

Northwest Regional Office CLEAN WATER PROGRAM

Application Type

Facility Type

Major

Municipal

Major

Major

NPDES PERMIT FACT SHEET INDIVIDUAL SEWAGE

Application No. PA0091782 A-1

APS ID 1007536

Authorization ID 1298582

Applicant and Facility Information									
Applicant Name	West Hills Area Water Pollution Control Authority	Facility Name	West Hills Area Water Pollution Control Authority STP						
Applicant Address	257 Linde Road	Facility Address	257 Linde Road						
	Kittanning, PA 16201-4719		Kittanning, PA 16201-4719						
Applicant Contact	Tim Jordan	Facility Contact							
Applicant Phone	(724) 545-9126	Facility Phone							
Client ID	43725	Site ID	263588						
Ch 94 Load Status	Not Overloaded	Municipality	North Buffalo Township						
Connection Status	Dept. Imposed Connection Prohibitions	County	Armstrong						
Date Application Rece	eived November 12, 2019	EPA Waived?	No						
Date Application Acce	epted December 16, 2019	If No, Reason	Major Facility						

Summary of Review

The permittee is proposing to include a new UV disinfection system and flow measurement equipment in the west half of the existing chlorine contact tank and maintain the east half of the existing chlorine contact tank and chlorine feed equipment in the event it is needed. UV disinfection will be primary disinfection with chlorine disinfection only being used as an emergency backup.

WQM Permit No. 0379404 will be amended to address the proposed modifications to the treatment plant.

This permit is being amended to include UV (dosage) monitoring to the permit requirements. TRC limits will be retained upon start-up of the upgraded plant in the event the need to restart chlorine disinfection equipment is necessary. No other changes to the permit are being proposed as part of this permit amendment.

There are currently no open violations for the permittee listed in EFACTS (2/03/2020).

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		Adam J. Pesek, E.I.T. / Environmental Engineering Specialist	
		Addition to cook, Elitti / Environmental Engineering operation	
V			
X			
		Justin C. Dickey, P.E. / Environmental Engineer Manager	

scharge, Receiving	Water	s and Water Supply Info	rmation					
Outfall No. 001 Latitude 40° 48	3' 3.12"		Design Flow (MGD) Longitude	1.3 -79° 30' 57.86"				
Quad Name Kitta	anning		Quad Code	1209				
Wastewater Descrip	tion:	Sewage Effluent						
Danis in Materia	A II I	D'	0	10400				
Receiving Waters		eny River	Stream Code	42122				
NHD Com ID	13440	13860	RMI	44.2				
Drainage Area	8590		Yield (cfs/mi²)	0.2514				
Q ₇₋₁₀ Flow (cfs)	2250		Q ₇₋₁₀ Basis	Previous pollution report				
Elevation (ft) Watershed No.	770 17-E		Slope (ft/ft)	0.001 WWF				
-	Add N		Chapter 93 Class.	VVVVF				
Exceptions to Use	Auu N		Existing Use Qualifier Exceptions to Criteria					
Assessment Status		Impaired	Exceptions to Criteria					
Cause(s) of Impairm	ont	POLYCHLORINATED B	IDHENVI S (DCRo)					
Source(s) of Impairn		SOURCE UNKNOWN	FILMILS (FCDS)					
TMDL Status	псп	Pending	Name					
TWDL Status		_ r ending	Name					
Background/Ambien	t Data		Data Source					
pH (SU)								
Temperature (°C)		25	Default (WWF)					
Hardness (mg/L)								
Other:								
Nearest Downstrean	n Publi	c Water Supply Intake	North Buffalo Township					
PWS Waters A	llegher	y River	Flow at Intake (cfs)					
PWS RMI 29	9.3		Distance from Outfall (mi) 15.0					

Changes Since Last Permit Issuance:

Other Comments:

Treatment Facility Summary

Treatment Facility Name: West Hills Area Wpca STP

WQM Permit No.	Issuance Date
379404	3/12/1980
379404 A-3	8/19/2015

Waste Type	Degree of Treatment	Process Type	Disinfection	Avg Annual Flow (MGD)
Sewage	Secondary	Activated Sludge	Hypochlorite	1.3
	•	<u> </u>	**	•

Hydraulic Capacity (MGD)	Organic Capacity (lbs/day)	Load Status	Biosolids Treatment	Biosolids Use/Disposal
1.3	2210	Not Overloaded	Belt Filtration	Landfill

Changes Since Last Permit Issuance: None

Other Comments:

Compliance History

DMR Data for Outfall 001 (from December 1, 2018 to November 30, 2019)

