

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	<u>001</u>	Design Flow (MGD)	<u>.0005</u>
Latitude	<u>40° 23' 33.63"</u>	Longitude	<u>-75° 21' 19.84"</u>
Quad Name	_____	Quad Code	_____
Wastewater Description: <u>Sewage Effluent</u>			
Receiving Waters	<u>Unnamed Tributary of Butter Creek (HQ-TSF, MF)</u>	Stream Code	_____
NHD Com ID	<u>25992320</u>	RMI	_____
Drainage Area	_____	Yield (cfs/mi ²)	_____
Q ₇₋₁₀ Flow (cfs)	_____	Q ₇₋₁₀ Basis	_____
Elevation (ft)	_____	Slope (ft/ft)	_____
Watershed No.	<u>3-E</u>	Chapter 93 Class.	<u>HQ-TSF, MF</u>
Existing Use	_____	Existing Use Qualifier	_____
Exceptions to Use	_____	Exceptions to Criteria	_____
Assessment Status	<u>Attaining Use(s)</u>		
Cause(s) of Impairment	_____		
Source(s) of Impairment	_____		
TMDL Status	_____	Name	_____
Background/Ambient Data	_____	Data Source	_____
pH (SU)	_____		_____
Temperature (°F)	_____		_____
Hardness (mg/L)	_____		_____
Other:	_____		_____
Nearest Downstream Public Water Supply Intake _____			
PWS Waters	_____	Flow at Intake (cfs)	_____
PWS RMI	_____	Distance from Outfall (mi)	_____

Changes Since Last Permit Issuance:

Other Comments:

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.

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	Annual Average	Maximum	Instant. Maximum		
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/year	Grab
TRC	XXX	XXX	XXX	Report	XXX	XXX	1/month	Grab
CBOD5	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
TSS	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200	XXX	1000	1/year	Grab
Ammonia	XXX	XXX	XXX	3.0	XXX	6	1/year	Grab

Compliance Sampling Location: Outfall 001

Other Comments: None