Pennsylvania Department of Environmental Protection

Southcentral Regional Office
CLEAN WATER PROGRAM

Application Type	**Renewal**	Application No.	**PA0086134**
Wastewater Type	**Sewage**	APS ID	**1138713**
Facility Type	**SFTF**	Authorization ID	**1529587**

NPDES PERMIT FACT SHEET
INDIVIDUAL SFTF/SRSTP

Applicant, Facility and Project Information

Applicant Name	**Alicia & Justin Kerschner and David Schwien**	Facility Name	**904 & 906 Huffs Church Rd**
Applicant Address	906 and 904 Huffs Church Road Alburtis, PA 18011-2129	Facility Address	906 And 904 Huffs Church Road (Kerschner @ 906 / Schwein @ 904) Alburtis, PA 18011-2129
Applicant Contact	Alicia & Justin Kerschner	Facility Contact	Alicia & Justin Kerschner
Applicant Phone	(610) 349-4936 / afurst27@gmail.com	Facility Phone	(610) 349-4936 / afurst27@gmail.com
Client ID	393206	Site ID	237919
SIC Code	6514	Municipality	District Township
SIC Description	Fin, Ins & Real Est - Dwelling Operators, Except Apartments	County	Berks
Date Application Received	May 30, 2025	WQM Required	Existing WQM permit will be transferred
Date Application Accepted	June 13, 2025	WQM App. No.	0695402 T-3
Project Description	Renewal and transfer of individual permit for an existing SFTF		

Summary of Review

The existing permit was issued November 19, 2020, with an expiration date of November 30, 2025. The existing permit was administratively extended. The renewal and transfer applications were submitted to DEP's Public Upload system (Reference ID # 321229). The existing WQM permit will be transferred at the same time as the final NPDES permit is issued.

This Small Flow Treatment Facility (SFTF) serves two adjacent single-family residences, one at 904 Huffs Church Road and one at 906 Huffs Church Road. Planning Approval was issued October 12, 1993, for two residential lots with malfunctioning septic systems [M3-06929-023-3.s.]. The original Water Quality Management (WQM) permit #0695402 was issued February 15, 1995, for a design flow of 800 gpd.

The SFTF is not eligible for DEP's general permit, the PAG-04, because the treatment system's hydraulic loading rate (1.33 gpd/ft^2) is greater than that recommended in DEP's SFTF Manual (document 385-2188-005, which was first published in 2006) and there is no evidence that the system can meet the limits in the PAG-04. Also to note, (1) the downstream waterway has a designated use of Exceptional Value (EV), and (2) the 2015 Fact Sheet with the transferred WQM permit stated:

> "Apparently, it was determined during a site inspection that the sand filter was not far enough away from the well on the 906 Huffs Church lot. An impervious liner was recommended and installed, under the sand filter, to protect the well."

There is a TMDL for the downstream Green Lane Reservoir, for nutrients and low Dissolved Oxygen, but this sewage treatment facility is not assigned any Wasteload Allocations in the TMDL; nor is this facility designed to reduce Total Phosphorus. DEP's Standard Operating Procedure (SOP) 'New and Reissuance Small Flow Treatment Facility Individual NPDES Permit Applications' does not recommend Total Phosphorus or Dissolved Oxygen permit limits for SFTFs. The existing permit and the draft renewal permit do not include any limits for Total Phosphorus or for Dissolved Oxygen.

Approve	Deny	Signatures	Date
X		*Bonnie Boylan* Bonnie Boylan / Environmental Engineering Specialist	March 5, 2026
x		*Maria D. Bebenek* for Daniel W. Martin, P.E. / Environmental Engineer Manager	March 25, 2026

Summary of Review

Because DEP's PAG-04, Annual Maintenance Report (AMR) form, and SOP for SFTF Permits all specify $CBOD_5$ now instead of BOD_5, the draft renewal permit proposes to change the existing permit limits from BOD_5 to $CBOD_5$. The regulations [Title 25 Pa Code § 92a.47] require the following for sewage permits:

(a) Sewage… shall be given a minimum of secondary treatment. Secondary treatment for sewage is that treatment that includes significant biological treatment and accomplishes the following:
(1) Monthly average discharge limitation for BOD_5 and TSS may not exceed 30 milligrams per liter. If $CBOD_5$ is specified instead of BOD_5 the limitation may not exceed 25 milligrams per liter.

The existing permit limits for Total Suspended Solids (TSS), pH, and Fecal Coliform were carried forward to the draft renewal permit and are considered minimum requirements for sewage dischargers in accordance with Title 25 PA Code **§** 92a.47. (Whereas the regulations express the average limits for Fecal Coliform as a 'Geometric Mean', most NPDES individual permits issued for residential homes only require annual or semi-annual monitoring at a minimum. For this reason, the Bureau of Clean Water determined that the Statistical Base Code 'annual average' should be used.)

To note, DEP's SOP for SFTF Permits allows less stringent limits than those provided in the SOP and in the PAG-04 for the following: existing SFTFs that were permitted prior to publication of the SFTF Manual when such facilities are not capable of meeting tertiary treatment limits and have no documented compliance concerns.

Water Quality modeling was not conducted except for Total Residual Chlorine (TRC), consistent with DEP's SOP for SFTF Permits. DEP's TRC model did not indicate that the existing permit limits (technology-based limits of 0.5 mg/l as a monthly average and 1.6 mg/l as an Instantaneous Maximum) need to be changed. See the attached model results.

DEP Inspections

The most recent DEP inspection occurred on July 30, 2025. No violations were noted; however, the recommendations provided to the permittee included obtaining sample results for **all** parameters in the permit. Per the inspection report:

-"Each residence has two 1,000-gallon septic tanks."
-The discharge from the outfall appeared generally clear, with no accumulated suspended solids, foam, or scum.
-The receiving stream was clear upstream and downstream of the outfall.
-The filter surface was free of ponded water and free of accumulated solids.

Anti-backsliding

No limits in the draft renewal permit are less stringent than in the existing permit. .

Class A Wild Trout Fisheries

The receiving water is not considered Class A Wild Trout, as determined by the PA Fish and Boat Commission. .

Unresolved Violations

There are no outstanding violations against the existing permittees or the new applicants, according to DEP's Client History Summary Report. There are no unpaid annual fees for this permit according to DEP's Chapter 92a/NOI Annual Fees Unpaid report.

Delaware River Basin Commission

This facility discharges to a waterway within the Delaware River watershed. The fact sheet and draft permit will therefore be forwarded to the Delaware River Basin Commission (DRBC) in accordance with State regulations and an interagency agreement. Any comments by the DRBC will be considered.

Summary of Review
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.

Discharge, Receiving Waters and Water Supply Information

Outfall No.	001	Design Flow (MGD)	0.0008
Latitude	40Âº 27' 7.85" (40º 27' 6" existing permit)	Longitude	-75Âº 38' 36.59" (-75º 38' 37" existing permit)
Quad Name		Quad Code	
Wastewater Description:	Sewage Effluent		
Receiving Waters	West Branch Perkiomen Creek (Cold Water Fishes, CWF)	Stream Code	1439 (eMapPA)
NHD Com ID	25981074 (eMapPA)	RMI	14.7 (eMapPA)
Drainage Area	0.22 sq. mi., estimated	Yield (cfs/mi^2)	0.2
Q_{7-10} Flow (cfs)	0.04, estimated	Q_{7-10} Basis	USGS Stream Stats online tool
Elevation (ft)		Slope (ft/ft)	
Watershed No.	3-E (eMapPA)	Chapter 93 Class.	CWF, MF (eMapPA)
Existing Use	None (eMapPA)	Existing Use Qualifier	None (eMapPA)
Exceptions to Use	None (eMapPA)	Exceptions to Criteria	None (eMapPA)
Assessment Status	Impaired for Recreational Uses (assessment ID #18801)		
Cause(s) of Impairment	Pathogens		
Source(s) of Impairment	Unknown		
TMDL Status	None at 14.7 RMI but downstream there is a TMDL	Name	Green Lane Reservoir TMDL

Secondary Waters:

-West Branch Perkiomen Creek becomes **Exceptional Value** designated use between Huff Church Road (approx. 12.8 RMI) and Old Route 100 bridge at RMI 8.0.
- West Branch Perkiomen Creek empties into Perkiomen Creek (TSF) at RMI 23.5 and Green Lane Reservoir (TMDL for organic enrichment and low Dissolved Oxygen). Green Lane Reservoir was listed as impaired on the 1996 303(d) list, prepared in accordance with the Clean Water Act. Final TMDL date = 10/9/2003.
-Perkiomen Creek empties into the Schuylkill River.

Nearest Downstream Public Water Supply Intake	Aqua PA, Lower Merion		
PWS Waters	Perkiomen Creek	Flow at Intake (cfs)	
PWS RMI	Approx.. 1.2	Distance from Outfall (mi)	Approx. 37

Other Comments:

-the receiving stream was added to the 303(d) list of impaired waters in 2016
-the receiving stream is NOT considered Class A Wild Trout (per eMapPA)
-the receiving stream IS considered Trout Natural Reproduction (per eMapPA)

EXISTING PERMIT LIMITS, OUTFALL 001:

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day)		Concentrations (mg/L)					
	Annual Average	Average Weekly	Instant. Minimum	Annual Average (except as otherwise indicated)	Daily Maximum	Instant. Maximum	Minimum Measurement Frequency	Required Sample Type
Flow (MGD)	Report	XXX	XXX	XXX	XXX	XXX	2/year	Estimate
pH (S.U.)	XXX	XXX	6.0	XXX	XXX	9.0	2/year	Grab
TRC	XXX	XXX	XXX	0.5 Avg Monthly	XXX	1.6	1/month	Grab
BOD5	XXX	XXX	XXX	30.0	XXX	60.0	2/year	Grab
TSS	XXX	XXX	XXX	30.0	XXX	60.0	2/year	Grab
Fecal Coliform (No./100 ml) Oct 1 - Apr 30	XXX	XXX	XXX	2000	XXX	10000	1/year	Grab
Fecal Coliform (No./100 ml) May 1 - Sep 30	XXX	XXX	XXX	200	XXX	1000	1/year	Grab

Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s):

