

Northwest Regional Office CLEAN WATER PROGRAM

Application Type	New
Wastewater Type	Sewage
Facility Type	SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No.	PA0289701
APS ID	1042765
Authorization ID	1360939

Applicant Name	John & Theresa Clark	Facility Name	John & Theresa Clark SRSTP
Applicant Address	2500 Nursery Road	Facility Address	9125 State Rte 18
	Lake City, PA 16423-2025	<u></u>	Cranesville, PA 16410
Applicant Contact	John Clark	Facility Contact	
Applicant E Mail	Countrygardens2500@gmail.com	Facility E Mail	
Applicant Phone	(814) 774-4240	Facility Phone	
Client ID	364082	Site ID	847953
Municipality	Elk Creek Township	County	Erie
SIC Code	8800	SIC Code	4952
SIC Description	Private Households	SIC Description	Trans. & Utilities - Sewerage Systems
Application Received	June 25, 2021	WQM Required	Yes pending
Application Accepted	August 5, 2021	WQM App. No.	2521421

Summary of	of Review
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No violations are listed in WMS.

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	
		William H. Mentzer, P.E. Environmental Engineering Specialist	August 5, 2021
X		Justin C. Dickey Justin C. Dickey, P.E.	
		Environmental Engineer Manager	August 9, 2021

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving	g Water	s and Water Supply Informa	ition	
Outfall No.	001		Design Flow (MGD)	0.0004
Latitude	41º 56	6' 0.10"	Longitude	-80° 20' 0.50"
Latitude	41º 56	6' 24.96"	Longitude	-80° 20' 33.87"
Quad Name	Albion	1	Quad Code	0303
Wastewater:	Treate	ed single residence domestic v	wastes	
Receiving Waters	Unnar	med tributary to Crooked Cree	ek Stream Code	none
NHD Com ID	12391	9708	RMI	0.72
Drainage Area	0.02		Yield (cfs/mi²)	0
Q ₇₋₁₀ Flow (cfs)	0		Q ₇₋₁₀ Basis	Dry stream
Elevation (ft)	856.2	8	Slope (ft/ft)	0.03704
Watershed No.	15-A		Chapter 93 Class.	HQ-CWF, MF
Existing Use	statev	wide	Existing Use Qualifie	r none
Exceptions to Use	none		Exceptions to Criteria	none
Comments	Conflu	uence at Crooked Creek node	RMI 0.89, stream RMI 11.	28, Drainage 1.8622 square
	Miles	and Elevation 926.77 feet		
Assessment Status		Attaining Use(s)		
Cause(s) of Impairr	nent			
Source(s) of Impair	ment			
TMDL Status			Name	_
Background/Ambie	nt Data	1	Data Source	
pH (SU)				
Temperature (°F)				
Hardness (mg/L)				
Other:				
			City of Erie	
	_ake Eri	e	Flow at Intake (cfs)	NA
PWS RMI 9	915.04		Distance from Outfall (n	ni) <u>28.13</u>

Changes Since Last Permit Issuance: NA

Other Comments: RMI 915.04 is a St Lawrence River basin RMI.

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
r ai ailletei	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum	Measurement S 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: at Outfall 001 after disinfection

Other Comments: UV radiation monitoring and reporting are specified on the Annual Maintenance Report (AMR). *Monthly pH monitoring established due to discharge being to an HQ watershed.*