Parameter	NOV-19	OCT-19	SEP-19	AUG-19	JUL-19	JUN-19	MAY-19	APR-19	MAR-19	FEB-19	JAN-19	DEC-18
Flow (MGD)												
Average Monthly	0.6597	0.5803	0.51	0.53	0.66	0.80	0.67	0.64	0.65	1.02	0.75	0.79
Flow (MGD)												
Daily Maximum	1.4363	1.8985	1.00	0.85	1.8	1.66	1.07	1.59	1.36	2.32	2.55	2.27
pH (S.U.)												
Instantaneous												
Minimum	6.29	6.34	6.6	6.09	7.21	7.00						
pH (S.U.)												
Minimum							7.05	7.20	7.20	7.00	6.80	6.90
pH (S.U.)												
Instantaneous												
Maximum	8.9	8.55	7.6	7.70	7.64	7.80						
pH (S.U.)												
Maximum							7.74	7.70	7.69	7.50	7.38	7.34
DO (mg/L)												
Instantaneous												
Minimum	5.57	5.85	6.92	7.06	6.3	7.95	7.31	8.10	8.40	7.90	7.20	7.60
TRC (mg/L)												
Average Monthly	0.33	0.31	0.43	0.32	0.38	0.24	0.43	0.38	0.31	< 0.27	0.38	0.43
TRC (mg/L)												
Instantaneous												
Maximum	0.78	1.19	1.08	0.75	1.57	0.39	0.85	0.62	1.80	0.71	0.60	0.95
CBOD5 (lbs/day)												
Average Monthly	32	26	33	28	51	50	48	41	155	68	75	33
CBOD5 (lbs/day)												
Raw Sewage Influent												
 br/> Average												
Monthly							688	777	1156	980	798	849
CBOD5 (lbs/day)												
Raw Sewage Influent												
 br/> Weekly Average							932	887	1191	1566	1809	1178
CBOD5 (lbs/day)												
Weekly Average	42	50	42	33	75	73	72	67	274	91	225	59
CBOD5 (mg/L)												
Average Monthly	5.93	4.49	7.11	6.0	8.81	6.0	8.0	10.0	26	7.00	6.0	5.0

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CBOD5 (mg/L)												
Raw Sewage Influent												
 br/> Average												
Monthly							120	183	192	111	113	127
CBOD5 (mg/L)												
Raw Sewage Influent												
 br/> Weekly Average							183	249	248	155	243	252
CBOD5 (mg/L)												
Weekly Average	7.3	5.5	9.9	7.0	12.0	6.00	15.0	19.0	64.0	8.00	8.0	10.0
BOD5 (lbs/day)												
Raw Sewage Influent												
 br/> Average												
Monthly	613	809	618	660	751	802						
BOD5 (lbs/day)												
Raw Sewage Influent												
 br/> Weekly Average	895	1168	695	712	1197	1556						
BOD5 (mg/L)												
Raw Sewage Influent												
 br/> Average												
Monthly	115	143	136	136	129	98						
BOD5 (mg/L)	110		100		120	- 55						
Raw Sewage Influent												
<pre> Weekly Average</pre>	133	178	164	157	195	140						
TSS (lbs/day)	100	170	101	107	100	110						
Average Monthly	29.00	28	38	31	< 41	39.00	74.0	39.00	156.30	139.00	57.89	25.06
TSS (lbs/day)	20.00	20	- 00	01	N T1	00.00	74.0	00.00	100.00	100.00	07.00	20.00
Raw Sewage Influent												
 Average												
Monthly	375	790	550	709	639	6.75	1127	849.00	822.50	1437	724.26	588.95
TSS (lbs/day)	373	730	330	703	000	0.75	1121	043.00	022.50	1407	724.20	300.33
Raw Sewage Influent												
<pre> </pre>	512	1202	973	1099	1284	809	1637	1007.00	876.43	2251.00	1000.01	659.12
TSS (lbs/day)	312	1202	913	1099	1204	609	1037	1007.00	070.43	2231.00	1000.01	059.12
	18.00	42	84	32	107	67.00	169.00	46.00	397.39	267.00	150.20	48.90
Weekly Average TSS (mg/L)	10.00	44	04	32	107	07.00	109.00	40.00	381.38	207.00	150.38	40.90
	6.00	5.0	8.0	6.38	6.0	5.54	13.00	9.00	25.63	12.00	7.10	3.88
Average Monthly	0.00	5.0	0.0	0.30	6.0	3.34	13.00	9.00	23.03	13.00	7.10	3.00
TSS (mg/L)												
Raw Sewage Influent												
 Average	74	4 4 7	404	450	447	00.05	400.00	004.00	400.50	4.45.00	440.00	400.40
Monthly	71	147	121	153	117	96.25	193.00	201.00	182.50	145.00	112.00	128.13
TSS (mg/L)												
Raw Sewage Influent		0.40		0.40		440.00					007.5	0== 05
 br/> Weekly Average	83	240	203	240	220	140.00	320.00	285.00	277.50	208.00	207.50	255.00

