

Northwest Regional Office CLEAN WATER PROGRAM

Application Type
Wastewater Type
Facility Type
Sewage
SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0264601

APS ID 1048723

Authorization ID 1371176

Applicant Name	Benjamin R Miller	Facility Name	Benjamin R Miller SRSTP
Applicant Address	9660 Old Route 99	Facility Address	9660 Old Route 99
	McKean, PA 16426-1724		McKean, PA 16426-1724
Applicant Contact	Benjamin Miller	Facility Contact	
Applicant Phone	(814) 476-3071	Facility Phone	(814) 476-1310
Applicant E Mail	millerben0424@gmail.com	Facility E Mail	
Client ID	334141	Site ID	815846
Municipality	McKean Township	County	Erie
SIC Code	8800	SIC Code	4952
SIC Description	Private Households	SIC Description	Trans. & Utilities - Sewerage Systems
Received	September 29, 2021	WQM Required	Yes – present permit is adequate
Accepted	October 4, 2021	WQM App. No.	2516408 dated August 26, 2021

Summary of Review

No violations reported.

Cleaning is due by February 2022.

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 74. Mentzer William H. Mentzer, P.E. Environmental Engineering Specialist	October 4, 2021
X		Justin C. Dickey Justin C. Dickey, P.E. Environmental Engineer Manager	October 18, 2021

Discharge and Stream Data – 2 - Receiving Waters and PWS

Outfall No.	001	Design Flow (MGD)	0004	
atitude DP	41° 58' 43.0"	Longitude DP	.0004 -80° 8' 42.00" -80° 8' 41.14" 0304	
atitude NHD	41° 58' 42.96"	Longitude NHD		
Quad Name	Edinboro North	Quad Code		
Vastewater:	Treated single residence		0304	
vasiewaler.	Treated single residence	e domestic wastes		
Receiving Waters	Lamson Run	Stream Code	52587	
IHD Com ID	123922542	RMI	1.53 0.09966 Stream stats 0.006313 CWF, MF none none	
Prainage Area	5.89	Yield (cfs/mi²)		
Q ₇₋₁₀ Flow (cfs)	0.587	Q ₇₋₁₀ Basis		
Elevation (ft)	1067.33	Slope (ft/mi)		
Vatershed No.	15-A statewide	Chapter 93 Class.		
xisting Use		Existing Use Qualifier		
exceptions to Use	none	Exceptions to Criteria		
ssessment Status	Attaining Use(s)			
Cause(s) of Impairment	7 tttairing 000(0)			
Source(s) of Impairment				
MDL Status	Name			
	-			
Background/Ambient Data		Data Source		
H (SU)				
emperature (°F)				
lardness (mg/L)				
Other:				
	c Water Supply Intake			
Other: Nearest Downstream Publi PWS Waters Lake Eri		Flow at Intake (cfs)	MA	

Changes Since Last Permit Issuance: none

Other Comments: Canadian border is 45.31 miles downstream

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	
raidilletei	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum		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	9.0	Upon Request	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

Other Comments: The Annual Maintenance Report (AMR) has UV radiation requirements.