

## Northwest Regional Office CLEAN WATER PROGRAM

Application Type

Wastewater Type

Facility Type

New

Sewage

SRSTP

# NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0290696

APS ID 1062934

Authorization ID 1395547

Applicant Name	Ciro Lama		Facility Name	Ciro Lama SRSTP		
Applicant Address	89 CI	harleston Road	Facility Address	89 Charleston Road		
	Merc	er, PA 16137-2415		Mercer, PA 16137		
Applicant Contact	Ciro I	Lama	Facility Contact			
Applicant Phone	(347)	884-1965	Facility Phone			
Applicant E Mail	cirojla	ama@gmail.com	Facility E Mail			
Client ID	3699	31	Site ID	854572		
Municipality	Jeffe	rson Township	County	Mercer		
SIC Code	8800		SIC Code	4952		
SIC Description	Priva	te Households	SIC Description	Trans. & Utilities - Sewerage Systems		
Date Application Received		May 3, 2022	WQM Required	pending		
Date Application Accepted		May 17, 2022	WQM App. No.	4322403		

#### **Summary of Review**

Design is 400-gpd and 1,1-ppd BOD5 based on three bedrooms. No violations are 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	
$\wedge$		William H. Mentzer, P.E.	M. 47 0000
		Environmental Engineering Specialist	May 17, 2022
X		Justin C. Dickey Justin C. Dickey, P.E. Environmental Engineer Manager	May 20, 2022

Discharge and Stream Data – 2 - Receiving Waters and PWS

Design Flow (MGD)  Longitude  Longitude  Quad Code	0004 80° 21' 43.68" 80° 21' 41.02"				
Longitude Longitude	-80° 21' 43.68"				
Longitude					
	-80º 21' 41 02"				
Quad Code	-				
	_0903				
dence domestic wastes.					
<u> </u>	36056				
	0.35				
	Dry stream				
Slope (ft/ft)	0.01457				
Chapter 93 Class.	wwF none none				
Existing Use Qualifier					
Exceptions to Criteria					
is is at a small instream pond.					
OR OTHER PERMITTED SMALL FLO	OTHER PERMITTED SMALL FLOWS DISCHARGES				
Name	Name				
uld partly abate the nutrient degradation.					
Data Source	Data Source				
ke Agua PA					
<del></del>	NA				
<del></del>	14.02				
	Existing Use Qualifier Exceptions to Criteria s is at a small instream pond.  OR OTHER PERMITTED SMALL FLOW Name  Ild partly abate the nutrient degradation.				

Changes Since Last Permit Issuance: NA

### **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
raiametei	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