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TSS (mg/L)												
Weekly Average	7.00	8.0	19.0	6.52	12.0	12.00	35.00	13.00	58.00	20.00	10.0	6.00
Fecal Coliform (CFU/100 ml) Geometric Mean	28	< 25	< 34	39	< 107	29	< 12	14	44	< 33	16	6
Fecal Coliform (No./100 ml) Geometric Mean	28	< 25	< 34	39	< 107	29	< 12	14	44	< 33	16	6
Fecal Coliform (CFU/100 ml) Instantaneous Maximum	385	600	490	262	651	353	1167	8550	2780	1025	644	2300
Fecal Coliform (No./100 ml) Instantaneous Maximum	385	600	490	262	651	353	1167	8550	2780	1025	644	2300
Total Nitrogen (lbs/day) Daily Maximum			18			430			99.87			6
Total Nitrogen (mg/L) Daily Maximum			3.83			31.00			17.60			23
Ammonia (lbs/day) Average Monthly	14.00	25	29	31	52	43	97.0	87.00	101.48	86.00	66.66	28.50
Ammonia (mg/L) Average Monthly	2.79	4.49	6.25	6.38	9.51	4.79	17.65	20.00	19.25	9.00	9.20	4.50
Total Phosphorus (lbs/day) Daily Maximum			108			55.00			12.03			2.26
Total Phosphorus (mg/L) Daily Maximum			23			3.95			2.12			9

Compliance History

Effluent Violations for Outfall 001, from: January 1, 2019 To: November 30, 2019

Parameter	Date	SBC	DMR Value	Units	Limit Value	Units
TRC	03/31/19	IMAX	1.80	mg/L	1.6	mg/L
CBOD5	03/31/19	Avg Mo	26	mg/L	25	mg/L
CBOD5	03/31/19	Wkly Avg	64.0	mg/L	37.5	mg/L
TSS	03/31/19	Wkly Avg	58.00	mg/L	45	mg/L
Fecal Coliform	05/31/19	IMAX	1167	CFU/100 ml	1000	CFU/100 ml

Summary of Inspections: None since the permit was renewed.

Other Comments: The Corrected Action Plan (CAP), that was approved by the Department on March 25, 2019 to address sanitary sewer overflows, was terminated on January 27, 2020.

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

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

			Effluent L	imitations			Monitoring Re	quirements
Parameter	Mass Units	(lbs/day) (1)		Concentrat	ions (mg/L)		Minimum (2)	Required
Farameter	Average Monthly	Weekly Average	Average Monthly	Average Monthly	Weekly Average	Instant. Maximum	Measurement Frequency	Sample Type
Flow (MGD)	Report	Report Daily Max	XXX	XXX	XXX	XXX	Continuous	Recorded
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	1/day	Grab
DO	XXX	XXX	4.0 Inst Min	XXX	XXX	XXX	1/day	Grab
TRC	XXX	XXX	XXX	0.5	XXX	1.6	1/day	Grab
CBOD5	271	406	XXX	25.0	37.5	50	2/week	24-Hr Composite
BOD5 Raw Sewage Influent	Report	Report	Report	Report Wkly Avg	XXX	XXX	2/week	24-Hr Composite
TSS Raw Sewage Influent	Report	Report	XXX	Report	Report	XXX	2/week	24-Hr Composite
TSS	325	488	XXX	30.0	45.0	60	2/week	24-Hr Composite
Fecal Coliform (No./100 ml) Oct 1 - Apr 30	XXX	XXX	XXX	2000 Geo Mean	XXX	10000	2/week	Grab
Fecal Coliform (No./100 ml) May 1 - Sep 30	XXX	XXX	XXX	200 Geo Mean	XXX	1000	2/week	Grab
Total Nitrogen	XXX	Report Daily Max	XXX	XXX	Report Daily Max	XXX	1/quarter	24-Hr Composite
Ammonia	271	XXX	XXX	25.0	XXX	50	2/week	24-Hr Composite
Total Phosphorus	XXX	Report Daily Max	XXX	XXX	Report Daily Max	XXX	1/quarter	24-Hr Composite

Compliance Sampling Location: Outfall 001 (after disinfection)

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

Outfall 001, Effective Period: Startup of New or Upgraded Facilities through Permit Expiration Date.

Parameter -			Effluent L	imitations			Monitoring Requirements		
	Mass Units (lbs/day) (1)			Concentrat	Minimum (2)	Required			
	Average	Average	Daily	Average		Instant.	Measurement	Sample	
	Monthly	Weekly	Minimum	Monthly	Maximum	Maximum	Frequency	Туре	
UV Dosage (mJ/cm ²)	XXX	XXX	Report	Report	XXX	XXX	1/day	Visual	

Compliance Sampling Location: Outfall 001 (after disinfection)

Other Comments: