

Application Type Renewal
Wastewater Type Sewage
Facility Type SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0114316
APS ID 1101556
Authorization ID 1462995

Applicant, Facility and Project Information

<p>Applicant Name <u>Artem V Domashevskiy & Jason A Domashevskiy</u></p> <p>Applicant Address <u>175 Eagle Lane</u> <u>Millmont, PA 17845-9443</u></p> <p>Applicant Contact <u>Artem Domashevskiy</u></p> <p>Applicant Phone <u>(347) 410-4016</u></p> <p>Client ID <u>360130</u></p> <p>SIC Code <u>4952</u></p> <p>SIC Description <u>Trans. & Utilities - Sewerage Systems</u></p> <p>Date Application Received <u>November 16, 2023</u></p> <p>Date Application Accepted _____</p> <p>Project Description _____</p>	<p>Facility Name <u>John & Sandra Erdley Res</u></p> <p>Facility Address <u>175 Eagle Lane</u> <u>Millmont, PA 17845-9443</u></p> <p>Facility Contact _____</p> <p>Facility Phone _____</p> <p>Site ID <u>237172</u></p> <p>Municipality <u>Hartley Township</u></p> <p>County <u>Union</u></p> <p>WQM Required _____</p> <p>WQM App. No. _____</p>
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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.

Approve	Deny	Signatures	Date
		Chad A. Fabian / Project Manager	August 19, 2025
		Nicholas W. Hartranft, P.E. / Environmental Engineer Manager	

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	001	Design Flow (MGD)	.0004
Latitude	40° 51' 22.66"	Longitude	-77° 13' 36.87"
Quad Name		Quad Code	
Wastewater Description: Sewage Effluent			
Receiving Waters	Penns Creek (HQ-CWF, MF)	Stream Code	
NHD Com ID	54964731	RMI	31.7800
Drainage Area		Yield (cfs/mi ²)	
Q ₇₋₁₀ Flow (cfs)		Q ₇₋₁₀ Basis	
Elevation (ft)		Slope (ft/ft)	
Watershed No.	6-A	Chapter 93 Class.	HQ-CWF, MF
Existing Use		Existing Use Qualifier	
Exceptions to Use		Exceptions to Criteria	
Assessment Status	Attaining Use(s)		
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:

Compliance History	
Summary of DMRs:	
Summary of Inspections:	

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 (MGD)	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 Avg Mo	XXX	XXX	1/month	Grab
BOD5	XXX	XXX	XXX	10.0	XXX	20.0	1/year	Grab
TSS	XXX	XXX	XXX	10.0	XXX	20.0	1/year	Grab
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200	XXX	1000	1/year	Grab

Compliance Sampling Location:

Other Comments: