

Northwest Regional Office CLEAN WATER PROGRAM

Application Type

Wastewater Type

Facility Type

Renewal

Sewage

SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0264814

APS ID 1042458

Authorization ID 1360316

Applicant Name	Chelsey Ricketts	Facility Name	Chelsey Ricketts SRSTP
Applicant Address	10851 Sidehill Road	Facility Address	10851 Sidehill Road
	North East, PA 16428-4963		North East, PA 16428-4963
Applicant Contact	Chelsey Ricketts	Facility Contact	
Applicant Phone	(814) 964-1330	Facility Phone	
Applicant E Mail	chelsmo83@gmail.com	Facility E Mail	
Client ID	363955	Site ID	817318
Municipality	North East Township	County	Erie
SIC Code	8800	SIC Code	4952
SIC Description	Private Households	SIC Description	Trans. & Utilities - Sewerage Systems
Application Received	June 28, 2021	WQM Required	Yes, current facility is adequate
Application Accepted	August 16, 2021	WQM App. No.	2516413 T-1

Summary of Review

No violations listed. The facility was permitted in 2017. The start-up date is not known. Sludge removal is not due before 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
V		William H. Mentzer	
Λ		William H. Mentzer, P.E. / Environmental Engineering Specialist	November 23, 2021
X		Justin C. Dickey Justin C. Dickey, P.E. Environmental Engineer Manager	November 24, 2021

Discharge and Stream Data – 2 - Receiving Waters and PWS

scharge, Receivinç	g Waters and Water Supply Informat	tion		
Outfall No.	001	Design Flow (MGD)	0.0004	
Latitude DP	42° 11' 11.03"	Longitude DP	-79° 50' 12.56"	
Latitude NHD	42° 11' 14.25"	Longitude NHD	-79° 50' 13.90" 0107	
Quad Name	North East	Quad Code		
Wastewater:	Treated single residence domestic w	/astes		
Receiving Waters	Unnamed Tributary of Sixteenmile C	reek Stream Code	62273	
NHD Com ID	123924536	RMI	1.75 0.001 Dry stream	
Drainage Area	0.02	Yield (cfs/mi²)		
Q ₇₋₁₀ Flow (cfs)	0	Q ₇₋₁₀ Basis		
Elevation (ft)	1020	Slope (ft/ft)		
Watershed No.	15-A	Chapter 93 Class.	-	
Existing Use	statewide	Existing Use Qualifier		
Exceptions to Use	none	Exceptions to Criteria		
Comments	NHD RMI 0.46			
Assessment Status	Attaining Use(s)			
Cause(s) of Impairn				
Source(s) of Impair				
TMDL Status		Name		
Background/Ambier	nt Data D	Data Source		
pH (SU)				
Temperature (°F)				
Hardness (mg/L)				
Other:				
	5	ake Erie		
Nearest Downstrea	m Public Water Supply Intake <u>L</u>			
	m Public Water Supply Intake <u>L</u> _ake Erie	Flow at Intake (cfs) NA	<u> </u>	

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.

Parameter	Effluent Limitations				Monitoring Requirements			
	Mass Units	s (lbs/day) (1) Concentrations (mg/L)			Minimum ⁽²⁾	mum (2) Required		
	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	1XXX	1/year	Grab

Compliance Sampling Location: Outfall 001 after disinfection

Other Comments: UV radiation monitoring as on the Annual Maintenance Report (AMR)