at Outfall 001

Proposed Effluent Limitations and Monitoring Requirements

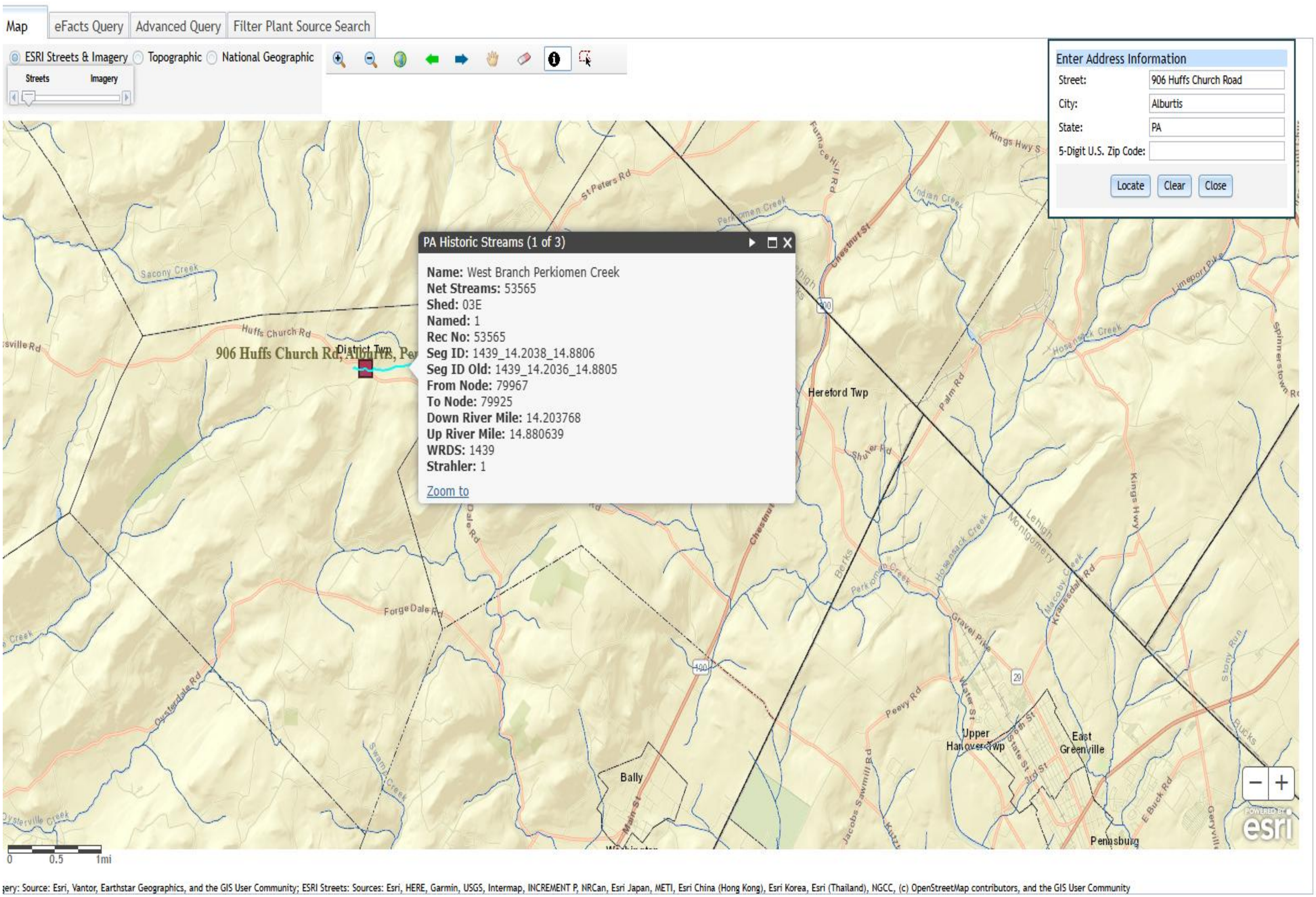
The limitations and monitoring requirements specified below are proposed for the draft permit, and reflect the most stringent limitations amongst technology, water quality as needed and Beset Professional Judgement (BPJ). Instantaneous Maximum (IMAX) limits are generally determined using multipliers 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.

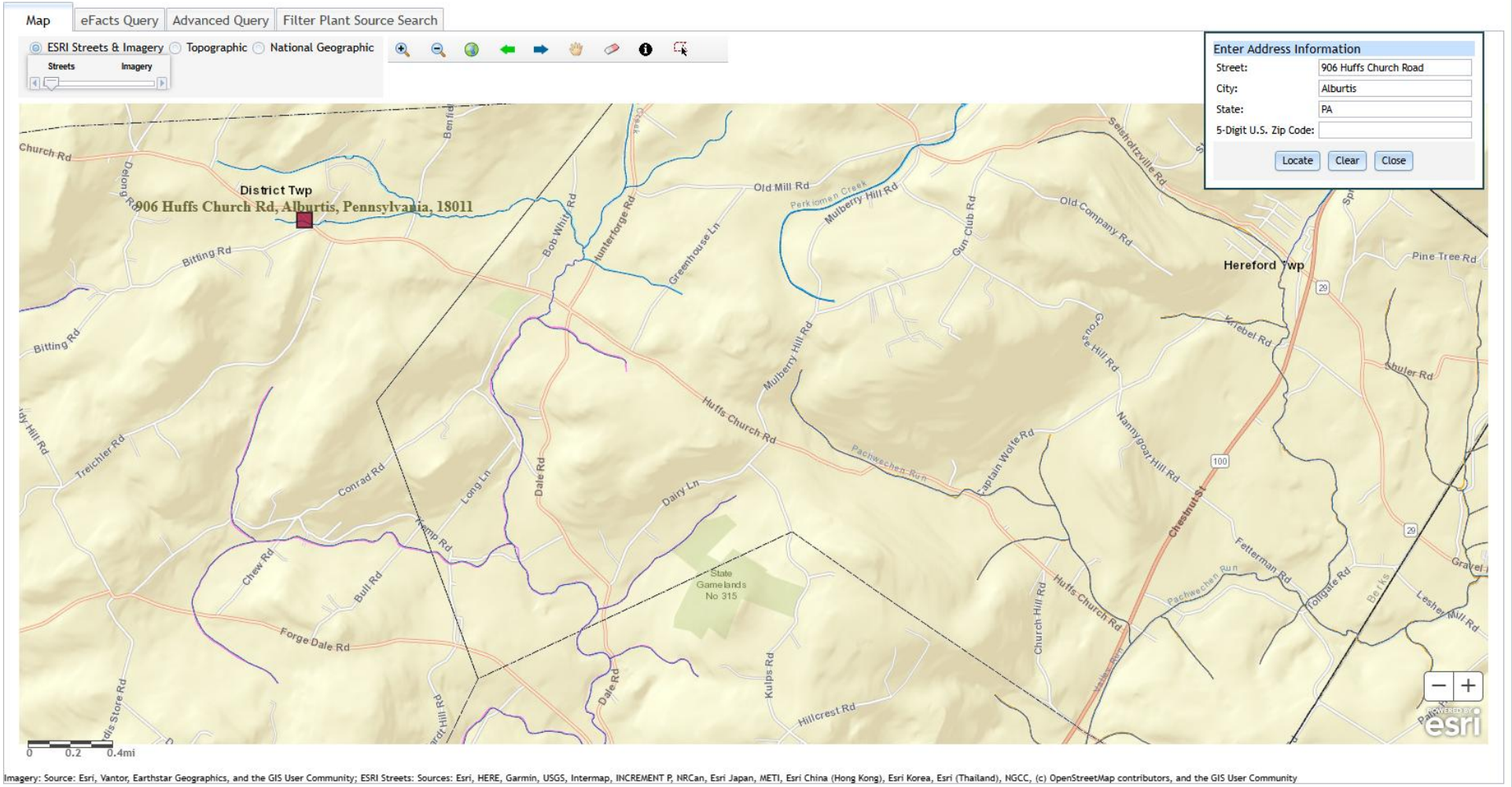
Outfall 001, Effective Period: Permit Effective Date through Permit Expiration Date.

