**FREE WASTEWATER TECHNICAL ASSISTANCE**

**Throughout the State of Pennsylvania**

The Department of Environmental Protection’s Wastewater Technical Assistance Program (WWTAP) is available to offer free on-site Technical Assistance to Wastewater Treatment Plants throughout the state of Pennsylvania. Many of the friendly Instructors are experienced in troubleshooting and operating Wastewater Treatment Plants and have years of experience with the Activated Sludge Process.

How can WWTAP help?

* Troubleshooting O&M (operation and maintenance) Problems Affecting Plant Performance
* Treatment Plant Optimization
* Developing Process Control Programs for Wastewater Treatment Plants
* Nutrient Removal and BNR (Biological Nutrient Removal) Processes
* Assistance developing SOPs (Standard Operating Procedures)
* Nitrification and Denitrification
* Minimizing Odor Problems with Pumpstations and Treatment Plants
* Assistance with Proper Use, Calibration and Maintenance of Meters
* Assistance with Laboratory Procedures

**Request Assistance**

Fill in the Wastewater Technical Assistance Form below and email it to:

[RA-EPWWTAPROVIDER@pa.gov](mailto:RA-EPWWTAPROVIDER@pa.gov)

Or mail to:

Pennsylvania DEP

Bureau of Clean Water – WWTAP Program

Rachel Carson State Office Building

P.O. Box 8774

Harrisburg, PA 17105-877

**WASTEWATER TECHNICAL ASSISTANCE REQUEST FORM**

|  |  |  |
| --- | --- | --- |
| Facility Name | Date of Request | |
| Facility Name | mm/dd/yyyy | |
| Facility Address | | |
| Facility Address | | |
| City | State | Zip Code |
| City | PA | 5 digit Zip Code |
| County | Municipality | |
| County | Municipality | |
| Responsible Official or Contact Name | Contact Title | |
| First and Last Name | Title | |
| Contact Email Address | Contact Phone Number | |
| Email | XXX.XXX.XXXX | |
| NPDES # | Technical Assistance Need | |
| Permit # | Choose an item. | |

**Regional Office Contact with Phone Number:**

(Complete if Known)

|  |  |  |
| --- | --- | --- |
| DEP Inspector or Contact Name | Phone Number | Region |
| First and Last Name | xxx.xxx.xxxx | Click to Select |

**Technical Assistance Needed/Problem:**

(Please be as specific and concise as possible. Provide any background information on the issue for which technical assistance is being requested.)

**Goals and Outcomes:**

(Describe what you would like to achieve as a result of technical assistance.)

**Other Relevant Information:**

(scan and attach any relevant documents or photos)

How did you hear about the free technical assistance offered by the PA DEP Wastewater Technical Assistance Program?

Click to choose a selection.