

 Application Type
 Renewal

 Facility Type
 Municipal

 Major / Minor
 Minor

NPDES PERMIT FACT SHEET INDIVIDUAL SEWAGE

 Application No.
 PA0025488

 APS ID
 1092535

 Authorization ID
 1446756

Applicant and Facility Information

Applicant Name	Avondale Borough Chester County	Facility Name	Avondale Borough STP
Applicant Address	PO Box 247 110 Pomeroy Avenue	Facility Address	126 W State Street
	Avondale, PA 19311-0247		Avondale, PA 19311-1150
Applicant Contact	Sharon Norris	Facility Contact	Sharon Morris
Applicant Phone	(610) 268-8501	Facility Phone	(610) 268-2501
Client ID	66843	Site ID	457122
Ch 94 Load Status	Existing Hydraulic and Projected Organic	Municipality	Avondale Borough
Connection Status	Dept. Imposed Connection Prohibitions	County	Chester
Date Application Receiv	vedMay 23, 2023	EPA Waived?	No
Date Application Accep	ted	If No, Reason	Christina River TMDL
Purpose of Application	Renewal.		

Summary of Review

The applicant has submitted NPDES permit renewal application for their treated sewage discharge into Unnamed Tributary (UNT) to East Branch White Clay Creek through outfall 001.

Based on the application: Influent wastewater goes through a grinding screen, aerated grit chamber, and then to the oxidation ditch, after which it is split between the two clarifiers. From the clarifiers, WAS goes to an aerobic digester, sludge holding tank, and sludge disposal, while RAS circulates back to the oxidation ditch. The wastewater from the clarifiers goes to the chlorine contact tank, then post-aeration before being metered at the outfall.

Avondale Borough STP is getting a flow from two townships: Avondale Borough (67%) and New Garden TWP (33%).

There is one industrial contributor: Edlon Industries (Manufacturer of Fluoropolymer coatings).

DEP has conducted site visit on 3/27/2023. No violations noted.

There are no changes in quality and quantity of the discharge flow, therefore previously established effluent limits and requirements will be proposed in the draft permit except for E.coli that is in consistence with new requirements.

Pages 7-8 of this factsheet lists Development of Effluent Limitations.

Act 14 Notifications:

Borough of Avondale and Chester County Board of Commissioners have been notified on May 5, 2023.

Sludge use and disposal description and location(s): DELCORA.

Approve	Deny	Signatures	Date
х		Begay Gmuralieva Begay Omuralieva / Environmental Engineering Specialist	March 22, 2024
х		<i>Pravin Patel</i> Pravin C. Patel, P.E. / Environmental Engineer Manager	03/22/2024

Summary of Review

Public Participation

DEP will publish notice of the receipt of the NPDES permit application and a tentative decision to issue the individual NPDES permit in the *Pennsylvania Bulletin* in accordance with 25 Pa. Code § 92a.82. Upon publication in the *Pennsylvania Bulletin*, DEP will accept written comments from interested persons for a 30-day period (which may be extended for one additional 15-day period at DEP's discretion), which will be considered in making a final decision on the application. Any person may request or petition for a public hearing with respect to the application. A public hearing may be held if DEP determines that there is significant public interest in holding a hearing. If a hearing is held, notice of the hearing will be published in the *Pennsylvania Bulletin* at least 30 days prior to the hearing and in at least one newspaper of general circulation within the geographical area of the discharge.

Discharge, Receiving	Waters and Water Supply Information	on	
Outfall No. 001		Design Flow (MGD)	0.5
Latitude 39º 49	9' 18.78"	Longitude	-75º 47' 6.25"
Quad Name We	st Grove	Quad Code	09-20-2
Wastewater Descrip	otion: Sewage Effluent from Avondal	e Borough STP	
	Unnamed Tributary to East Branch		
Receiving Waters	White Clay Creek (CWF, MF)	Stream Code	00448
NHD Com ID	26108910	RMI	
Drainage Area	6.0 mi ²	Yield (cfs/mi ²)	
Q7-10 Flow (cfs)	1.3	Q7-10 Basis	
Elevation (ft)		Slope (ft/ft)	
Watershed No.	3-1	Chapter 93 Class.	CWF, MF
Existing Use		Existing Use Qualifier	
Exceptions to Use		Exceptions to Criteria	
Assessment Status	Impaired		
Cause(s) of Impairm	nent NUTRIENTS, SILTATION		
Source(s) of Impairr		OFF/STORM SEWERS	
TMDL Status	Final	Name Christina Riv	ver Basin
		•••••••••••••••••••••••••••••••••••••••	

