

Northwest Regional Office CLEAN WATER PROGRAM

Application Type	New
Wastewater Type	Sewage
Facility Type	SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

 Application No.
 PA0290629

 APS ID
 1061188

 Authorization ID
 1392318

Applicant Name Sherri Thompson			Facility Name	Sherri Thompson SRSTP		
Applicant Address	10020	Springboro Road	Facility Address	10020 Springboro Road		
	Spring	boro, PA 16435-2448		Springboro, PA 16435-2448		
Applicant Contact	Sherri	Thompson	Facility Contact			
Applicant Phone	(440)	228-4883	Facility Phone			
Applicant E Mail	sherri.	thompson@loves.com	Facility E Mail			
Client ID	36939	0	Site ID	853413		
Municipality	Spring Township		County	Crawford		
SIC Code	8800		SIC Code	4952		
SIC Description	Private	e Households	SIC Description	Trans. & Utilities - Sewerage Systems		
Date Application Rec	eived	April 12, 2022	WQM Required	pending		
Date Application Acc	epted	April 27, 2022	WQM App. No.	2022404		

Summary of Review

No violations are reported. Design is for 1.1-PPD BOD5 and 400-GPD based on an existing three-bedroom residence. The discharge is part of a proposal to replace a malfunctioning on-pot sewage treatment facility.

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	April 27, 2022		
X		Justin C. Dickey Justin C. Dickey, P.E. Environmental Engineer Manager	May 9, 2022		

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving	g Waters and Water Supply Inform	ation	
Outfall No.	001	Design Flow (MGD)	0.0004
Latitude DP	41° 47′ 54.40″	Longitude DP	-80° 20' 18.70"
Latitude NHD	41° 47' 54.18"	Longitude NHD	-80° 20' 30.16"
Quad Name	Conneautville	Quad Code	0403
Wastewater Descrip	otion: Treated single residence do	mestic wastes	
Receiving Waters	Unnamed Tributary to Conneaut C	reek Stream Code	63534
NHD Com ID	123921034	RMI	2.01
Drainage Area	8.7 acres 0.01 square miles	Yield (cfs/mi²)	0
Q ₇₋₁₀ Flow (cfs)	0	Q ₇₋₁₀ Basis	dry stream
Elevation (ft)	1231.00	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	none
Comments	Discharge is 0.17 mile above the e	nd of the stream assessment read	ch.
Assessment Status	Attaining Use(s)		
Cause(s) of Impairn	nent		
Source(s) of Impair	ment		
TMDL Status		Name	
Background/Ambier	nt Data	Data Source	
pH (SU)			
Temperature (°F)			
Hardness (mg/L)			
Other:			
Nearest Downstrea	m Public Water Supply Intake	State of Ohio	
	Conneaut Creek		IA
PWS RMI (` '	0.52

Changes Since Last Permit Issuance: none

Other Comments: Conneaut Creek RMI starts at the Ohio-Pennsylvania border

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	
	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: See AMR for UV radiation requirements