



Application Type Amendment,
Major
Facility Type Municipal
Major / Minor Minor

**NPDES PERMIT FACT SHEET
INDIVIDUAL SEWAGE**

Application No. PA0024163 A-2
APS ID 1126970
Authorization ID 1508720

Applicant and Facility Information

Applicant Name	<u>Cambria Township Sewer Authority</u>	Facility Name	<u>Revloc STP</u>
Applicant Address	PO Box 247	Facility Address	Bethlehem Mine Road
	Revloc, PA 15948-0247		Revloc, PA 15948
Applicant Contact	Tracy Eckenrod	Facility Contact	Same as Applicant
Applicant Phone	(814) 472-5023	Facility Phone	Same as Applicant
Client ID	43663	Site ID	2335
Ch 94 Load Status	Existing Hydraulic and Organic Overload	Municipality	Cambria Township
Connection Status	Dept. Imposed Connection Prohibitions	County	Cambria
Date Application Received	<u>December 5, 2024</u>	EPA Waived?	Yes
Date Application Accepted	<u>December 17, 2024</u>	If No, Reason	
Purpose of Application	<u>Major Amendment of a NPDES permit for discharge of treated sewage</u>		

Summary of Review

Cambria Township Sewer Authority has applied for a major amendment to NPDES Permit No. PA0024163, which was issued on July 19, 2021 and expires on July 31, 2026. This permit was previously amended on March 17, 2022.

Cambria Township Sewer Authority is requesting an extension for their compliance period regarding a more restrictive total residual chlorine (TRC). The Authority is installing ultraviolet (UV) disinfection work as approved under WQM Permit No. 1171403-A5. During construction, the electrical contractor declared bankruptcy, delaying construction by about three months.

This permit is being amended to give the Authority additional time to complete installation of the UV disinfection unit. To do this, the following changes are being made to this permit:

- The compliance schedule for TRC was removed.
- The old TRC limit was extended until March 31, 2025.
- UV transmittance monitoring and reporting was added beginning April 1, 2025.
- Part C. IV of the permit was removed because the permit no longer imposes a TRC effluent limitation below quantification.
- Part C. II of the permit was amended to cover just Ammonia-Nitrogen and Dissolved Oxygen.
- A new Part C. IV was added.

The permittee has complied with Act 14 Notifications through letters dated November 26, 2024, and sent to Cambria County and Cambria Township.

Approve	Deny	Signatures	Date
X		 Stephanie Conrad / Environmental Engineering Specialist	January 6, 2025
X		 Mahbuba Iasmin, Ph.D., P.E. / Environmental Engineering Manager	January 10, 2025

Summary of Review

There are currently no open violations for Cambria Township Sewer Authority (Client ID 43663).

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.

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" (386-0400-001), SOPs and/or BPJ.

Outfall 001, Effective Period: January 1, 2025 through Permit Expiration Date.

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) ⁽¹⁾		Concentrations (mg/L)				Minimum ⁽²⁾ Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Average Monthly	Maximum	Instant. Maximum		
DO	XXX	XXX	6.0 Inst Min	XXX	XXX	XXX	1/day	Measured
Ammonia-Nitrogen Nov 1 - Apr 30	29.2	XXX	XXX	7.0	10.5 Wkly Avg	14	1/week	24-Hr Composite
Ammonia-Nitrogen May 1 - Oct 31	10.0	XXX	XXX	2.4	3.6 Wkly Avg	4.8	1/week	24-Hr Composite

Compliance Sampling Location: Outfall 001

Other Comments: None

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Outfall 001, Effective Period: April 1, 2025 through Permit Expiration Date.

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) ⁽¹⁾		Concentrations (mg/L)				Minimum ⁽²⁾ Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Instantaneous Minimum	Average Monthly	Maximum	Instant. Maximum		
UV Transmittance (%)	XXX	XXX	Report	Report	XXX	XXX	1/day	Measured

Compliance Sampling Location: Outfall 001

Other Comments: None

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Outfall 001, Effective Period: Permit Effective Date through March 31, 2025.

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) ⁽¹⁾		Concentrations (mg/L)					
	Average Monthly	Average Weekly	Minimum	Average Monthly	Maximum	Instant. Maximum	Minimum ⁽²⁾ Measurement Frequency	Required Sample Type
Total Residual Chlorine	XXX	XXX	XXX	0.5	XXX	1.6	1/day	Grab

Compliance Sampling Location: Outfall 001

Other Comments: None

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Outfall 001, Effective Period: Permit Effective Date through December 31, 2024.

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) ⁽¹⁾		Concentrations (mg/L)				Minimum ⁽²⁾ Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Average Monthly	Maximum	Instant. Maximum		
DO	XXX	XXX	4.0 Inst Min	XXX	XXX	XXX	1/day	Measured
Ammonia-Nitrogen	Report	XXX	XXX	Report	Report Daily Max	XXX	1/week	24-Hr Composite

Compliance Sampling Location: Outfall 001

Other Comments: None

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Outfall 001, Effective Period: Permit Effective Date through Permit Expiration Date.

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) ⁽¹⁾		Concentrations (mg/L)				Minimum ⁽²⁾ Measurement Frequency	Required Sample Type
	Average Monthly	Weekly Average	Minimum	Average Monthly	Weekly Average	Instant. Maximum		
Flow (MGD)	Report	Report Daily Max	XXX	XXX	XXX	XXX	Continuous	Recorded
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	1/day	Grab
CBOD ₅	104.3	156.4	XXX	25	38	50	1/week	24-Hr Composite
BOD ₅ Raw Sewage Influent	Report	Report Daily Max	XXX	Report	Report Daily Max	XXX	1/week	24-Hr Composite
TSS	125.1	187.6	XXX	30	45	60	1/week	24-Hr Composite
TSS Raw Sewage Influent	Report	Report Daily Max	XXX	Report	Report Daily Max	XXX	1/week	24-Hr Composite
Fecal Coliform (No./100 ml) Oct 1 - Apr 30	XXX	XXX	XXX	2000 Geo Mean	XXX	10000	1/week	Grab
Fecal Coliform (No./100 ml) May 1 - Sep 30	XXX	XXX	XXX	200 Geo Mean	XXX	1000	1/week	Grab
Total Nitrogen	XXX	XXX	XXX	XXX	Report Daily Max	XXX	1/quarter	24-Hr Composite
Total Phosphorus	XXX	XXX	XXX	XXX	Report Daily Max	XXX	1/quarter	24-Hr Composite
Total Aluminum	XXX	XXX	XXX	XXX	Report Daily Max	XXX	1/quarter	24-Hr Composite
Total Iron	XXX	XXX	XXX	XXX	Report Daily Max	XXX	1/quarter	24-Hr Composite
Total Manganese	XXX	XXX	XXX	XXX	Report Daily Max	XXX	1/quarter	24-Hr Composite

Compliance Sampling Location: Outfall 001

Other Comments: None