Changes Since Last Permit Issuance: none

	Tre	eatment Facility Summar	у	
reatment Facility Na	me: Avondale Borough ST	Р		
WQM Permit No.	Issuance Date			
1503412	3/19/2004			
1503412	10/10/2014			
Amended				
	Degree of			Avg Annual
Waste Type	Treatment	Process Type	Disinfection	Flow (MGD)
	Secondary with			
	Ammonia And			
Sewage	Phosphorus	Oxidation Ditch	Gas Chlorine	0.5
Hydraulic Capacity	Organic Capacity			Biosolids
(MGD)	(lbs./day)	Load Status	Biosolids Treatment	Use/Disposal
		Existing Hydraulic and		
0.65	1317	Projected Organic	Incinerator	DELCORA

Changes Since Last Permit Issuance: none

Compliance History

DMR Data for Outfall 001 (from February 1, 2023 to January 31, 2024)

Parameter	JAN-24	DEC-23	NOV-23	OCT-23	SEP-23	AUG-23	JUL-23	JUN-23	MAY-23	APR-23	MAR-23	FEB-23
Flow (MGD)						0.27121			0.30212			
Average Monthly	0.6064	0.4969	0.3240	0.2968	0.3072	3	0.2982	0.2557	3	0.30444	0.3556	0.380
Flow (MGD)												
Daily Maximum	1.3186	0.9848	0.4761	0.4010	0.4437	0.3672	0.4221	0.3498	0.4163	0.5187	0.4369	0.487
pH (S.U.)												
Instantaneous												
Minimum	7.03	6.82	7.00	6.74	7.06	7.20	7.01	7.14	7.03	6.98	7.13	7.25
pH (S.U.)												
Instantaneous												
Maximum	8.16	7.63	7.80	7.86	7.82	7.56	7.63	7.54	7.79	7.58	7.72	8.45
DO (mg/L)												
Instantaneous												
Minimum	6.77	6.60	6.6	6.1	6.60	6.6	6.60	6.60	4.92	6.17	4.83	6.25
TRC (mg/L)												
Average Monthly	0.38	0.38	0.38	0.38	0.38	0.38	0.37	0.38	0.38	0.38	0.39	0.37
TRC (mg/L)												
Instantaneous												
Maximum	0.42	0.5	0.41	0.40	0.45	0.40	0.39	0.40	0.45	0.59	0.40	0.40
CBOD5 (lbs/day)												
Average Monthly	15.55	12.43	< 8.11	< 7.43	< 7.7	< 6.6	< 7.5	< 7.04	< 8.8	< 6.9	< 10.7	< 9.5
CBOD5 (lbs/day)												
Weekly Average	15.55	12.43	< 8.11	< 7.43	< 7.7	< 6.6	< 7.5	< 7.04	< 8.8	< 6.9	10.7	< 9.5
CBOD5 (mg/L)												
Average Monthly	< 3.08	< 3.0	< 3.0	< 3.0	< 3.0	< 2.9	< 3.0	< 3.3	< 3.5	< 2.7	< 3.6	< 3.0
CBOD5 (mg/L)												
Weekly Average	< 3.08	< 3.0	< 3.0	< 3.0	< 3.0	< 2.9	< 3.0	< 3.3	< 3.5	< 2.7	< 3.6	< 3.0
BOD5 (lbs/day)												
Raw Sewage Influent												
 Average												
Monthly	925.21	918.03	753.55	555.38	600	602	879	667	763	833	803	847
BOD5 (mg/L)												
Raw Sewage Influent												
 Average												
Monthly	196	211.75	229.5	162.75	217	221	287	247	242	266	245	233
TSS (lbs/day)												
Average Monthly	25.29	20.72	< 12.57	< 12.01	< 12.8	< 11.3	< 12.4	10.66	< 12.6	< 12.7	< 13.4	< 15.8

