

Application Type Renewal
 Facility Type Non-Municipal
 Major / Minor Minor

**NPDES PERMIT FACT SHEET
INDIVIDUAL SEWAGE**

Application No. PA0094544
 APS ID 1110535
 Authorization ID 1478789

Applicant and Facility Information

Applicant Name	<u>Leskinen Enterprises Inc.</u>	Facility Name	<u>Somerfield South Recreation Area STP</u>
Applicant Address	<u>151 Tent Church Road</u> <u>Uniontown, PA 15401-6801</u>	Facility Address	<u>140 Marina Drive</u> <u>Addison, PA 15411-2267</u>
Applicant Contact	<u>Dianna Rhoades</u>	Facility Contact	<u>Dianna Rhoades</u>
Applicant Phone	<u>(724) 984-6255</u>	Facility Phone	<u></u>
Client ID	<u>168793</u>	Site ID	<u>244489</u>
Ch 94 Load Status	<u>Not Overloaded</u>	Municipality	<u>Addison Township</u>
Connection Status	<u></u>	County	<u>Somerset</u>
Date Application Received	<u>March 29, 2024</u>	EPA Waived?	<u>Yes</u>
Date Application Accepted	<u></u>	If No, Reason	<u></u>
Purpose of Application	<u>Permit Renewal</u>		

Summary of Review

Applicant requests renewal of an NPDES permit to discharge treated sewage from Somerfield South Recreation Area STP which is a small flow treatment facility.

The treatment process consists of septic tanks, dosing tank, sand filter and chlorination. No upgrades are proposed at this renewal.

Since there have been no changes to the receiving stream, discharge, influent characteristics etc. the existing limitations are carried over to the draft permit. This discharge is directly to the Youghiogheny River Reservoir.

Review shows that the discharge is in compliance with the permit limitations. No open violations associated with this facility. No other comments received from Operations Section.

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		<i>Sara Abraham</i> Sara Reji Abraham, E.I.T. / Project Manager	May 25, 2024
X		<i>Pravin Patel</i> Pravin C. Patel, P.E. / Environmental Engineer Manager	05/28/2024

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	<u>001</u>	Design Flow (MGD)	<u>.00135</u>
Latitude	<u>39° 44' 55.46"</u>	Longitude	<u>-79° 23' 40.32"</u>
Quad Name	<u>Ohiopyle</u>	Quad Code	<u>2010</u>
Wastewater Description: <u>Treated Sewage Effluent</u>			
Receiving Waters	<u>Youghiogheny River Reservoir (WWF)</u>	Stream Code	<u>37456</u>
NHD Com ID	<u>69923265</u>	RMI	<u>N.A.</u>
Drainage Area	<u>434 sq.mi.</u>		
Q7-10 Flow (cfs)	<u>Discharge to reservoir (lake)</u>		
Watershed No.	<u>19-E</u>	Chapter 93 Class.	<u>WWF</u>
Assessment Status	<u>Attaining Use(s)</u>		

Treatment Facility Summary				
Treatment Facility Name: Somersfield South Recreation Area STP				
Waste Type	Degree of Treatment	Process Type	Disinfection	Avg Annual Flow (MGD)
Sewage	Secondary	Septic tank-sand filter	chlorination	0.00135
Hydraulic Capacity (MGD)	Organic Capacity (lbs/day)	Load Status	Biosolids Treatment	Biosolids Use/Disposal
0.00135		Not Overloaded	None	Other WWTP

Changes Since Last Permit Issuance: None

Compliance History

DMR Data for Outfall 001 (from April 1, 2023 to March 31, 2024)

Parameter	MAR-24	FEB-24	JAN-24	DEC-23	NOV-23	OCT-23	SEP-23	AUG-23	JUL-23	JUN-23	MAY-23	APR-23
Flow (MGD) Average Monthly						0.00100	0.0010	0.00100	0.00100	0.00100	0.00100	
pH (S.U.) Instantaneous Minimum						7.09	6.97	7.18	7.14	6.98	6.88	
pH (S.U.) Instantaneous Maximum						7.21	7.27	7.33	7.43	7.39	6.99	
TRC (mg/L) Average Monthly						0.11	0.08	0.09	0.13	0.03	0.01	
CBOD5 (mg/L) Average Monthly						11.50	3.0	14.2	3.0	3.0	3.0	
CBOD5 (mg/L) Instantaneous Maximum						11.50	3.0	14.2	3.0	3.0	3.0	
TSS (mg/L) Average Monthly						3.0	3.0	3.0	3.0	3.0	3.0	
TSS (mg/L) Instantaneous Maximum						3.0	3.0	3.0	3.0	3.0	3.0	
Fecal Coliform (No./100 ml) Geometric Mean						1.0	1.0	5.0	1.0	1.0	1.0	
Fecal Coliform (No./100 ml) Instantaneous Maximum						1.0	1.0	5.0	1.0	1.0	1.0	

Development of Effluent Limitations

Outfall No. <u>001</u>	Design Flow (MGD) <u>.00135</u>
Latitude <u>39° 45' 2.00"</u>	Longitude <u>-79° 23' 38.00"</u>
Wastewater Description: <u>Treated Sewage Effluent</u>	

Technology-Based Limitations

The following technology-based limitations apply, subject to water quality analysis and BPJ where applicable:

Pollutant	Limit (mg/l)	SBC	Federal Regulation	State Regulation
CBOD ₅	25	Average Monthly	133.102(a)(4)(i)	92a.47(a)(1)
	40	Average Weekly	133.102(a)(4)(ii)	92a.47(a)(2)
Total Suspended Solids	30	Average Monthly	133.102(b)(1)	92a.47(a)(1)
	45	Average Weekly	133.102(b)(2)	92a.47(a)(2)
pH	6.0 – 9.0 S.U.	Min – Max	133.102(c)	95.2(1)
Fecal Coliform (5/1 – 9/30)	200 / 100 ml	Geo Mean	-	92a.47(a)(4)
Fecal Coliform (5/1 – 9/30)	1,000 / 100 ml	IMAX	-	92a.47(a)(4)
Fecal Coliform (10/1 – 4/30)	2,000 / 100 ml	Geo Mean	-	92a.47(a)(5)
Fecal Coliform (10/1 – 4/30)	10,000 / 100 ml	IMAX	-	92a.47(a)(5)
Total Residual Chlorine	0.5	Average Monthly	-	92a.48(b)(2)

The following limits are based on the original pollution report:

Pollutant	Limit (mg/l)	SBC	Comment
CBOD ₅	25	Avg.Monthly	*From original pollution report Based on the guidance (policy), discharges to lake & Impoundments
TSS	30	Avg. Monthly	
Fecal Coliform (5/1 – 9/30)	200/100ml	Geo Mean	
Fecal Coliform (10/1 – 4/30)	2000/100 ml	Geo Mean	
pH	6.0 to 9.0 S.U.		
TRC**	1.4 /3.3	Avg.Monthly/ IMax	

*All these existing limits are recommended to continue in the draft permit

** Existing Technology limit is recommended to continue in the draft permit.

See the attached original pollution report for reference.

Anti-Backsliding

N/A

POLLUTION REPORT

(I) Project Description New Discharge Change
Existing Discharge Preliminary

A. NPDES Application/Permit No. PA0094544
 Part II Permit Nos. _____

B. Applicant, Case Name or Permittee: V.S. Army Corps of Engineers.
 Municipality: ADDISON TWP
 County: SOMERSET

C. Type Waste D. Source and characteristics
 Sewage RECREATIONAL DOMESTIC SEWAGE
 Industrial SOMERFIELD SOUTH AREA
 Mine

E. USGS Quad: OHIO PYLE

F. Latitude (or in. N) 39° 45' 02"
 Longitude (or in. W) 79° 23' 38"

(II) Water Uses and Criteria

A. Receiving waters YOUNGHOHENY RIVER RESERVOIR Stream code 37456
 Chapter 93 classification WARM WATER R.M.I. _____
 D.A. 434 sq.mi. Yield _____ cfs/sq.mi.
 Flow _____ cfs. Based on data from _____
 Elevation 1493 ft.

Exceptions to standard water use lists: WWF Water Quality Criteria-Exceptions to Specific Criteria:
 Add _____ Add TEMP1
 Delete None Delete TEMP2

Impoundment RESERVOIR
 Special Downstream Uses: RECREATION, BOATING

B. Secondary Waters MONONGAHELA RIVER R.M.I. _____
 Distance from discharge _____ mi. Ch. 93 classification WWF
 D.A. _____ sq.mi. Yield _____ cfs/sq.mi.
 Flow _____ cfs. Based on data from _____
 Elevation _____ ft. Stream Code 37185

Exceptions to standard water use lists: _____ Water Quality Criteria-Exceptions to Specific Criteria:
 Add _____ Add _____
 Delete _____ Delete _____

Impoundment _____
 Special Downstream Uses: _____
 Downstream PWS: location _____
 distance from discharge _____ mi. intake _____ mgd.
 stream flow at intake _____ cfs.

III. Effluent Limitations:

A. Outfall 001

B. Discharge Volume .00135

Parameter (Sewage) (Industrial Waste)	lbs/day			mg/l		
	Monthly Avg. Daily Avg.	Weekly Avg.	Daily Max. Daily Max.	Monthly Avg. Daily Avg.	Weekly Avg. Daily Max.	Instan. Max. Instan. Max.
1. CBOD ₅				25		50
2. TSS				30		60
3. FECAL COLIFORMS						
4. (5/1 TO 9/30)				200/100 mL		
5. (10/1 TO 4/30)				2000/100 mL		
6. PH				6.0 TO		9.0
7. TRC				1.4		3.3
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						
16.						

Effluent Limitation Rational

1. EPA Guidelines _____
2. Regulation: GUIDANCE (POLICY) DISCHARGES TO LAKE & IMPOUNDMENTS
3. Water Quality Criteria CHAPTER 93
IMPOSE B.A.T FROM POLICY

Approvals

Reviewer Planning/WQ Rory Lattin ^{REF 10/18/07 11/7/02} _{REF RENEWAL} Date 9/24/96

Geologist or Aquatic Biologist _____ Date _____

Chief Planning/WQ J.P. Balta _{RENEWAL SEP 11/14/02} _{07 Renewal NG 11/21/07} Date 10/1/96

PL-28
(Rev. 7/22/92)

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: 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	Average Monthly	Maximum	Instant. Maximum		
Flow (MGD)	Report	XXX	XXX	XXX	XXX	XXX	1/month	Measured
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	1/month	Grab
TRC	XXX	XXX	XXX	0.5	XXX	1.6	1/month	Grab
CBOD5	XXX	XXX	XXX	25.0	XXX	50.0	1/month	Grab
TSS	XXX	XXX	XXX	30.0	XXX	60.0	1/month	Grab
Fecal Coliform (No./100 ml) Oct 1 - Apr 30	XXX	XXX	XXX	2000 Geo Mean	XXX	10000	1/month	Grab
Fecal Coliform (No./100 ml) May 1 - Sep 30	XXX	XXX	XXX	200 Geo Mean	XXX	1000	1/month	Grab

