

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

**NPDES PERMIT FACT SHEET
INDIVIDUAL SEWAGE**

Application No. PA0222887
 APS ID 981453
 Authorization ID 1252859

Applicant and Facility Information

Applicant Name	<u>Cathedral Pines, Inc. d/b/a Gateway Lodge</u>	Facility Name	<u>Gateway Lodge Restaurant</u>
Applicant Address	<u>P.O. Box 125</u> <u>Cooksburg, PA 16217-0125</u>	Facility Address	<u>14870 Route 36</u> <u>Cooksburg, PA 16217</u>
Applicant Contact	<u>Deborah Adams</u>	Facility Contact	<u></u>
Applicant Phone	<u>(814) 744-8017</u>	Facility Phone	<u></u>
Client ID	<u>255031</u>	Site ID	<u>257108</u>
Ch 94 Load Status	<u></u>	Municipality	<u>Barnett Township</u>
Connection Status	<u></u>	County	<u>Jefferson</u>
Date Application Received	<u>November 19, 2018</u>	EPA Waived?	<u>Yes</u>
Date Application Accepted	<u>November 21, 2018</u>	If No, Reason	<u></u>
Purpose of Application	<u>Renewal of a NPDES Permit for an existing discharge of treated sewage.</u>		

Summary of Review

The sewage treatment plant services a restaurant and lodge with 25 rooms and a serving capacity of 45 people (restaurant). No changes to discharge quantity or quality were proposed as part of this permit renewal.

There currently are no open violations listed in EFACTS for this permittee (9/20/2019).

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		Adam J. Pesek, E.I.T. / Environmental Engineering Specialist	
X		Justin C. Dickey, P.E. / Environmental Engineer Manager	

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	<u>001</u>	Design Flow (MGD)	<u>0.006</u>
Latitude	<u>41° 19' 22.8"</u>	Longitude	<u>-79° 11' 57.89"</u>
Quad Name	<u>Cooksburg</u>	Quad Code	<u>0812</u>
Wastewater Description: <u>Treated sewage</u>			
Receiving Waters	<u>Unnamed tributary to Clarion River</u>	Stream Code	<u>---</u>
NHD Com ID	<u>102668335</u>	RMI	<u>0.19</u>
Drainage Area	<u>0 (dry); 793 (perennial)</u>	Yield (cfs/mi ²)	<u>0 (dry); 0.211 (perennial)</u>
Q ₇₋₁₀ Flow (cfs)	<u>0 (dry); 167.8 (perennial)</u>	Q ₇₋₁₀ Basis	<u>USGS# 03029500</u>
Elevation (ft)	<u>1380</u>	Slope (ft/ft)	<u>0.22926</u>
Watershed No.	<u>17-B</u>	Chapter 93 Class.	<u>CWF</u>
Existing Use	<u></u>	Existing Use Qualifier	<u></u>
Exceptions to Use	<u></u>	Exceptions to Criteria	<u></u>
Assessment Status	<u>Attaining Use(s)</u>		
Cause(s) of Impairment	<u></u>		
Source(s) of Impairment	<u></u>		
TMDL Status	<u>Final</u>	Name	<u>Lower Clarion River Watershed</u>
Background/Ambient Data		Data Source	
pH (SU)	<u>7.0</u>	Default	<u></u>
Temperature (°C)	<u>20</u>	Default (CWF)	<u></u>
Hardness (mg/L)	<u></u>		<u></u>
Other: NH ₃ -N	<u>0.1</u>	Default	<u></u>
Nearest Downstream Public Water Supply Intake	<u>PA American Water Company – Clarion</u>		
PWS Waters	<u>Clarion River</u>	Flow at Intake (cfs)	<u></u>
PWS RMI	<u></u>	Distance from Outfall (mi)	<u>15</u>

Changes Since Last Permit Issuance:

Other Comments: No load reductions are needed in this uppermost watershed segment and it is not listed as impaired. There are no WLA for existing sources. No monitoring or limits are needed for this discharge due to the TMDL.

Treatment Facility Summary				
Treatment Facility Name: Gateway Lodge				
WQM Permit No.		Issuance Date		
3399403 T-1		3/01/2009		
Waste Type	Degree of Treatment	Process Type	Disinfection	Avg Annual Flow (MGD)
Sewage	Tertiary	Extended Aeration	Chlorination/Dechlor	0.006
Hydraulic Capacity (MGD)	Organic Capacity (lbs/day)	Load Status	Biosolids Treatment	Biosolids Use/Disposal
0.006	6.6		None	Other WWTP

Changes Since Last Permit Issuance:

Other Comments:

Compliance History

DMR Data for Outfall 001 (from August 1, 2018 to July 31, 2019)

Parameter	JUL-19	JUN-19	MAY-19	APR-19	MAR-19	FEB-19	JAN-19	DEC-18	NOV-18	OCT-18	SEP-18	AUG-18
Flow (MGD) Average Monthly	0.003	0.003	0.003	0.001	0.001	0.004	0.003	0.002	0.001	0.002	0.002	0.003
pH (S.U.) Minimum	6.85	6.87	6.97	6.86	6.82	6.72	7.05	7.23	7.48	7.03	6.82	6.81
pH (S.U.) Maximum	7.46	7.63	7.58	7.55	7.33	7.36	7.33	7.59	7.68	7.77	7.07	7.56
DO (mg/L) Minimum	7.2	9.7	9.4	11.5	11.6	11.3	11.8	11.6	12.0	9.5	9.3	9.2
TRC (mg/L) Average Monthly	0.15	0.14	0.16	0.27	0.34	0.20	0.26	0.18	0.33	0.15	0.08	0.21
CBOD5 (mg/L) Average Monthly	< 2.14	2.65	< 2.14	< 2.14	< 2.14	< 2.14	< 2.14	< 2.14	< 2.14	< 2.14	< 2.14	< 2.00
TSS (mg/L) Average Monthly	< 2.50	< 2.50	< 2.50	< 2.50	< 2.50	< 2.50	< 2.50	< 2.50	< 2.50	< 2.50	< 2.50	< 2.50
Fecal Coliform (CFU/100 ml) Geometric Mean	< 1.00	< 1.00	< 1.0000	4.1	< 1.0000	< 1.0000	< 1.0000	< 1.0000	< 1.0000	< 1.0000	< 1.0000	< 1.0000
Fecal Coliform (CFU/100 ml) Instantaneous Maximum	< 1.00	< 1.00	< 1.0000	4.1	< 1.0000	< 1.0000	< 1.0000	< 1.0000	< 1.0000	< 1.0000	< 1.0000	< 1.0000
Total Nitrogen (mg/L) Average Quarterly		10.2			16.3			17.8			23.0	
Ammonia (mg/L) Average Monthly	< 0.50	< 0.50	< 0.500	< 0.5	< 0.500	< 0.500	< 0.500	< 0.500	< 0.500	< 0.500	< 0.500	< 0.500
Total Phosphorus (mg/L) Average Quarterly		2.07			1.34			2.08			1.50	

Development of Effluent Limitations

Outfall No. <u>001</u>	Design Flow (MGD) <u>.006</u>
Latitude <u>41° 19' 22.80"</u>	Longitude <u>-79° 11' 57.89"</u>
Wastewater Description: <u>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)

Comments:

Water Quality-Based Limitations

The following limitations were determined through water quality modeling (output files attached):

Parameter	Limit (mg/l)	SBC	Model
Total Residual	1.2	IMAX	Old TRC Spreadsheet

Comments: WQM 7.0 Modeling indicated existing CBOD₅, NH₃-N, and D.O. limits are protective of the free-flowing stream.

Best Professional Judgment (BPJ) Limitations

Comments: “Minimum Treatment” requirements (CBOD₅, TSS, and NH₃-N) from a previous version o the Department’s “Implementation Guidance for Evaluating Wastewater Discharges to Drainage Ditches and Swales” are being retained in this renewal. A D.O. limit of a minimum of 4.0 mg/l and monitoring for total nitrogen and total phosphorus are being retained and are in accordance with the Department’s SOP entitled “Establishing Effluent Limitations for Individual Sewage Permits.”

Anti-Backsliding

N/A

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	Average Monthly	Maximum	Instant. Maximum		
Flow (MGD)	Report	Report Daily Max	XXX	XXX	XXX	XXX	1/week	Measured
pH (S.U.)	XXX	XXX	6.0 Daily Min	XXX	9.0 Daily Max	XXX	1/day	Grab
DO	XXX	XXX	4.0 Daily Min	XXX	XXX	XXX	1/day	Grab
TRC	XXX	XXX	XXX	0.5	XXX	1.2	1/day	Grab
CBOD5	XXX	XXX	XXX	10.0	XXX	20	1/month	Grab
TSS	XXX	XXX	XXX	10.0	XXX	20	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
Total Nitrogen	XXX	XXX	XXX	Report Annl Avg	XXX	XXX	1/year	Grab
Ammonia	XXX	XXX	XXX	3.0	XXX	6	1/month	Grab
Total Phosphorus	XXX	XXX	XXX	Report Annl Avg	XXX	XXX	1/year	Grab

Compliance Sampling Location: Outfall 001 (after disinfection)

Other Comments: Sampling frequency for pH, D.O. and TRC was changed to “1/day” in accordance with the Department’s SOP entitled “New and Reissuance Sewage Individual NPDES Permit Applications.”

ATTACHMENT A



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