NPDES Permit Fact Sheet Avondale Borough STP

NPDES Permit No. PA0025488

TSS (lbs/day)												
Raw Sewage Influent												
 Average	047.00	440 50	407.07	075.04	400	504	50.4		007	457	004	101
Monthly	617.22	416.56	467.07	375.64	423	531	594	316	397	457	364	491
TSS (lbs/day)	05.00	00.70	10 57	10.01	40.0	44.0	40.4	40.00	40.0	40.7	40.4	45.0
Weekly Average	25.29	20.72	< 12.57	< 12.01	< 12.8	< 11.3	< 12.4	< 10.66	< 12.6	< 12.7	< 13.4	< 15.8
TSS (mg/L)	5.0	F 0	4.05	4.05	F 0	5.0	F 0	5.0	5.0	5.0	4.5	5.0
Average Monthly	< 5.0	< 5.0	< 4.65	< 4.85	< 5.0	< 5.0	< 5.0	< 5.0	< 5.0	< 5.0	< 4.5	< 5.0
TSS (mg/L)												
Raw Sewage Influent												
 br/> Average Monthly	130	104.0	142.25	140.5	153	195	194	117	126	146	111	135
TSS (mg/L)	130	104.0	142.20	140.5	155	195	194	117	120	140	111	135
	< 5.0	< 5.0	< 4.65	< 4.85	< 5.0	< 5.0	< 5.0	< 5.0	< 5.0	< 5.0	< 4.5	< 5.0
Weekly Average Fecal Coliform	< 5.0	< 5.0	< 4.00	< 4.00	< 5.0	< 5.0	< 5.0	< 5.0	< 5.0	< 5.0	< 4.5	< 5.0
(No./100 ml)												
Geometric Mean	< 20.29	< 4.58	< 20.1	40.32	5.98	< 13.5	< 1.65	< 4.49	< 6.5	< 4.3	< 2.3	33.1
Fecal Coliform	< 20.29	< 4.50	< 20.1	40.32	5.90	< 15.5	< 1.05	< 4.45	< 0.5	< 4.5	< 2.5	55.1
(No./100 ml)												
Instantaneous												
Maximum	125.9	39.9	224.7	40.32	81.3	54.8	7.4	150	44.8	23.3	20.3	117.2
Total Nitrogen	120.0	00.0		10.02	01.0	0 1.0	/	100	11.0	20.0	20.0	117.2
(lbs/day)												
Average Monthly	49.29	34.24	< 22.27	< 17.38	< 18.1	< 15.6	< 18.1	< 19.13	< 22.7	< 22.3	< 26.5	< 31.4
Total Nitrogen (mg/L)												
Average Monthly	< 9.75	< 8.26	< 8.24	< 7.02	< 7.07	< 6.9	< 7.26	< 8.97	< 9.01	< 8.8	< 8.94	< 9.9
Ammonia (lbs/day)												
Average Monthly	0.51	0.41	< 0.27	< 0.25	< 0.28	< 0.23	< 0.25	< 0.92	< 1.06	< 0.43	< 0.3	< 0.32
Ammonia (mg/L)												
Average Monthly	< 0.10	< 0.10	< 0.10	< 0.10	< 0.11	< 0.1	< 0.10	< 0.43	< 0.42	< 0.17	< 0.10	< 0.10
Total Phosphorus												
(lbs/day)												
Average Monthly	0.47	1.08	< 2.41	1.39	0.82	1.01	0.57	0.66	0.55	< 0.56	< 0.3	0.48
Total Phosphorus												
(mg/L)												
Average Monthly	< 0.09	0.26	< 0.89	0.56	0.32	0.45	0.23	0.31	0.22	< 0.22	< 0.1	0.15

