

Northwest Regional Office CLEAN WATER PROGRAM

Application Type
Wastewater Type
Facility Type
Sewage
SRSTP

NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

 Application No.
 PA0240192

 APS ID
 1051859

 Authorization ID
 1376526

Applicant Name	Myra	nda Hyden	Facility Name	Myranda Hyden SRSTP	
Applicant Address	24478	8 State Street	Facility Address	24478 State Street	
	Mead	lville, PA 16335-8834		Meadville, PA 16335-8834	
Applicant Contact	Myraı	nda Hyden	Facility Contact	Frank Hyden	
Applicant Phone			Facility Phone	(814) 333-1934	
Client ID	2645	38	Site ID	703976	
SIC Code			Municipality	Blooming Valley Borough	
SIC Description			County	Crawford	
Date Application Received		November 17, 2021	WQM Required		
Date Application Accepted		November 22, 2021	WQM App. No.		

Summary of Review

This is an existing discharge for an existing home.

Act 14 - Proof of Notification was submitted and received.

Existing treatment consists of (WQG018632): a septic tank, pressure dosed subsurface sand filter with chlorination.

The EPA Waiver is in effect.

There are no open violations in WMS for the subject Client ID (264538) as of 01/04/2022.

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
Х		Jordan A. Frey, E.I.T. Jordan A. Frey, E.I.T. / Civil Engineer Trainee	January 5, 2022
		Justin C. Dickey, P.E. / Environmental Engineer Manager	

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving	Water	s and Water Supply Inforn	nation			
<u> </u>						
Outfall No. 001			Design Flow (MGD)	.0004		
Latitude 41° 40)' 49.87	"	Longitude	-80° 3' 5.42"		
Quad Name Bloc	oming \	/alley	Quad Code	41080F1		
Wastewater Description: Sewage Effluent						
	•					
		ned Tributary to Woodcock				
Receiving Waters		(HQ-CWF)	Stream Code	52726		
NHD Com ID	12734	3321	RMI			
Drainage Area	1.39		Yield (cfs/mi²)	0.1		
Q ₇₋₁₀ Flow (cfs)	0.139		Q ₇₋₁₀ Basis	Default		
Elevation (ft)	1307		Slope (ft/ft)			
Watershed No.	16-A		Chapter 93 Class.	HQ-CWF		
Existing Use			Existing Use Qualifier			
Exceptions to Use			Exceptions to Criteria			
Assessment Status		Attaining Use(s)				
Cause(s) of Impairm	nent					
Source(s) of Impairm	nent					
TMDL Status	• • • • • • • • • • • • • • • • • • • •		Name			
Background/Ambien	nt Data		Data Source			
pH (SU)		7.0	Default			
Temperature (°F)		20	Default			
Hardness (mg/L) 100			Default			
Other:				-		
CO						
Nearest Downstrean	n Publi	c Water Supply Intake	Aqua Pennsylvania, Inc. – Em	nlenton		
PWS Waters A	lleghen	y River	Flow at Intake (cfs)	1376		
PWS RMI 90.0			Distance from Outfall (mi)	>25		

Changes Since Last Permit Issuance: Permittee has changed since last permit issuance.

Other Comments: None.

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.

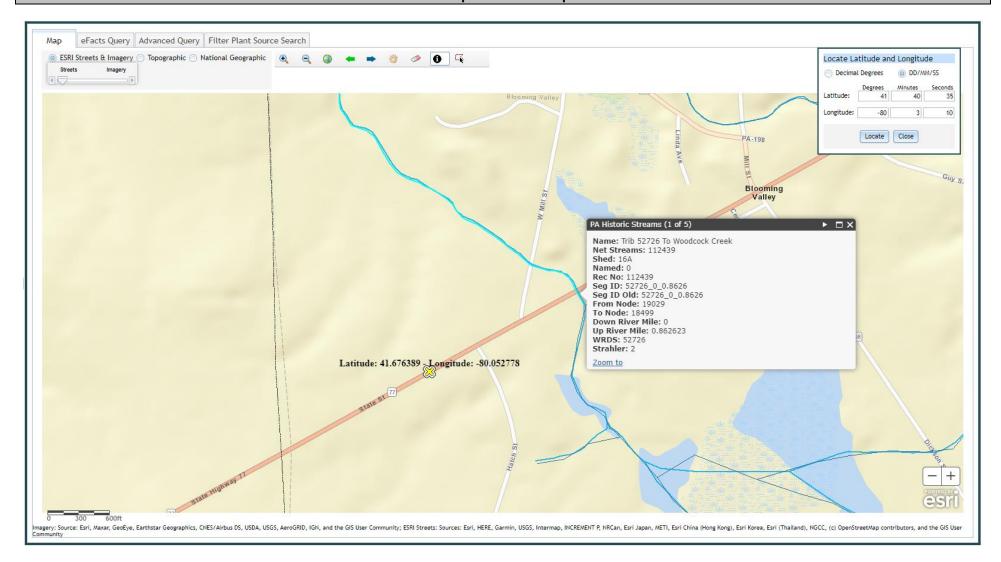
Outfall 001, Effective Period: Permit Effective Date through Permit Expiration Date.

Parameter	Effluent Limitations					Monitoring Requirements		
	Mass Units (lbs/day) (1)		Concentrations (mg/L)				Minimum ⁽²⁾	Required
	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum	Measurement Frequency	Sample Type
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/month	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	XXX	1/year	Grab

Compliance Sampling Location: Outfall 001, after disinfection.

Other Comments: None.

Attachment 1 eMap – Location Map



Attachment 2 Google Earth Imagery

