

■Northwest Regional OfficeCLEAN WATER PROGRAM

Application Type

Wastewater Type

Facility Type

Renewal

Sewage

SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0264261

APS ID 1047225

Authorization ID 1368620

Applicant Name	pplicant Name Robert K McClain		_ Facility Name	Robert K Mcclain SRSTP	
Applicant Address	1310	Thompson Hill Road	Facility Address	1310 Thompson Hill Road	
	Russell, PA 16345-1916		_	Russell, PA 16345-1916	
Applicant Contact	Robe	rt Mcclain	Facility Contact		
Applicant Phone	(814)	757-8115	Facility Phone		
Client ID	3239	72	Site ID	810999	
SIC Code	4952,8800		Municipality	Farmington Township	
Private Households, Trans. & Utilities - SIC Description Sewerage Systems		_ County	Warren		
Date Application Received		September 2, 2021	WQM Required	No	
Date Application Accepted		September 14, 2021	WQM App. No.		

Summary of Review

This is an existing discharge for an existing 3-bedroom home.

Act 14 - Proof of Notification was submitted and received.

The EPA Waiver is in effect.

There are no open violations in WMS for the subject Client ID (323972) as of 11/8/2021.

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		
Х		Jordan A. Frey, E.I.T. Jordan A. Frey, E.I.T. / Civil Engineer Trainee	November 8, 2021		
Х		Justin C. Dickey Justin C. Dickey, P.E. / Environmental Engineer Manager	November 24, 2021		

Discharge and Stream Data – 2 - Receiving Waters and PWS

ischarge, Receiving	Water	s and Water Supply Info	rmation			
<u> </u>						
Outfall No. 001			Design Flow (MGD)	.0004		
Latitude 41° 56	6' 22.87	II .	Longitude	-79º 11' 41.63"		
Quad Name Russell			Quad Code	41079H2		
Wastewater Descrip	tion:	Sewage Effluent	-			
	-					
Receiving Waters Valen		ine Run (CWF)	Stream Code	56361		
NHD Com ID	12944	6812	RMI	2.3600		
Drainage Area 0.53			Yield (cfs/mi²)	0.1		
Q ₇₋₁₀ Flow (cfs)	0.053		Q ₇₋₁₀ Basis	Default		
Elevation (ft)	1599		Slope (ft/ft)			
Watershed No.	16-B		Chapter 93 Class.	CWF		
Existing Use			Existing Use Qualifier			
Exceptions to Use	Exceptions to Use		Exceptions to Criteria			
Assessment Status		Attaining Use(s)				
Cause(s) of Impairm	nent					
Source(s) of Impairn	ment					
TMDL Status			Name			
Background/∆mhien	nt Data		Data Source			
pH (SU)	Background/Ambient Data pH (SU) 7.0		Default			
Temperature (°F)	· · · ·		Default			
Hardness (mg/L) 100			Default			
Other:						
Nearest Downstrear	m Public	Water Supply Intake	Aqua Pennsylvania, Inc Em	lenton		
PWS Waters A	lleghen	y River	Flow at Intake (cfs) 1376			
PWS RMI 90.0			Distance from Outfall (mi) >25			

Changes Since Last Permit Issuance: None.

Other Comments: None.

Proposed Effluent Limitations and Monitoring Requirements

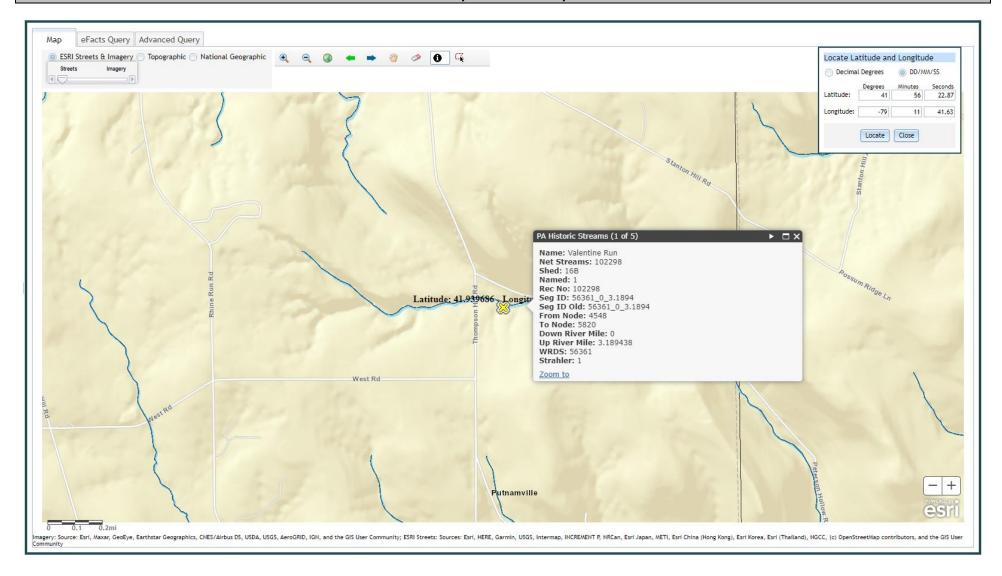
The limitations and monitoring requirements specified below are proposed for the draft permit, and reflect the most stringent limitations amongst technology, water quality and BPJ. Instantaneous Maximum (IMAX) limits are determined using multipliers of 2 (conventional pollutants) or 2.5 (toxic pollutants). 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
Faranietei	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum	Measurement Frequency	Sample Type
Flow (GPD)	Report Annl Avg	XXX	XXX	XXX	XXX	XXX	1/year	Estimate
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9	Upon Request	Grab
TRC	XXX	XXX	XXX	Report	XXX	XXX	1/month	Grab
BOD5	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

Compliance Sampling Location: Outfall 001, after disinfection.

Attachment 1 eMap – Location Map



Attachment 2 Google Earth Imagery