Development of Effluent Limitations

Outfall No.	001	Design Flow (MGD)	0.5
Latitude	39º 49' 21.00"	Longitude	-75º 47' 6.00"
Wastewater De	escription: Sewage Effluent		

Technology-Based Limitations

The following technology-based limitations apply, subject to water quality analysis and BPJ where applicable:

Pollutant	Limit (mg/l)	SBC	Federal Regulation	State Regulation
CBOD ₅	25	Average Monthly	133.102(a)(4)(i)	92a.47(a)(1)
CBOD5	40	Average Weekly	133.102(a)(4)(ii)	92a.47(a)(2)
Total Suspended	30	Average Monthly	133.102(b)(1)	92a.47(a)(1)
Solids	45	Average Weekly	133.102(b)(2)	92a.47(a)(2)
pH	6.0 – 9.0 S.U.	Min – Max	133.102(c)	95.2(1)
Fecal Coliform				
(5/1 – 9/30)	200 / 100 ml	Geo Mean	-	92a.47(a)(4)
Fecal Coliform				
(5/1 – 9/30)	1,000 / 100 ml	IMAX	-	92a.47(a)(4)
Fecal Coliform				
(10/1 – 4/30)	2,000 / 100 ml	Geo Mean	-	92a.47(a)(5)
Fecal Coliform				
(10/1 - 4/30)	10,000 / 100 ml	IMAX	-	92a.47(a)(5)
Total Residual Chlorine	0.5	Average Monthly	-	92a.48(b)(2)

Water Quality-Based Limitations

Previous permit had following:

All effluent limits for Nutrients and Dissolved Oxygen are proposed in the draft permit are consistent with the Christina River Basin total maximum daily load (TMDL) for nutrients and dissolved oxygen for low-flow conditions, issued by the Environmental Protection Agency (EPA) in January 2001, and revised in October 2002, April 2006, and March 2012. Revisions to the Christina River Basin TMDL for nutrients and dissolved oxygen for low-flow conditions were made in a letter to EPA dated June 27, 2012 and via a subsequent email dated August 14, 2012.

In April 25, 2013 email EPA agreed that the TMDL changes were based on DEP's correct interpretation of the flexibility provided by the Christina River TMDL. In the TMDL document, Summary Table 20 included waste load allocations (WLA) based on a discharge flow of 0.3 mgd (attached below table).

		FLOW	CBOD ₅	NH ₃ -N	TN	TP	DO	CBOD ₅	NH ₃ -N	TN	TP	DO
NPDES	FACILITY NAME	mg/l	mg/l	mg/l	mg/l	mg/l	mg/l	lb/day	lb/day	lb/day	lb/day	lb/day

PA0025488 Avondale Borough STP 0.3 25.00 2.00 50.00 4.00 2.00 62.597 5.008 125.195 10.016 5.008



mail from EPA t Juan about TMDI TSS.pdf

Below table revision (dated August 2012) consists loading of flow, TN, TP, DO and CBOD5:

NPDES	FACILITY	FLOW	CBOD5	NH3-N	TN	TP	DO	CBOD5	NH3-N	TN	TP	DO
	NAME	mg/l	mg/l	mg/l	mg/l	mg/l	mg/l	lb/day	lb/day	lb/day	lb/day	lb/day
PA0025488	Avondale Borough STP	0.50	15	1.20	20.00	2.0	2.0	62.591	5.007	83.400	8.00	8.340

Also, effluent limits for Nutrients and Dissolved Oxygen are proposed in the draft permit are consistent with Total Maximum Daily Loads for Nutrient and Low Dissolved Oxygen Under High-Flow Conditions Christina River Basin, Pennsylvania, Delaware, and Maryland issued by the Environmental Protection Agency (EPA) in September 2006.

NPDES	HSPF	Flow	CBOD5	NH3-N	TP	CBOD5	NH3-N	TP
Number	Subbasin	(mgd)	(mg/L)	(mg/L)	(mg/L)	(kg/day)	(kg/day)	(kg/day)
PA0025488	B11	0.3	25.00	2.00	4.00	28.39	2.27	4.54

Table 2-2. NPDES permit flows and loads for nutrients and CBOD5

Additionally, facility's discharge is listed in Total Maximum Daily Loads for Bacteria and Sediment in the Christina River Basin, issued by the Environmental Protection Agency (EPA) in September 2006.

