

 Application Type
 New

 Wastewater Type
 Sewage

 Facility Type
 SFTF

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

 Application No.
 PA0292753

 APS ID
 1077993

 Authorization ID
 1421641

Applicant, Facility and Project Information

Applicant Name	Jody Welcheck	Facility Name	Country Corner Inn		
Applicant Address	17880 Cole Road	Facility Address	17880 Cole Road		
	Conneautville, PA 16406-4010		Conneautville, PA 16406-4010		
Applicant Contact	Jody Welcheck	Facility Contact			
Applicant Phone	(814) 573-3373	Facility Phone			
Applocant E Mail	jjwelcheck@windstream.net	Facility E Mail			
Client ID	374342	Site ID	462278		
Municipality	Conneaut Township	County	Crawford		
SIC Code	8800	SIC Code	4952		
SIC Description	Private Households	SIC Description	Trans. & Utilities - Sewerage Systems		
Date Application Recei	ived December 5, 2022	WQM Required	pending		
Date Application Accepted January 24, 2023		WQM App. No.	2022416		
Project Description	SFTF to repair existing malfun	ctioning on-lot system.			

Summary of Review

No open violations listed. 7/31/2023 CWY The complete facility name is Smokin'J's Country Corner Inn.

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 74. Mentzer William H. Mentzer, P.E. Environmental Engineering Specialist	July 25, 2023
X		Chad W. Yurisic Chad W. Yurisic, P.E. Environmental Engineer Manager	7/31/2023

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving Waters and Water Supply Information					
Outfall No.	_001	Design Flow (MGD)	.002		
Latitude DP	41º 42' 45.29"	Longitude DP	-80° 24' 39.86"		
Latitude NHD	41º 42' 43.54"	Longitude NHD	-80º 25' 17.57"		
Quad Name	Linesville	Quad Code	0502		
Wastewater Descri	ption: Treated domestic wastes f	rom a restaurant and bar			
Receiving Waters	Unnamed tributary to Linesville C	reek Stream Code	unknown		
NHD Com ID	130030854	RMI	0.54		
Drainage Area	0.1	Yield (cfs/mi²)	0		
Q ₇₋₁₀ Flow (cfs)	0	Q ₇₋₁₀ Basis	Dry stream		
Elevation (ft)	1165.6	Slope (ft/ft)			
Watershed No.	20-A	Chapter 93 Class.	WWF		
Existing Use	statewide	Existing Use Qualifier	none		
Exceptions to Use	none	Exceptions to Criteria	none		
Comments	Two roadside ditch segments to L	inesville Creek at node RMI 0.17 ((Stream RMI 6.79)		
Assessment Status	Attaining Use(s)				
Cause(s) of Impairr	nent				
Source(s) of Impairment					
TMDL Status		Name			
Background/Ambient Data		Data Source			
pH (SU)					
Temperature (°F)					
Hardness (mg/L)					
Other:					
Nearest Downstrea	m Public Water Supply Intake	Greenville Borough			
PWS Waters	Shenango River	Flow at Intake (cfs)	NA		
PWS RMI	56.96	Distance from Outfall (mi)	33.92		

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 (Ibs/day) ⁽¹⁾			Concentrations (mg/L)			Minimum ⁽²⁾	Required
	Average Monthly	Average Weekly	Minimum	Average Monthly	Maximum	Instant. Maximum	Measurement San	Sample Type
Flow (GPD)	Report	XXX	ххх	XXX	XXX	ххх	1/month	Estimate
рН (S.U.)	ХХХ	XXX	6.0 Inst Min	XXX	XXX	9.0	1/month	Grab
CBOD5	ххх	xxx	xxx	10.0	XXX	20.0	1/month	Grab
TSS	ххх	xxx	xxx	10.0	XXX	20.0	1/month	Grab
Fecal Coliform (No./100 ml)	XXX	xxx	XXX	200 Geo Mean	xxx	xxx	1/month	Grab

Compliance Sampling Location: Outfall 001 after disinfection