

Northwest Regional Office CLEAN WATER PROGRAM

Application Type
Wastewater Type
Facility Type
SRSTP
Renewal
Sewage
SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0265691

APS ID 1078735

Authorization ID 1423034

Applicant Name	Charles J Downing	Facility Name	Charles J Downing SRSTP 163 Eighteen Mile Lane		
Applicant Address	PO Box 558	Facility Address			
	North East, PA 16428-0558		North East, PA 16428		
Applicant Contact	Charles Downing	Facility Contact			
Applicant Phone	(814) 882-2126	Facility Phone			
Applicant E Mail	bigcharlietuna@gmail.com	Facility E Mail			
Client ID	340410	Site ID	825582		
Municipality	North East Township	Township County	_ Erie		
SIC Code	8800	SIC Code	4952		
SIC Description	Private Households,	SIC Description	Trans. & Utilities - Sewerage Systems		
Date Application Red	eived January 3, 2023	WQM Required	Existing permit is adequate		
Date Application Acc	epted January 19, 2023	WQM App. No.			

Summary of Review

No reported violations. Septage last pumped on June 17, 2021

There are no open violations in WMS for Client ID 340410 as of 4/24/2023. CWY

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	April 13, 2023
X		Chad W.Yurisic Chad W. Yurisic, P.E.	
		Environmental Engineer Manager	4/24/2023

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving	g Waters and Water Supply Infor	mation		
Outfall No.	001	Design Flow (MGD)	.0005	
Latitude DP	42° 15' 37.560"	Longitude DP	-79° 47' 19.34"	
Latitude NHD	42° 15' 37.56"	Longitude NHD	-79° 47' 19.51"	
Quad Name	North East	Quad Code	0107	
Wastewater Descrip	otion: Treated single residence	domestic wastes		
Receiving Waters	Unnamed tributary to Lake Erie	Stream Code	62253	
NHD Com ID	123924721	RMI	0.037	
Drainage Area	0.47	Yield (cfs/mi²)	0	
Q ₇₋₁₀ Flow (cfs)	0	Q ₇₋₁₀ Basis	Intermittent stream	
Elevation (ft)	584	Slope (ft/ft)		
Watershed No.	15-A	Chapter 93 Class.	CWF, MF	
Existing Use	statewide	Existing Use Qualifier	none	
Exceptions to Use	none	Exceptions to Criteria		
Comments				
Assessment Status	Attaining Use(s)			
Cause(s) of Impairn	ment			
Source(s) of Impair	ment			
TMDL Status		Name		
Background/Ambier	nt Data	Data Source		
pH (SU)	7,0	default		
Temperature (°F)				
Hardness (mg/L)				
Other:				
Nearest Downstrea	m Public Water Supply Intake	Canada		
	_ake Erie	Flow at Intake (cfs)	NA	
	391.63	Distance from Outfall (mi)	14.44	

Changes Since Last Permit Issuance: None

Other Comments: Stat of New York is 63.57 miles down stream

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	
rarameter	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	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	1000	1/year	Grab

Compliance Sampling Location: Outfall 001 after disinfection