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day)		Concentrations (mg/L)				Minimum Measurement Frequency	Required Sample Type
	Annual Average	Average Weekly	Instant. Minimum	Annual Average	Daily Maximum	Instant. Maximum		
Flow (MGD)	Report	XXX	XXX	XXX	XXX	XXX	2/year	Estimate
pH (S.U.)	XXX	XXX	6.0	XXX	XXX	9.0	2/year	Grab
Total Residual Chlorine	XXX	XXX	XXX	0.5 Avg Mo	XXX	1.6	1/month	Grab
Carbonaceous Biochemical Oxygen Demand ($CBOD_5$)	XXX	XXX	XXX	25.0	XXX	50.0	2/year	Grab
Total Suspended Solids	XXX	XXX	XXX	30.0	XXX	60.0	2/year	Grab
Fecal Coliform (No./100 ml) Oct 1 - Apr 30	XXX	XXX	XXX	2000	XXX	10,000	1/year	Grab
Fecal Coliform (No./100 ml) May 1 - Sep 30	XXX	XXX	XXX	200	XXX	1000	1/year	Grab

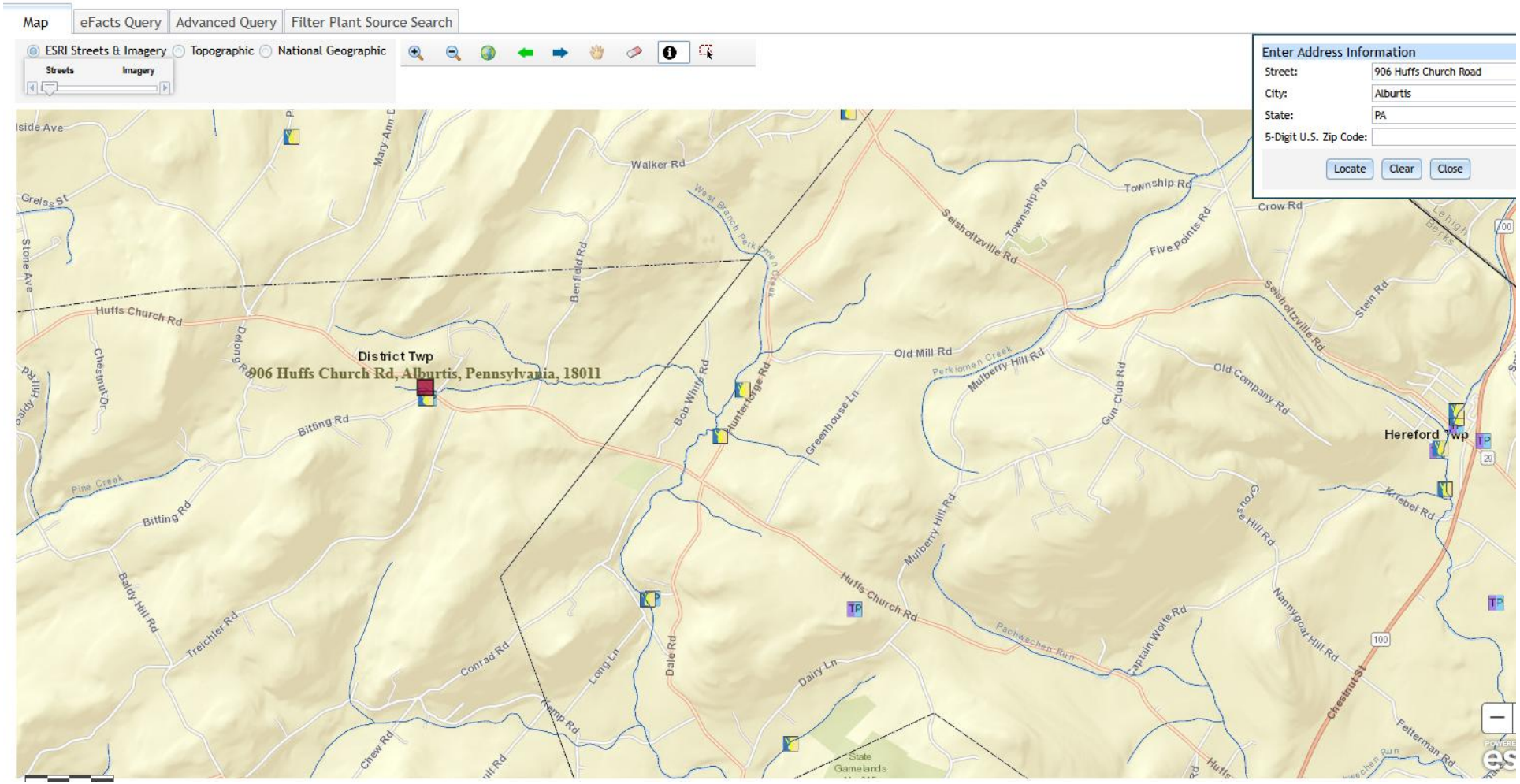
Samples taken in compliance with the monitoring requirements specified above shall be taken at the following location(s):

at Outfall 001


Map
eFacts Query
Advanced Query
Filter Plant Source Search
ESRI Streets & Imagery
Topographic
National Geographic
Streets
Imagery
Enter Address Information
Street: 906 Huffs Church Road
City: Alburtis
State: PA
5-Digit U.S. Zip Code:
Locate
Clear
Close
PA Historic Streams (1 of 3)
Name: West Branch Perkiomen Creek
Net Streams: 53565
Shed: 03E
Named: 1
Rec No: 53565
Seg ID: 1439_14.2038_14.8806
Seg ID Old: 1439_14.2036_14.8805
From Node: 79967
To Node: 79925
Down River Mile: 14.203768
Up River Mile: 14.880639
WRDS: 1439
Strahler: 1
Zoom to
906 Huffs Church Rd
Huffs Church Rd
Sacony Creek
St Peters Rd
Hereford Twp
Forge Dale Rd
Bally
Upper Hanover Twp
East Greenville
Pennsburg
Kings Hwy S
Chestnut St
Palm Rd
Gravel Pike
Peevy Rd
0 0.5 1mi
esri
ery: Source: Esri, Vantor, Earthstar Geographics, and the GIS User Community; ESRI Streets: Sources: Esri, HERE, Garmin, USGS, Intermap, INCREMENT P, NRCan, Esri Japan, METI, Esri China (Hong Kong), Esri Korea, Esri (Thailand), NGCC, (c) OpenStreetMap contributors, and the GIS User Community



Purple waterway denotes EV water (Exceptional Value)



Three other point source discharges are shown on eMapPA discharging to the impaired segment of West Branch Perkiomen Creek:

- PAG043547, treated sewage, active
- PAG043604, treated sewage, active
- PA0055352, treated sewage, active, Woodland Mobile Home Park, south of Huffs Church Road, at lower end of impaired segment

Excerpt from Green Lane Reservoir TMDL:

Table 4-5. Individual Wasteload allocations of total phosphorus for Green Lane Reservoir

Point Source	NPDES permit no.	Design Flow (mgd)	Total Phosphorus concentration (mg/l)	WLA (lbs/day)	WLA (lbs/month)
Main Branch Perkiomen Subwatershed					
Brown Printing	PA0051802	0.0116	0.5	0.048	1.45
East Greenville Filtration	PA0050644	0	0	0	0
Hereford Mobile Home Park	PA0041505	0.125	0.5	0.52	15.63
Knoll, Inc.	PA0011070	0.0279	0.5	0.116	3.49
Mountain Village Mobile Home Park	PA0041491	0.064	0.5	0.27	8
TTT Realty	PA0012891	0.0088	0.5	0.037	1.1
			Main Branch Perkiomen subwatershed total		29.7
West Branch Perkiomen Subwatershed					
Bally Borough	PA0055123	0.5	0.5	2.08	62.55
Strawberry Family Restaurant	PA0053376	0.0015	0.5	0.006	0.19
Washington Township.	PA0086142	0.25	0.5	1.04	31.27
Woodland Mobile Home Park	PA0055352	0.014	0.5	0.059	1.75
			West Branch Perkiomen subwatershed total		95.8
Direct Drainage Subwatershed					
Green Hills Mobile Home Park	PA0031887	0.03	0.5	0.13	3.75
Upper Perkiomen School District	PA0050911	0.004	0.5	0.017	0.5
			Direct Drainage subwatershed total		4.25
Direct Drainage (Urban) Subwatershed					
Edmund Optics	PA0053864	0	0	0	0
Upper Montgomery Joint Authority	PA0020532	2	0.5	8.34	250.2
			Direct Drainage (urban) subwatershed		250.2

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pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

ANNUAL MAINTENANCE REPORT (AMR)
SMALL FLOW TREATMENT FACILITIES

REPORTING PERIOD: 2024 to 2025

GENERAL INFORMATION

Permittee: Alicia Kerschner / David Schuler
Permit No.: PA0086134
Address: 906 and 904 Huffs church Rd.
Albutis, PA 18011
Municipality: District Twp
County: Berks
Phone: 610-349-4936
Email Address: afurst27@gmail.com

This SFTF Serves (a): ☐ Single Home ☐ ~~Multiple~~ 2 Homes ☐ Commercial Establishment ☐ Other

No. of People Served by SFTF: ____ SFTF Use Frequency: ☒ Daily ☐ Periodic (Describe: ____)

☐ The permittee intends to continue operating under the PAG-04 General Permit in the next calendar year.

MONTHLY MONITORING AND MAINTENANCE

Parameter	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
TRC (mg/L)			.3	.3	.3	.4	.4	.4	.3	.3	.3	.3
Tablet Added	☐	☐	☐	☒	☐	☐	☐	☐	☐	☐	☐	☐
UV Lamp	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
UV Cleaned	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
$CBOD_5$ (mg/L)												
pH (S.U.)			6.9	6.9	6.8	7.1	7.1	7.0	7.0	7.0	6.9	7.0
TSS (mg/L)												
Fecal Coliform (No./100 mL)												
Flow (GPD)	NA											

Refer to AMR Instructions (3800-PM-BCW0093f) for instructions on completing this table.

