

Northwest Regional Office CLEAN WATER PROGRAM

Application Type	New
Wastewater Type	Sewage
Facility Type	SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No.	PA0272418		
APS ID	997091		
Authorization ID	127001E		

Applicant Name	Austin Binkert	Facility Name	Austin Binkert SRSTP
Applicant Address	430 Meadville Road	Facility Address	430 Meadville Road
	Titusville, PA 16354		Titusville, PA 16354
Applicant Contact	Austin Binkert	Facility Contact	
Applicant Phone	(814) 428-2554	Facility Phone	
Client ID	351096	Site ID	835764
Municipality	Plum Township	County	Venango
SIC Code	8800	SIC Code	4952
SIC Description	Private Households	SIC Description	Trans. & Utilities - Sewerage Systems
Application Received	June 18, 2019	WQM Required	Review pending
Application Accepted	July 25, 2019	WQM App. No.	6119403

Summary	of F	Reviev	۷
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No violations have been reported

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 H. Mentzer, P.E. Environmental Engineering Specialist	July 30, 2019
X		Justin C. Dickey, P.E. Environmental Engineer Manager	

scharge, Receivin	g Waters and Water Supply Informa	tion		
Outfall No.	001	Design Flow (MGD)	0.0004	
Latitude	41° 35' 41.53"	Longitude	-79° 50' 9.04"	
Latitude	41° 35' 38.15"	Longitude	-79° 50' 1.67"	
Quad Name	Dempseytown	_ Quad Code	0607	
Wastewater:	Treated single residence domestic w	-		
Receiving Waters	Unnamed Tributary to Sugar Creek	Stream Code	51890	
NHD Com ID	127347446	RMI	1.37	
Drainage Area	0.05	Yield (cfs/mi²)	0	
Q ₇₋₁₀ Flow (cfs)	0	Q ₇₋₁₀ Basis	Dry stream	
Elevation (ft)	1524.94	Slope (ft/ft)	0.0120 Cold Water Fishes none none	
Watershed No.	16D	Chapter 93 Class.		
Existing Use	statewide	Existing Use Qualifier		
Exceptions to Use	none	Exceptions to Criteria		
Comments	NHD location is 0.14 mile above an	an instream pond. Perennial stream conditions are expected		
downstream at the	confluence with Sugar Creek.			
Assessment Status	Attaining Use(s)			
Cause(s) of Impairr	ment			
Source(s) of Impair	ment			
TMDL Status		Name		
Background/Ambie	nt Data [Data Source		
pH (SU)				
Temperature (°F)				
Hardness (mg/L)				
Other:				
Nearest Downstrea	m Public Water Supply Intake	Aqua Pa Emlenton		
	• • •	Flow at Intake (cfs)	1250	
	AIIEONENV KIVEI			
_	Allegheny River	Distance from Outfall (mi)	55.64	

Changes Since Last Permit Issuance: NA

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	
Parameter	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum	Measurement Frequency	Sample Type
Flow (MGD)	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