 4348  
9452 2546  
0000  
0075  
4774

## **Certified Mail Provides:**

- | A mailing receipt
- | A unique identifier for your mailpiece
- | A record of delivery kept by the Postal Service for two years

## **Important Reminders:**

- | Certified Mail may ONLY be combined with First-Class Mail® or Priority Mail®
- | Certified Mail is *not* available for any class of international mail.
- | NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- | For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- | For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- | If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

**IMPORTANT: Save this receipt and present it when making an inquiry.**

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

**1. Article Addressed to:**

Raymond Bologna  
 Robinson Power Co. LLC  
 PO Box 127  
 Burgettstown, PA 15021-0127



9590 9402 2929 7094 5169 58

**2. Article Number (Transfer from service label)**

7014 0510 0000 2596 9348

**COMPLETE THIS SECTION ON DELIVERY****A. Signature****X**

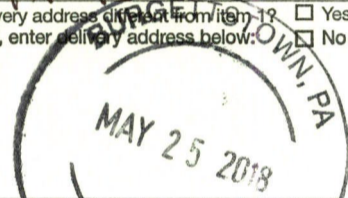
Rita Tulle

 Agent Addressee**B. Received by (Printed Name)**

RITA TULLE

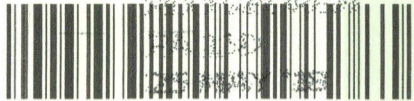
**C. Date of Delivery****D. Is delivery address different from item 1?** Yes

If YES, enter delivery address below:

 No**3. Service Type**

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

9590 9402 2929 7094 5169 58

United States  
Postal Service

RECEIVED

MAY 29 2018

Clean Water  
DEP, Southwest Regional Office

• Sender: Please print your name, address, and ZIP+4® in this box\*

Mahbuba Iasmin  
Clean Water Program  
400 Waterfront Drive  
Pittsburgh, PA 15222





**pennsylvania**

DEPARTMENT OF ENVIRONMENTAL  
PROTECTION

MAY 22 2018

**CERTIFIED MAIL NO. 7014 0510 0000 2596 9348**

Raymond Bologna  
Robinson Power Co. LLC  
PO Box 127  
Burgettstown, PA 15021-0127

Re: **Final NPDES Permit- Industrial Waste**  
**Beech Hollow Energy Project**  
**NPDES Permit No. PA0252808**  
**Authorization ID No. 1139444**  
**Robinson Township, Washington County**

Dear Mr. Bologna:

Your NPDES permit is enclosed. Please read the permit carefully. The permit expires on the date identified on page 1 of the permit. A renewal application must be submitted to this office 180 days prior to the permit expiration date, if a discharge is expected to continue past the expiration date of the permit.

For upgrades to the existing facilities, a Water Quality Management (WQM) permit application must be submitted at least 90 days prior to the anticipated date for initiating construction, and a WQM permit must be issued prior to initiating construction.

The permit requires that you use the Department of Environmental Protection's (DEP's) electronic Discharge Monitoring Report (eDMR) system to report the results of self-monitoring activities. The information you must submit within 30 days to register for use of the eDMR system is available at [www.dep.state.pa.us/edmr](http://www.dep.state.pa.us/edmr). DEP has also enclosed paper DMR templates and DMR instructions with the permit. It is recommended that you retain the DMR templates in the event you are unable to submit DMRs electronically through the eDMR system.

Also enclosed is a Supplemental Form Inventory, which identifies the forms that are attached to the permit and must be submitted as attachments to eDMR reports, as applicable (see individual form instructions). The submission of other supplemental forms may be required in accordance with the permit. We encourage you to use the spreadsheet versions of supplemental forms that contain appropriate validation and DEP-approved calculations.

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717.787.3483. TDD



Mr. Raymond Bologna

- 2 -

users may contact the Board through the Pennsylvania Relay Service, 800.654.5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board at 717.787.3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717.787.3483) FOR MORE INFORMATION.

If you have any questions, please contact Mahbuba Iasmin at 412.442.4102.