Comments (attach additional sheets if necessary):

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ANNUAL INSPECTION AND MAINTENANCE

A Service Provider must perform the following inspections and provide a description of the observations made in the table provided below. Check the box where indicated if the inspection and maintenance was completed by a Service Provider. If there was more than one service provided during the period, or more than one Service Provider was used for inspections, include all inspection results with the AMR.

Treatment Unit	Inspected? (1)	Pumped? (2)	Comments (3)
Septic Tank(s) (Number: 4)	☑	☐	Tanks pumped recently, in good cond.
Aerobic Tank	☒	☐	
Dosing Tank	☑	☐	Pumped recently

Filtration System	Inspected? (4)	Cleaned/Replaced?	Comments (3)
Subsurface	☒	N/A	
Recirculating	☐	N/A	
Accessible	☑	☑	Homeowner cleans 2X/yr
Other (_____)	☐	☐	

Disinfection	Inspected?	Serviced? (5)	Comments (3)
Chlorinator	☑	☐	Homeowner adds as needed
Dechlorinator	☐	☐	
Ultraviolet (UV)	☐	☐	

(1) For septic tanks, the depth of septage and scum in the treatment units must be measured at least once per year, unless the tanks are pumped annually. Inspections of treatment units should include an evaluation of the condition of baffles, pumps, aerators, high level alarms and other mechanical equipment, as applicable. Following tank pumping, all interior surfaces should be inspected for leaks and cracks using a strong light. Note that the tanks will contain toxic gases and therefore only a properly equipped, trained and experienced person should attempt to enter or repair a tank if necessary. **Homeowners should not enter tanks.**

(2) Whenever the top of the sludge layer in the tank or any compartment of the tank is found to be less than 12 inches below the bottom of the outlet baffle, or if the bottom of the scum layer is within three inches of the outlet baffle, the tank must be pumped. At a minimum, septic tanks must be pumped out once every three years so that an inspection of the interior of the tanks may be made. Dosing tanks must be pumped if solids are observed that could reduce the performance of downstream treatment units. Aerobic tanks should be pumped when recommended by the manufacturer or a Service Provider. **Attach to the AMR documentation that tank(s) have been pumped, if applicable.**

(3) Use the space provided and/or attach additional sheet(s) to explain the components checked during the inspection.

(4) If ponding is noted on the sand filter, note this in the comments and explain corrective action taken.

(5) Place a checkmark in the box for "Serviced?" if chlorinator or dechlorinator tablets were added during the inspection. For UV, check the box if the contact surface was cleaned and/or the UV bulb(s) were replaced during the inspection.

Other Items Inspected or Comments by Service Provider (attach additional sheets if necessary):

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SERVICE PROVIDER CERTIFICATION

I certify under penalty of law that I have personally performed the inspection of the SFTF named herein, and that I meet the criteria for a Service Provider as defined in the permittee's permit. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Robert Laubach
Name of Service Provider

Signature

267 897-7536
Telephone No.

5-28-25
Date

Winding Creek Septic
Company Name (if applicable)

PERMITTEE CERTIFICATION

FOR PAG-04 PERMITTEES: I have read the latest PAG-04 General Permit issued by DEP and agree and certify that (1) the permittee continues to be eligible for coverage under the PAG-04 General Permit and (2) the permittee will continue to comply with the conditions of the General Permit, including any modifications thereto. I understand that if I do not agree to the terms and conditions of the PAG-04 General Permit, I will apply for an individual permit within 90 days of publication of the General Permit. I also acknowledge that any facility construction needed to comply with the General Permit requirements shall be designed, built, operated, and maintained in accordance with operative laws and regulations.

FOR ALL PERMITTEES: I certify under penalty of law that this report was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Alicia Kerschner
Responsible Official Name

Signature

610-349-4936
Telephone No.

5/28/25
Date

MICROBAC®

Microbac Laboratories, Inc., Pittston Division

CERTIFICATE OF ANALYSIS

T5E1696

Schuler Service, Inc.

Matt Mellinger
1314 Tilghman ST
Allentown, PA 18102

Project Name: Justin Kerschner

Project / PO Number: MB-
Received: 05/13/2025
Reported: 05/28/2025

Analytical Testing Parameters

Client Sample ID: Justin Kerschner - 906 Huffs Church Rd. Alburtis, PA 18011
Sample Matrix: Aqueous
Lab Sample ID: T5E1696-01
Collected By: Client
Collection Date: 05/13/2025 9:00

Microbiology	Result	Limit(s)	RL	Units	Note	Prepared	Analyzed	Analyst
Method: SM 9223 B (Colilert-18 Quanti-Tray)-2016								
Fecal coliforms	<1		1	MPN/100mL		05/13/25 1607	05/14/25 1031	JXC

Results in bold have exceeded a limit defined for this project. Limits are provided for reference but as regulatory limits change frequently, Microbac Laboratories, Inc. advises the recipient of this report to confirm such limits and units of concentration with the appropriate Federal, state or local authorities before acting on the data.

Definitions

MCL: US EPA Maximum Contaminant Level
MPN/100mL: Most Probable Number per 100 Milliliters
RL: Reporting Limit

Project Requested Certification(s)

Microbac Laboratories, Inc., Pittston Division
35-05082 Pennsylvania Department of Environmental Protection

Report Comments

Samples were received in proper condition and the reported results conform to applicable accreditation standard unless otherwise noted.

The data and information on this, and other accompanying documents, represents only the sample(s) analyzed. This report is incomplete unless all pages indicated in the footnote are present and an authorized signature is included. ***The services were provided under and subject to Microbac's standard terms and conditions which can be located and reviewed at <https://www.microbac.com/standard-terms-conditions>.***

Reviewed and Approved By:

Shanna Nish
Customer Relationship Specialist
Reported: 05/28/2025 15:49

Only sampled for Fecal Coliform, lab results not provided for pH, TRC, CBOD5, TSS

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

ANNUAL MAINTENANCE REPORT (AMR)
SMALL FLOW TREATMENT FACILITIES

Reporting Period: June 1, _____ to May 31, _____

Name: ~~David R. Miller~~ Alicia Kerschner & David Schwien
Address: 906 & 904 Huffs Church Road
Alburtis, PA 18011-2129
Phone: ~~(267) 371-0593~~ 610-349-4936
Permit No.: PA0086134
Municipality: District Township
County: Berks
Email Address: ~~Pepxmas@gmail.com~~ afurst27e gmail.com

This SFTF Serves (a): ☐ Single Home ☒ Multiple Homes ☐ Commercial Establishment ☐ Other
No. of People Served by SFTF: _____ SFTF Use Frequency: ☒ Daily ☐ Periodic (Describe: _____)

Submission of a complete AMR by June 30 of each year is a requirement of the NPDES PAG-04 General Permit and most individual NPDES permits for small flow treatment facilities (SFTFs). AMRs must be mailed to the DEP office identified below and, if required by the permit, to the municipality in which the facility is located.

MONTHLY MONITORING AND MAINTENANCE

For SFTFs covered by the PAG-04 General Permit, record effluent monitoring data in the table below. For SFTFs covered by individual NPDES permits in which a Discharge Monitoring Report (DMR) has been issued with the permit, this table may remain blank and effluent monitoring results must be reported on a DMR that is submitted to the DEP office identified below.

Effluent Monitoring Data												
Parameter	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
TRC (1)	.4	.4	.4	.3	.3	.3	.3			.3	.3	.3
UV (2)												
BOD5 (3)												
pH (S.U.) (3)	6.9	6.8	7.1	7.1	7.0	7.0	7.0					6.9
TSS (3)												
Fecal Coliform (No./100 mL) (3)												
Flow (GPD) (3)	N/A											

(1) If the SFTF uses chlorine for disinfection, Total Residual Chlorine (TRC) must be monitored monthly, at a minimum. Collect an effluent sample after chlorination (and if applicable after dechlorination). If the TRC result is within the range of 0.3 mg/L to 0.5 mg/L, record the reading in the appropriate month column. If the TRC result is outside of this range, perform corrective action (e.g., add chlorine tablets or other measures) and resample on subsequent days until the result is within the range of 0.3 mg/L to 0.5 mg/L. Report the ultimate result for each month in the table.

(2) If ultraviolet light (UV) is used for disinfection, place a checkmark in the field if the UV contact surface was cleaned during the month. If the permit does not require contact surface cleaning, write "N/A" in the fields.

(3) For BOD5, pH, TSS, Fecal Coliform, and Flow, record results in this table if DEP requested that a sample be collected and analyzed by a laboratory, if samples or measurements were collected voluntarily, or otherwise if the permit requires such monitoring on a routine basis and does not include a DMR.

Comments (attach additional pages if necessary):

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ANNUAL INSPECTION AND MAINTENANCE

A service provider must perform the following inspections and provide a description of the observations made in the table provided below. Check the box where indicated if the inspection and maintenance was completed by the service provider. If there was more than one service provided during the period, or more than one service provider was used for inspections, include all inspection results with the AMR.

Treatment Units

Type	Inspected? (1)	Pumped? (2)	Comments (3)
Septic Tank(s) (Number: ___)	☐	☐	
Aerobic Tank	☐	☐	
Dosing Tank	☐	☐	

Sand Filters

Type	Inspected? (4)	Raked?	Comments (3)
Subsurface	☐	N/A	
Recirculating	☐	N/A	
Accessible	☐	☐	

Disinfection

Type	Inspected?	Serviced? (5)	Comments (3)
Chlorinator	☐	☐	
Dechlorinator	☐	☐	
Ultraviolet (UV)	☐	☐	

(1) For septic tanks, the depth of septage and scum in the treatment units must be measured at least once a year. The inspection should include an evaluation of the condition of baffles, pumps, aerators, high level alarms and other mechanical equipment, as applicable. Following tank pumping, all interior surfaces should be inspected for leaks and cracks using a strong light. Note that the tanks will contain toxic gases and therefore only a properly equipped, trained and experienced person should attempt to enter or repair a tank if necessary. **The homeowner should not enter tanks.**

(2) Aerobic tanks and dosing tanks should be pumped annually. Septic tanks should be pumped every three years or anytime the top of the sludge layer in any compartment of the unit is found to be less than 12 inches below the bottom of the outlet baffle, or if the bottom of the scum layer is within 3 inches of the outlet baffle (annual pumping may be substituted for measurement). **Attach to the AMR documentation from the company that the tank(s) have been pumped.**

(3) Use the space provided and/or include a separate sheet to explain the components checked during the inspection.

(4) If ponding is noted on the sand filter, note this in the comments and explain corrective action taken.

(5) Place a checkmark in the box for "Serviced?" if chlorinator or dechlorinator tablets were added. For UV, check the box if the contact surface was cleaned and the UV bulb(s) were replaced.

