

Northwest Regional Office CLEAN WATER PROGRAM

Application Type
Wastewater Type
Facility Type
SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0289523

APS ID 1039663

Authorization ID 1355899

Applicant Name	Robert Schweikert	Facility Name	Robert Schweikert SRSTP
Applicant Address	324 Wallrose Heights Road	Facility Address	981 Slalom Run Road- Lot 5 Hemlock Acres
	Baden, PA 15005-2710	<u></u>	Clarion, PA 16258
Applicant Contact	Robert Schweikert	Facility Contact	
Applicant Phone	(724) 713-8478	Facility Phone	
Applicant E Mail	Schweikert4@comcast.com	Facility E Mail	
Client ID	363228	Site ID	848233
Municipality	Clarion Township	County	Clarion
SIC Code	8800	SIC Code	4952
SIC Description	Private Households	SIC Description	Trans. & Utilities - Sewerage Systems
Application Received	May 18, 2021	WQM Required	Yes with pending review
Application Accepted	June 15, 2021	WQM App. No.	1621402

Summary of Review

Proposed is a new small flow sewage treatment facility serving a 3-bedroom residence. Design is for 400-gpd and 1.2-ppd BOD5. 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
V		William H. Mentzer	
Λ		William H. Mentzer, P.E. Environmental Engineering Specialist	June 22, 2021
X		Justin C. Dickey Justin C. Dickey, P.E. Environmental Engineer Manager	June 25, 2021

Discharge and Stream Data – 2 - Receiving Waters and PWS

scharge, Receiving	y Wate	rs and Water Supply Informa	tion			
Outfall No.	001		Design Flow (MGD)	0.0004		
Latitude DP		2' 56.22"	Longitude DP	-79° 20' 46.92"		
Latitude NHD	-	2' 57.07"	Longitude NHD	-79° 20' 45.47"		
Quad Name		anville	Quad Code	0911		
Wastewater:	Treat	ed single residence domestic v				
Receiving Waters	Unna	med Tributary to Clarion River	Stream Code	49701		
NHD Com ID		70293	– RMI	0.0400		
Drainage Area	0.4		– Yield (cfs/mi²)	0		
Q ₇₋₁₀ Flow (cfs)	0		Q ₇₋₁₀ Basis	Dry stream		
Elevation (ft)	1114	90	Slope (ft/ft)	0.13158		
Watershed No.	17-B		Chapter 93 Class.			
Existing Use			Existing Use Qualifier Exceptions to Criteria			
Exceptions to Use	none					
Comments						
Assessment Status		Impaired				
Cause(s) of Impairn		METALS, PH				
Source(s) of Impair	ment	ACID MINE DRAINAGE, AC	ID MINE DRAINAGE			
TMDL Status			_ Name			
Background/Ambient Data		[Data Source			
pH (SU)						
Temperature (°F)						
Temperature (°F) Hardness (mg/L)						
Hardness (mg/L) Other:	m Publ	ic Water Supply Intake	Pa American Clarion			
Hardness (mg/L) Other: Nearest Downstrea	m Publ Clarion	· · · · · —	Pa American Clarion Flow at Intake (cfs)	NA		

Changes Since Last Permit Issuance: NA

Other Comments: No water supply impacts are expected

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 (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	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

Other Comments: UV radiation requirements are listed on the Annual Maintenance Reports (AMR)