

# Southeast Regional Office CLEAN WATER PROGRAM

Application Type Renewal

Wastewater Type Sewage

Facility Type SRSTP

# NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

 Application No.
 PA0054551

 APS ID
 1049567

 Authorization ID
 1372697

Applicant Name	Jonathan D. Snyder	Facility Name	Snyder SRSTP	
Applicant Address	4 Fox Run Lane	Facility Address	4 Fox Run Lane	
	Newtown Square, PA 19073-1004	<u></u>	Newtown Square, PA 19073-100	
Applicant Contact	Jonathan D. Snyder	Facility Contact	Jonathan D. Snyder	
Applicant Phone	(267) 450-7703	Facility Phone	(267) 450-7703	
Client ID	280179	Site ID	450981	
SIC Code	8811	Municipality	Willistown Township	
SIC Description	Services - Private Households	County	Chester	
Date Application Rec	eived October 14, 2021	WQM Required		
Date Application Acc	epted	WQM App. No.		

#### **Summary of Review**

The applicant requests approval for renewal of an NPDES permit to discharge treated sewage from Snyder SRSTP. The treatment system consists of a Norweco 900 aerobic package plant, a free access sand filter, and chlorination. There are no changes in the treatment units, stream designation, influent characteristics etc. The existing effluent limits are carried over to the new permit with an annual monitoring requirement. TRC is monitored monthly.

The facility is covered under the WQM Permit No. 1592403.

Please note that submission of Annual Maintenance Report (AMR) and Discharge Monitoring Report (DMR) is a requirement for this NPDES permit regardless of usage of the treatment system.

#### **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.

Approve	Deny	Signatures	Date
X		Sara Abraham Sara Reji Abraham, E.I.T. / Project Manager	October 18, 2021
Х		Pravin Patel	40/40/0004
		Pravin C. Patel, P.E. / Environmental Engineer Manager	10/19/2021

# Summary of Review

Act 14 Notifications:

Willistown Township October 8, 2021 Chester County October 8, 2021

## Permit Conditions:

- A. AMR to DEP
- B. DMR to DEP
- C. Septage and Scum MeasurementD. Septic Tank PumpingE. Chlorine Optimization

- F. No Stormwater
- G. Acquire Necessary Property Rights
- H. Proper Sludge DisposalI. Abandon STP when Municipal Sewers Available

Discharge and Stream Data – 2 - Receiving Waters and PWS

Outfall No. 001		Design Flow (MGD)	.0004 -75° 29' 23.28"	
Latitude 39° 5	7' 26.28"	Longitude		
Quad Name Media		Quad Code	1942	
Wastewater Descri	otion: Treated Sewage			
	Unnamed Tributary to Ridley Cre	2ek		
Receiving Waters	Unnamed Tributary to Ridley Cre (HQ-TSF)	Stream Code	00663	
Receiving Waters NHD Com ID			00663 0.25	
J	(HQ-TSF)	Stream Code		
NHD Com ID	(HQ-TSF) 25605882 3-G	Stream Code RMI	0.25	
NHD Com ID Watershed No.	(HQ-TSF) 25605882 3-G Impaired	Stream Code RMI Chapter 93 Class.	0.25	

## roposed 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" (362-0400-001), SOPs and/or BPJ.

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

	Effluent Limitations				Monitoring Requirements			
Parameter	Mass Units (lbs/day) (1)		Concentrations (mg/L)			Minimum <sup>(2)</sup>	Required	
Farameter	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum	Measurement Frequency	Sample Type
	Report							
Flow (GPD)	Annl Avg	XXX	XXX	XXX	XXX	XXX	1/year	Estimate
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	1/year	Grab
DO	XXX	XXX	3.0 Inst Min	XXX	XXX	XXX	1/year	Grab
TRC	xxx	XXX	XXX	0.5	XXX	1.2	1/month	Grab
CBOD5	V///	VVV	V/V/	00.0	VVV	40	41	01
Nov 1 - Apr 30	XXX	XXX	XXX	20.0	XXX	40	1/year	Grab
CBOD5 May 1 - Oct 31	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
TSS	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200	XXX	XXX	1/year	Grab
Ammonia Nov 1 - Apr 30	XXX	XXX	XXX	9.0	XXX	18	1/year	Grab
Ammonia May 1 - Oct 31	XXX	XXX	XXX	3.0	XXX	6	1/year	Grab