Other Items Inspected or Comments by Service Provider (attach additional pages if necessary):

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SERVICE PROVIDER CERTIFICATION	
I certify under penalty of law that I have personally performed the inspection of the SFTF named herein. The information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).	
Name of Inspector	Signature
Telephone No.	Date
Company Name (if applicable)	

PERMITTEE CERTIFICATION	
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).	
Alicia Kerschner	Signature
Responsible Official Name	
610-349-4936	9/11/2025
Telephone No.	Date

Mail this completed Annual Maintenance Report to your local municipality (if required by the permit) and the appropriate DEP office or county health department:

County Where SFTF Is Located:	DEP Office Where AMR Should Be Mailed:
Bucks, Chester, Delaware, Montgomery, and Philadelphia	DEP SERO, Clean Water Program 2 E. Main Street Norristown, PA 19401-4915
Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne and Wyoming	DEP NERO, Clean Water Program 2 Public Square, Wilkes-Barre, PA 18701-1915
Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, and York	DEP SCRO, Clean Water Program 909 Elmerton Ave., Harrisburg, PA 17110
Bradford, Cameron, Centre, Clearfield, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga and Union	DEP NCRO, Clean Water Program 208 West Third St., Suite 101, Williamsport, PA 17701
Allegheny, Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington, and Westmoreland	DEP SWRO, Clean Water Program 400 Waterfront Dr., Pittsburgh, PA 15222
Butler, Clarion, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, Warren	DEP NWRO, Clean Water Program 230 Chestnut St., Meadville, PA 16335
Allegheny	ACHD, Frank B. Clack Health Center Building #5, 40th St. & Penn Avenue Pittsburgh, PA 15224-1347
Erie	ECDH, Environmental Health Services 606 West Second St., Erie, PA 16507

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StreamStats Report

Region ID:	PA
Clicked Point (Latitude, Longitude):	40.45214, -75.64301
Time:	2026-03-04 15:48:59 -0500

Low-Flow Statistics

Low-Flow Statistics Parameters [Low Flow Region 1]

Parameter Code	Parameter Name	Value	Units	Min Limit	Max Limit
BSLOPD	Mean Basin Slope degrees	6.4341	degrees	1.7	6.4
DRNAREA	Drainage Area	0.22	square miles	4.78	1150
ROCKDEP	Depth to Rock	5.1	feet	4.13	5.21
URBAN	Percent Urban	0.156	percent	0	89

Low-Flow Statistics Disclaimers [Low Flow Region 1]

One or more of the parameters is outside the suggested range. Estimates were extrapolated with unknown errors.

Low-Flow Statistics Flow Report [Low Flow Region 1]

Statistic	Value	Unit
7 Day 2 Year Low Flow	0.0869	ft^3/s
30 Day 2 Year Low Flow	0.103	ft^3/s
7 Day 10 Year Low Flow	0.0406	ft^3/s
30 Day 10 Year Low Flow	0.0509	ft^3/s
90 Day 10 Year Low Flow	0.0686	ft^3/s

Low-Flow Statistics Citations

Stuckey, M.H.,2006, Low-flow, base-flow, and mean-flow regression equations for Pennsylvania streams: U.S. Geological Survey Scientific Investigations Report 2006-5130, 84 p.

Application Version: 4.31.1
SSHydro Services Version: 1.1.1
SSDelineate Services Version: 1.0.1
NSS Services Version: 2.2.1
GageStats Services Version: 1.2.1
Pourpoint Services Version: 1.2.0
Batch Processor Version: 1.6.1

A	B	C	D	E	F	G

TRC EVALUATION

Input appropriate values in A3:A9 and D3:D9

0.04	= Q stream (cfs)	0.5	= CV Daily
0.0008	= Q discharge (MGD)	0.5	= CV Hourly
30	= no. samples	1	= AFC_Partial Mix Factor
0.3	= Chlorine Demand of Stream	1	= CFC_Partial Mix Factor
0	= Chlorine Demand of Discharge	15	= AFC_Criteria Compliance Time (min)
0.5	= BAT/BPJ Value	720	= CFC_Criteria Compliance Time (min)
0	= % Factor of Safety (FOS)		=Decay Coefficient (K)

Source	Reference	AFC Calculations	Reference	CFC Calculations
TRC	1.3.2.iii	WLA afc = 10.329	1.3.2.iii	WLA cfc = 10.063
PENTOXSD TRG	5.1a	LTAMULT afc = 0.373	5.1c	LTAMULT cfc = 0.581
PENTOXSD TRG	5.1b	LTA_afc= 3.849	5.1d	LTA_cfc = 5.850

Source		Effluent Limit Calculations	
PENTOXSD TRG	5.1f	AML MULT = 1.231	
PENTOXSD TRG	5.1g	AVG MON LIMIT (mg/l) = 0.500	BAT/BPJ
		INST MAX LIMIT (mg/l) = 1.635	

WLA afc	**(.019/e(-k*AFC_tc)) + [(AFC_Yc*Qs*.019/Qd*e(-k*AFC_tc))...** **...+ Xd + (AFC_Yc*Qs*Xs/Qd)]*(1-FOS/100)**
LTAMULT afc	EXP((0.5*LN(cvh^2+1))-2.326*LN(cvh^2+1)^0.5)
LTA_afc	wla_afc*LTAMULT_afc
WLA_cfc	**(.011/e(-k*CFC_tc) + [(CFC_Yc*Qs*.011/Qd*e(-k*CFC_tc))...** **...+ Xd + (CFC_Yc*Qs*Xs/Qd)]*(1-FOS/100)**
LTAMULT_cfc	EXP((0.5*LN(cvd^2/no_samples+1))-2.326*LN(cvd^2/no_samples+1)^0.5)
LTA_cfc	wla_cfc*LTAMULT_cfc
AML MULT	EXP(2.326*LN((cvd^2/no_samples+1)^0.5)-0.5*LN(cvd^2/no_samples+1))
AVG MON LIMIT	MIN(BAT_BPJ,MIN(LTA_afc,LTA_cfc)*AML_MULT)
INST MAX LIMIT	**1.5*((av_mon_limit/AML_MULT)/LTAMULT_afc)**