

# Northwest Regional Office CLEAN WATER PROGRAM

Application Type Renewal

Wastewater Type Sewage

Facility Type SRSTP

# NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0222976

APS ID 1002358

Authorization ID 1289555

Applicant Name	Albert R. Shouey	Facility Name	Albert R Shouey SFTF	
Applicant Address	2290 Belltown Road	Facility Address	9756 Route 36	
	Clarington, PA 15828-8719		Sigel, PA 15860	
Applicant Contact	Albert Shouey	Facility Contact		
Applicant Phone	(814) 752-6253	Facility Phone		
Client ID	136573	Site ID	490441	
Municipality	Barnett Township	County	Jefferson	
SIC Code	8800	SIC Code	4952	
SIC Description	Private Households	SIC Description	Trans. & Utilities - Sewerage Systems	
Application Received	September 25, 2019	WQM Required	Existing permit is adequate	
Application Accepted	September 30, 2019	WQM Permit No.	3399402	

#### **Summary of Review**

Because the receiving waters are classified as a high-quality cold-water fishery pH monitoring has been increased to monthly.

The self-monitoring reports are current with the May 2019 report showing system pumping in October 2018. The reports also show summer use only.

#### **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		William H. Mentzer, P.E. Environmental Engineering Specialist	October 7, 2019
X		Justin C. Dickey, P.E. Environmental Engineer Manager	

Discharge, Receiving Waters and Water Supply Information					
Outfall No.	001	Design Flow (MGD)	0.0004		
Latitude NHD	41º 18' 27.90"	Longitude NHD	-79º 7' 22.68"		
Latitude DP	41º 18' 30.00"	Longitude DP	-79° 7' 24.00"		
Quad Name	Sigel	Quad Code	_0813		
Wastewater:	Treated single residence domestic	tic wastes			
Receiving Waters	Unnamed tributary to Cathers Rui	n Stream Code	unknown		
NHD Com ID	102668697	RMI	0.03		
Drainage Area	0.1	Yield (cfs/mi²)	0		
Q <sub>7-10</sub> Flow (cfs)	0	Q <sub>7-10</sub> Basis	Dry stream		
Elevation (ft)	1590.21	Slope (ft/ft)	0.01098		
Watershed No.	17B	Chapter 93 Class.	HQ - CWF		
Existing Use	statewide	Existing Use Qualifier	none		
Exceptions to Use	None	Exceptions to Criteria	none		
Comments	This is a dry drainage swale disch	<del></del>	MI 0.36.		
	,				
Assessment Status	Attaining Use(s)				
Cause(s) of Impairn					
Source(s) of Impairment					
TMDL Status		Name			
Background/Ambier	nt Data	Data Source			
pH (SU)	in Data	Data Course			
Temperature (°C) 20		CWF default			
Hardness (mg/L)		CVVI deladit			
Other:					
Other.			·		
Noarost Downstroa	m Public Water Supply Intake	Pa American Water Clarion D	ictrict		
Nearest Downstream Public Water Supply Intake PWS Waters Clarion River		Flow at Intake (cfs)	NA		
	<del>.</del>	_ ` ′	21.29		
FVVORIVII 3	33.47	Distance from Outfall (mi)	21.23		

Changes Since Last Permit Issuance: none

#### Other Comments:

Because of the high-quality stream designation water supply criteria was evaluated at the outfall and not at the Pa American Clarion District intake.

No water supply impairments are expected because of the small flow advanced treatment requirements and the very low design flow.

### **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 Limitations				Monitoring Requirements			
Parameter	Mass Units	Mass Units (lbs/day) (1)		Concentrations (mg/L)			Minimum <sup>(2)</sup>	Required
	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum	Measurement Sa	Sample Type
Flow (MGD)	Report Annl Avg	XXX	XXX	XXX	XXX	XXX	1/year	Estimate
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	1/month	Grab
TRC	XXX	XXX	XXX	0.5	XXX	1.6	1/month	Grab
BOD5	XXX	XXX	XXX	10.0	XXX	20.0	1/year	Grab
TSS	XXX	XXX	XXX	10.0	XXX	20.0	1/year	Grab
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200	XXX	XXX	1/year	Grab

Compliance Sampling Location: Outfall 001 after disinfection