Sincerely,



Christopher Kriley, P.E.  
Environmental Program Manager  
Clean Water Program

Enclosures

cc: U.S. Environmental Protection Agency  
Regional Files  
Central Office, Division of Operations, Monitoring and Compliance  
Operations



# AUTHORIZATION TO DISCHARGE UNDER THE NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM DISCHARGE REQUIREMENTS FOR INDUSTRIAL WASTEWATER FACILITIES

**NPDES PERMIT NO: PA0252808**

In compliance with the provisions of the Clean Water Act, 33 U.S.C. Section 1251 *et seq.* ("the Act") and Pennsylvania's Clean Streams Law, as amended, 35 P.S. Section 691.1 *et seq.*,

**Robinson Power Co. LLC  
PO Box 127  
Burgettstown, PA 15021-0127**

is authorized to discharge from a facility known as **Beech Hollow Energy Project**, located in **Robinson Township, Washington County**, to **Unnamed Tributary to Little Raccoon Run and Unnamed Tributary of Little Raccoon Run** in Watershed(s) **20-D** in accordance with effluent limitations, monitoring requirements and other conditions set forth in Parts A, B and C hereof.

THIS PERMIT SHALL BECOME EFFECTIVE ON

OCT 01 2018

THIS PERMIT SHALL EXPIRE AT MIDNIGHT ON

SEP 30 2023

The authority granted by this permit is subject to the following

1. If there is a conflict between the application, its supporting documents and the terms and conditions of this permit, the terms and conditions shall prevail.
2. Failure to comply with the terms, conditions or effluent limitations of this permit may result in permit termination, revocation and reissuance, or modification of the permit in accordance with 25 Pa. Code § 122.41(a).
3. A complete application for renewal of this permit, or for modification of the permit, must be submitted to DEP at least 180 days prior to the expiration date of the permit (or by DEP for submission at a later date), using the appropriate form in accordance with 25 Pa. Code § 122.21(d)(2).

In the event that a timely and complete application for renewal of this permit is not submitted through no fault of the permittee, to reissue the permit before the expiration date of the permit, this permit will remain fully effective and enforceable against the discharger until a new permit is issued. 25 Pa. Code §§ 92a.7 (b), (c)

4. This NPDES permit does not constitute authorization to construct or make modifications to wastewater treatment facilities necessary to meet the terms and conditions of this permit.

*Data were wrong.  
Permit was resent  
with correct dates.*

DATE PERMIT ISSUED

MAY 22 2018

ISSUED BY

*Chris Kriley*

**Christopher Kriley, P.E.  
Clean Water Program Manager  
Southwest Regional Office**



**PART A - EFFLUENT LIMITATIONS, MONITORING, RECORDKEEPING AND REPORTING REQUIREMENTS**

I. A. For Outfall 001, Latitude 40° 24' 22.00", Longitude -80° 17' 51.00", River Mile Index 1.971, Stream Code 33824

Receiving Waters: Unnamed Tributary to Little Raccoon Run

Type of Effluent: Stormwater

1. The permittee is authorized to discharge during the period from **Permit Effective Date** through **Permit Expiration Date**.
2. Based on the anticipated wastewater characteristics and flows described in the permit application and its supporting documents and/or amendments, the following effluent limitations and monitoring requirements apply (see also Additional Requirements and Footnotes).

| Parameter              | Effluent Limitations                |               |                       |                 |               |                  | Monitoring Requirements                      |                      |
|------------------------|-------------------------------------|---------------|-----------------------|-----------------|---------------|------------------|--|----------------------|
|                        | Mass Units (lbs/day) <sup>(1)</sup> |               | Concentrations (mg/L) |                 |               |                  | Minimum <sup>(2)</sup> Measurement Frequency | Required Sample Type |
|                        | Average Monthly                     | Daily Maximum | Minimum               | Average Monthly | Daily Maximum | Instant. Maximum |  |                      |
| Flow (MGD)             | Report                              | XXX           | XXX                   | XXX             | XXX           | XXX              | 1/6 months                                   | Grab                 |
| pH (S.U.)              | XXX                                 | XXX           | XXX                   | XXX             | Report        | XXX              | 1/6 months                                   | Grab                 |
| Total Suspended Solids | XXX                                 | XXX           | XXX                   | XXX             | Report        | XXX              | 1/6 months                                   | Grab                 |
| Oil and Grease         | XXX                                 | XXX           | XXX                   | XXX             | Report        | XXX              | 1/6 months                                   | Grab                 |
| Aluminum, Total        | XXX                                 | XXX           | XXX                   | XXX             | Report        | XXX              | 1/6 months                                   | Grab                 |
| Iron, Total            | XXX                                 | XXX           | XXX                   | XXX             | Report        | XXX              | 1/6 months                                   | Grab                 |
| Manganese, Total       | XXX                                 | XXX           | XXX                   | XXX             | Report        | XXX              | 1/6 months                                   | Grab                 |

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s):

at Outfall 001