

Northwest Regional Office CLEAN WATER PROGRAM

Application Type

Wastewater Type

Facility Type

Renewal

Sewage

SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

 Application No.
 PA0238635

 APS ID
 1050885

 Authorization ID
 1374856

Applicant Name	Frank	c A., Jr. & Melissa A. Blaine	Facility Name	Frank A., Jr. & Melissa A. Blaine SRSTP	
Applicant Address 304		agle Mill Road	Facility Address	304 Eagle Mill Road	
	Butler, PA 16001		<u> </u>	Butler, PA 16001	
Applicant Contact	Melis	sa Blaine	Facility Contact	Melissa Blaine	
Applicant Phone	724-2	283-1398	Facility Phone	724-283-1398	
Client ID	15848	32	Site ID	542337	
SIC Code	8800		Municipality	Connoquenessing Township	
SIC Description	Privat	te Households	County	Butler County	
Date Application Received		October 25, 2021	WQM Required	No	
Date Application Accepted Novemb		November 3, 2021	WQM App. No.	-	

Summary of Review

Act 14 - Proof of Notification was submitted and received.

The applicant should be able to meet the limits of this permit, which will protect the uses of the receiving stream.

I. OTHER REQUIREMENTS:

A. AMRs

Stormwater into sewers

B. DMRs

G. Right of way

C. Depth of Septage and Scum Measurement

H. Solids handling

D. Septic Tank Pumping

I. Public Sewerage Availability

E. Effluent Chlorine Optimization and Minimization

SPECIAL CONDITIONS: None.

Permitted treatment consists of: (WQM Permit no. 1001409)

A Chromaglass CA-5 aerobic treatment unit, a 40 square foot (7'-9" x 5'-3") flooded surface sand

filter, and tablet chlorine disinfection with a 130 gallon contact tank.

There are no open violations in EFACTS associated with the subject Client ID (158482) as of 12/16/2022.

Approve	Deny	Signatures	Date	
Х		Stephen A. McCauley	40/40/0000	
		Stephen A. McCauley, E.I.T. / Environmental Engineering Specialist	12/16/2022	
Х		Adam J. Pesek (Lead Reviewer) for	40/40/2022	
		Vacant / Environmental Engineer Manager	12/19/2022	

Discharge, Receiving Waters and Water Supply Information					
Outfall No. 001		Design Flow (MGD)	0.0004		
Latitude 40° 52	2' 03.00"	Longitude	-79° 59' 19.00"		
Quad Name -	_	Quad Code	-		
Wastewater Descrip	otion: Sewage Effluent				
5	Little Connoquenessing				
Receiving Waters	Creek (CWF)		34918		
NHD Com ID	134395544	RMI	12.5		
Drainage Area	-				
Q ₇₋₁₀ Flow (cfs)					
Elevation (ft)		Slope (ft/ft)			
Watershed No.	20C	Chapter 93 Class.	Cold Water Fishes		
Existing Use		Existing Use Qualifier			
Exceptions to Use		Exceptions to Criteria	-		
Assessment Status	Attaining Use(s)				
Cause(s) of Impairn	nent -				
Source(s) of Impairr	ment -				
TMDL Status	Final	Name Little Connoc	quenessing Creek Watershed		
Background/Ambient Data		Data Source			
pH (SU)	-	-			
Temperature (°F)	-		_		
Hardness (mg/L)	-	-			
Other:	-	-			
Nearest Downstrea	m Public Water Supply Intake	Harmony Borough Water Auth	ority		
	Little Connoquenessing Creek	Flow at Intake (cfs)	2.0		
	.1	Distance from Outfall (mi)	11.5		
		- 1212 C C (111)			

This SFTF is designed where applicable in accordance with the SFTF Manual, but it does not qualify for the PAG-04 General Permit due to the use of a Chromaglass CA-5 aerobic treatment unit and a flooded surface sand filter.

No modeling was performed since this is a renewal of an existing NPDES Permit and the technology-based limits set are already below the inputs of the model.

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 (lbs/day) (1)		Concentrations (mg/L)			Minimum ⁽²⁾	Required	
Farameter	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum	Measurement S	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	Upon Request	Grab
TRC	XXX	XXX	XXX	Report Avg Mo	XXX	XXX	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: <u>Outfall 001, after disinfection</u>.

Flow and TRC are monitor only based on Chapter 92a.61. The limits for pH are technology-based on Chapter 93.7. The limits for BOD₅, Total Suspended Solids, and Fecal Coliforms are technology-based on the Department's "Small Flow Treatment Facilities Manual."