

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No.PA0234061APS ID1046112Authorization ID1366295

Applicant, Facility and Project Information

Applicant Name	David Thierwechter 813 Round Top Road		Facility Name	Thierwechter SRSTP	
Applicant Address	813 Ro	und Top Road	Facility Address	813 Round Top Road	
	Wellsbo	oro, PA 16901-6979	_	Wellsboro, PA 16901-6979	
Applicant Contact	David T	hierwechter	Facility Contact	David Thierwechter	
Applicant Phone	(570) 72	23-8585	Facility Phone	(570) 723-8585	
Client ID	287442		Site ID	740256	
SIC Code	4952		Municipality	Charleston Township	
SIC Description	Trans. 8	& Utilities - Sewerage Systems	County	Tioga	
Date Application Received		August 17, 2021	WQM Required	Yes, issued	
Date Application Accept	ted	September 8, 2021	WQM App. No.	5911402	
Project Description		Renewal of an existing NPDES pe	ermit for the discharge of	treated sewage.	

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		Derek S. Garner	June 1, 2022
		Derek S. Garner / Project Manager	
x		Nícholas W. Hartranft	June 1, 2022
		Nicholas W. Hartranft, P.E. / Environmental Engineer Manager	

	2' 35.66"	Design Flow (MGD) Longitude Quad Code	0.0004 -77º 15' 5.55"
		Quad Code	0527
Wastewater Descrip	tion: Sewage Effluent		
Receiving Waters	Charleston Creek	Stream Code	21915
NHD Com ID	66536247	RMI	4.81
Drainage Area	6.33	Yield (cfs/mi ²)	0.04
Q ₇₋₁₀ Flow (cfs)	0.25	Q7-10 Basis	Streamgage No. 01548500
Elevation (ft)	1,530	Slope (ft/ft)	n/a
Watershed No.	9-A	Chapter 93 Class.	WWF
Existing Use	n/a	Existing Use Qualifier	n/a
Exceptions to Use	_n/a	Exceptions to Criteria	n/a
Assessment Status	Attaining Use(s)		
Cause(s) of Impairm	nent <u>n/a</u>		
Source(s) of Impairr	ment <u>n/a</u>		
TMDL Status	n/a	Name n/a	
Nearest Downstrear	n Public Water Supply Intake	Wellsboro Municipal Authority	
PWS Waters	lamilton Lake	Flow at Intake (cfs)	0.33
PWS RMI 2	.36	Distance from Outfall (mi)	2.45

Discharge, Receiving Waters and Water Supply Information

Facility Overview

WQM Permit No. 5911402 was issued 10/26/11. The facility consists of a dual compartment a 1,000-gallon septic tank, 500-gallon dosing tank, three peat bio-filters in parallel, and one 500-gallon chlorine contact tank with a tablet erosion chlorinator.

The single resident sewage treatment plant serves one three-bedroom house that is occupied year-round.

Compliance History

The facility was most recently inspected by DEP on September 4, 2020. The inspection report indicates annual maintenance reports are being submitted in a timely manner. No violations were noted.

Existing Effluent Limitations and Monitoring Requirements

The existing effluent limits were previously established based on peat bio-filters expected treatment performance. Minimum measurement frequencies were established as BPJ for a new system.

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

	Effluent Limitations						Monitoring Requirements	
Parameter	Mass Units (Ibs/day)		Concentrations (mg/L)				Minimum	Required
	Average Monthly	Average Weekly	Minimum	Average Monthly	Maximum	Instant. Maximum	Measurement Sa	Sample Type
Flow (MGD)	Report	XXX	XXX	XXX	XXX	ХХХ	1/6 months	Estimate
рН (S.U.)	ххх	XXX	6.0 Inst Min	xxx	xxx	9.0	1/month	Grab
TRC	ХХХ	xxx	ХХХ	XXX	xxx	Report	1/month	Grab
BOD5	ХХХ	ххх	XXX	10.0	xxx	20	1/6 months	Grab
TSS	xxx	XXX	XXX	10.0	xxx	20	1/6 months	Grab
Fecal Coliform (No./100 ml)	ХХХ	xxx	xxx	200 Geo Mean	xxx	xxx	1/6 months	Grab

Compliance Sampling Location: Outfall 001

Proposed Effluent Limitations and Monitoring Requirements

No changes are recommended to the existing limits or sample types. Minimum measurement frequencies for flow, BOD5, TSS, and fecal coliform are proposed to be changed from 1/6 months to 1/year. The facility has demonstrated compliance with existing frequencies with no noted violations, and an annual frequency will bring the facility in line with DEP's standard operating procedures for SRSTPs.

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

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day)		Concentrations (mg/L)				Minimum	Required
	Average Monthly	Average Weekly	Minimum	Average Monthly	Maximum	Instant. Maximum	Measurement Frequency	Sample Type
Flow (MGD)	Report	XXX	XXX	XXX	XXX	XXX	1/year	Estimate
pH (S.U.)	ххх	xxx	6.0 Inst Min	xxx	xxx	9.0	1/month	Grab
TRC	ХХХ	ХХХ	ХХХ	XXX	XXX	Report	1/month	Grab
BOD5	ХХХ	ХХХ	ХХХ	10.0	XXX	20	1/year	Grab
TSS	XXX	XXX	XXX	10.0	xxx	20	1/year	Grab
Fecal Coliform (No./100 ml)	ххх	XXX	ХХХ	200 Geo Mean	XXX	xxx	1/year	Grab

Compliance Sampling Location: Outfall 001