

Northwest Regional Office CLEAN WATER PROGRAM

Application Type	New
Wastewater Type	Sewage
Facility Type	SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No.	PA0291251
APS ID	1070614
Authorization ID	1400104

Applicant Name	Spar	ks Amanda	Facility Name	Amanda Sparks SRSTP		
Applicant Address	3037	5 State Highway 408	Facility Address	30375 State Highway 408		
	Town	ville, PA 16360-2313		Townville, PA 16360-2313		
Applicant Contact	Amar	nda Sparks	Facility Contact			
Applicant Phone	(814)	853-7972	Facility Phone			
Contact E Mail	tattoc	blue69@gmail.com	Facility E Mail			
Client ID	3722	11	Site ID	857078		
Municipality	Richmond Township		County	Crawford		
SIC Code	8800		SIC Code	4952		
SIC Description	Priva	te Households,	SIC Description	Trans. & Utilities - Sewerage Systems		
Date Application Red	ceived	September 2, 2022	WQM Required	pending		
Date Application Acc	epted	September 13, 2022	WQM App. No.	2022413		

Summary of Review

No violations are listed. Design is for 400-gpd and 1.1-PPD BOD5 based on a three-bedroom home.

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
		William H. Mentzer	
		William H. Mentzer, P.E. Environmental Engineering Specialist	September 13, 2022
X		Vacant Environmental Engineer Manager	Okay to Draft JCD 9/19/2022

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving Waters and Water Supply Information				
Outfall No.	001	Design Flow (MGD)	.0004	
Latitude DP	41° 42' 45.40"	Longitude DP	-79° 56' 21.60"	
Latitude NHD	41° 42' 50.45"	Longitude NHD	-79° 56' 22.10"	
Quad Name	Townville	Quad Code	0506	
Wastewater Descrip	otion: Treated single residence do	mestic wastes		
			-	
Receiving Waters	Unnamed Tributary of Temple Run	Stream Code	unknown	
NHD Com ID	127353281	RMI	0.09	
Drainage Area	0.5 acres	Yield (cfs/mi²)	0	
Q ₇₋₁₀ Flow (cfs)	0	Q ₇₋₁₀ Basis	Dry stream	
Elevation (ft)	1446.00 feet	Slope (ft/ft)		
Watershed No.	16-A	Chapter 93 Class.	HQ-CWF	
Existing Use	statewide	Existing Use Qualifier	none	
Exceptions to Use	none	Exceptions to Criteria	none	
Comments	Discharge to roadside ditch with co	onfluence at tributary 53205 RM	/II 0.35 and drainage 0.25	
	Square miles. Perennial stream at	confluence with Temple Run		
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:				
		Cambridge Springs Borough		
-	French Creek	Flow at Intake (cfs)	NA	
PWS RMI 5	50/28	Distance from Outfall (mi)	21.58	

Changes Since Last Permit Issuance: none

Other Comments: Water supply criteria evaluated at the discharge.

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	Mass Units (Ibs/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	1/month	Grab
Biochemical Oxygen Demand (BOD5)	XXX	XXX	XXX	10.0	XXX	20.0	1/year	Grab
Total Suspended Solids	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: Outfall001 after disinfection

Other Comments: See AMR for UV radiation disifectionrequirements