

## Northwest Regional Office CLEAN WATER PROGRAM

Application Type	New
Wastewater Type	Sewage
Facility Type	SRSTP

# NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No.	PA0288004			
APS ID	1008463			
Authorization ID	1300152			

licant Name	Evelyn Gallagher	Facility Name	Evelyn Gallagher SRSTP
licant Address	693 Mushrush Road	Facility Address	693 Mushrush Road
	Butler, PA 16002		Butler, PA 16002
licant Contact	Evelyn Gallagher	Facility Contact	Evelyn Gallagher
licant Phone	(724) 504-2967	Facility Phone	(724) 504-2967
nt ID	354307	Site ID	839710
Code	8800	Municipality	Jefferson Township
Description	Private Households	County	Butler
Application Rece	ived December 13, 2019	WQM Required	Yes - pending
Application Acce	oted	WQM App. No.	1019408

#### **Summary of Review**

The project involves the installation of a new single residence sewage treatment plant to replace an existing malfunctioning onlot system.

Act 537 Planning was approved on December 9, 2019.

Proposed treatment will consist of: A 1,000 gallon dual compartment concrete septic tank and a Premier Tech EC7-500 concrete coco filter unit with an integrated DiUV unit and pump.

#### **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
		Emily C. M. Voorhees / Civil Engineer	
		Justin C. Dickey, P.E. / Environmental Engineer Manager	

scharge, Receiving Waters and Water Supply Information					
Outfall No. 001		Design Flow (MGD)	.0004 -79° 51' 24.40""		
Latitude 40° 48' 39.22"		Longitude			
Quad Name		Quad Code			
Wastewater Description: Sewage Efflu	ent				
Receiving Waters Patterson Run (CW	<u>)                                    </u>	tream Code	35202		
NHD Com ID 126221621	R	MI	0.3300		
Drainage Area 0.0748 sq. mi.	Y	ield (cfs/mi²)	0.1		
Q <sub>7-10</sub> Flow (cfs) 0.0748	Q	<sub>7-10</sub> Basis	Default		
Elevation (ft) 1,269	S	lope (ft/ft)			
Watershed No. 20C	C	hapter 93 Class.	Cold Water Fishes		
Existing Use	E	Existing Use Qualifier			
Exceptions to Use	E	xceptions to Criteria			
Assessment Status Attaining Use	(s)				
Cause(s) of Impairment					
Source(s) of Impairment					
TMDL Status		Name			
Background/Ambient Data	Data S	ource			
pH (SU)					
Temperature (°F)					
Hardness (mg/L)					
Other:					
Nearest Downstream Public Water Suppl	Intake PA Am	erica Water Co. – Ellwo	ood City		
PWS Waters Connoquenessing Cre		at Intake (cfs)	•		
PWS RMI 0.1	<del></del>	ance from Outfall (mi)	Approx. 45.74		

### **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 <sup>(2)</sup>	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	Upon Request	Grab
BOD5	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
TSS	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200	XXX	XXX	1/year	Grab

Compliance Sampling Location: <u>Outfall 001, after UV disinfection.</u>

Other Comments: Flow is monitor only based on Chapter 92a.61. The limits for BOD5, Total Suspended Solids, and Fecal Coliforms are technology- based on Chapter 92a.47.