

Northwest Regional Office CLEAN WATER PROGRAM

Application Type

Wastewater Type

Facility Type

Renewal

Sewage

SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0265161

APS ID 1080485

Authorization ID 1426214

Applicant Name	John	Schricker	Facility Name	John Schricker SRSTP	
Applicant Address	286 G	Fravel Lick Road	Facility Address	286 Gravel Lick Road	
	Stratta	anville, PA 16258		Strattanville, PA 16258	
Applicant Contact	John	Schricker	Facility Contact		
Applicant Phone	(814)	764-6187	Facility Phone		
Applicant E Mail;	bschr	icker@hotmail.com	Faci;ity E Mai		
Client ID	33641	17	Site ID	822302	
Municipality	Wash	ington Township	County	Clarion	
SIC Code	8800		SIC Code	4952	
SIC Description	Privat	e Households	SIC Description	Sewage treatment	
Date Application Received		January 23, 2023	WQM Required	Current permit is adequate	
Date Application Accepted		February 14, 2023	WQM App. No.		

Summary of Review

This renewal is in response to a December 7, 2023 NOV for an expired permit.

There are no open violations in WMS for Client ID 336417 as of 4/28/2023. CWY

Sludge removed in 2020

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
		William H. Mentzer	
Λ		William H. Mentzer, P.E.	
		Environmental Engineering Specialist	March 30, 2023
X		Chad W. Yurisic Chad W. Yurisic, P.E.	
		Environmental Engineer Manager	4/28/2023

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving	g Waters and Water Supply Inform	ation			
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Outfall No.	001	Design Flow (MGD)	.0004		
Latitude DP	41° 16' 10.62"	Longitude DP	-79º 14' 44.08" -79º 14' 33.21"		
Latitude NHD	41º 16' 13.72"	Longitude NHD			
Quad Name	Cooksburg	Quad Code	12		
Wastewater Descri	ption: Sewage Effluent				
Receiving Waters	Un-named tributary to Blyson Run	Stream Code	unknown		
NHD Com ID	102669345	_ RMI	1.3100		
Drainage Area	0.29	Yield (cfs/mi²)	0		
Q ₇₋₁₀ Flow (cfs)	0	Q ₇₋₁₀ Basis	Dry stream		
Elevation (ft)	1582.23	Slope (ft/ft)	0.04209		
Watershed No.	17-B	Chapter 93 Class.	EV		
Existing Use	statewide	Existing Use Qualifier	none		
Exceptions to Use	none	Exceptions to Criteria			
•	Confluence Blyson Run RMI 3.3		inage 0.9 square miles		
Assessment Status	Attaining Use(s)				
Impairment cause					
Impairment source					
TMDL Status		Name			
De alconocco d/A cabia	at Data	Data Carras			
Background/Ambie	ent Data	Data Source			
pH (SU)					
Temperature (°F)					
Hardness (mg/L) Other:					
Other.	 -				
Nearest Downstrea	m Public Water Supply Intake	Clarion District PA Am			
PWS Waters	Clarion River	Flow at Intake (cfs)	NA		
PWS RMI	33.47	Distance from Outfall (mi)	10.4		

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	
	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	9.0	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: Outfall 001after disinfection