Table 2-2. Fecal coliform, enterococci, and TSS loads for NPDES facilities

NPDES Number	HSPF Subbasin	Flow (mgd)	TSS (mg/L)	Fecal Coliform (cfu/100mL)	Enterococci (cfu/100mL)	TSS (kg/day)	Flow Fecal Coliform (cfu/day)	Enterococci (cfu/day)
PA0025488	W06	0.3	25	200	100	34.07	2.271 E+09	1.136E+09

Therefore, current effluent limits for nutrients, dissolved oxygen, sediments, bacteria are consistent with all three Christina River Basin TMDLs WLAs.

E. Coli is proposed to monitor quarterly.

The following are the new requirements recommended for the draft permit: Monitoring for E. Coli is based on DEP SOP guidance (Chapter 92.a.61) and consistent with the requirements of other similar discharges in the area.

Proposed Effluent Limitations and Monitoring Requirements

The limitations and monitoring requirements specified below are proposed for the draft permit, and reflect the most stringent limitations amongst technology, water quality and BPJ. Instantaneous Maximum (IMAX) limits are determined using multipliers of 2 (conventional pollutants) or 2.5 (toxic pollutants). Sample frequencies and types are derived from the "NPDES Permit Writer's Manual" (386-0400-001), SOPs and/or BPJ.

Outfall 001, Effective Period: Permit Effective Date through Permit Expiration Date.

Parameter		Monitoring Requirements						
	Mass Units (Ibs/day) ⁽¹⁾		Concentrations (mg/L)				Minimum ⁽²⁾	Required
	Average Monthly	Weekly Average	Minimum	Average Monthly	Weekly Average	Instant. Maximum	Measurement Frequency	Sample Type
Flow (MGD)	Report	Report Daily Max	XXX	XXX	XXX	xxx	Continuous	Measured
рН (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	1/day	Grab
DO	ххх	xxx	4.0 Inst Min	xxx	XXX	xxx	1/day	Grab
TRC	XXX	XXX	XXX	0.4	XXX	0.8	1/day	Grab
CBOD5 Nov 1 - Apr 30	104.0	167.0	XXX	25.0	40.0	50	1/week	24-Hr Composite
CBOD5 May 1 - Oct 31	62.5	96.0	xxx	15.0	23.0	30	1/week	24-Hr Composite
BOD5								24-Hr
Raw Sewage Influent	Report	XXX	XXX	Report	XXX	XXX	1/week	Composite 24-Hr
Raw Sewage Influent	Report	XXX	XXX	Report	XXX	XXX	1/week	Composite 24-Hr
TSS	75.0	112.5	XXX	18.0	27.0	36	1/week	Composite
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200 Geo Mean	XXX	1000	1/week	Grab
Total Nitrogen	83.4	xxx	XXX	20.0	XXX	40	1/week	24-Hr Composite

Outfall 001, Continued (from Permit Effective Date through Permit Expiration Date)

Parameter		Effluent Limitations						
	Mass Units	Mass Units (lbs/day) ⁽¹⁾		Concentrations (mg/L)				Required
	Average Monthly	Weekly Average	Minimum	Average Monthly	Weekly Average	Instant. Maximum	Measurement Frequency	Sample Type
E. Coli (No./100 ml)	xxx	xxx	xxx	xxx	xxx	Report	1/quarter	Grab
Ammonia								24-Hr
Nov 1 - Apr 30	15.0	XXX	XXX	3.6	XXX	7.2	1/week	Composite
Ammonia								24-Hr
May 1 - Oct 31	5.0	XXX	XXX	1.2	XXX	2.4	1/week	Composite
								24-Hr
Total Phosphorus	8.0	XXX	XXX	2.0	XXX	4	1/week	Composite

Compliance Sampling Location: Outfall 001