

Application Type New  
Facility Type Storm Water  
Major / Minor Minor

**NPDES PERMIT FACT SHEET  
INDIVIDUAL INDUSTRIAL WASTE (IW)  
AND IW STORMWATER**

Application No. PA0245356  
APS ID 1054398  
Authorization ID 1381015

**Applicant and Facility Information**

Applicant Name	<u>International Paper Co. (IP)</u>	Facility Name	<u>International Paper Atglen Facility</u>
Applicant Address	<u>6283 Tri-Ridge Boulevard</u> <u>Loveland, OH 45241</u>	Facility Address	<u>4581 Lower Valley Road</u> <u>Atglen, PA 19310-1766</u>
Applicant Contact	<u>James Baumer</u>	Facility Contact	<u>Mark Doody</u>
Applicant Phone	<u>(440) 710-4516</u>	Facility Phone	<u>(717) 391-3423</u>
Client ID	<u>81651</u>	Site ID	<u>455808</u>
SIC Code	<u>2653</u>	Municipality	<u>West Sadsbury Township</u>
SIC Description	<u>Manufacturing - Corrugated And Solid Fiber Boxes</u>	County	<u>Chester</u>
Date Application Received	<u>December 23, 2021</u>	EPA Waived?	<u>Yes</u>
Date Application Accepted	<u></u>	If No, Reason	<u></u>
Purpose of Application	<u>discharge of stormwater with industrial activity.</u>		

**Summary of Review**

The applicant has submitted a new application for NPDES permit to discharge stormwater associated with industrial activities from their facility into unnamed tributary Valley Creek (TSF, MF) through 3 (three) Outfalls.

The facility has listed SIC 2653 (Corrugated and solid fiber boxes).

DEP has conducted a site visit on March 15, 2022. Based on observation, the site was not fully functional due to demolition/construction phase.

The facility formerly involved in printing manufacturing PA0244163 (Quad/Graphics Atglen). It was a SARA III, Section 313 facility. Based on the review of the factsheet of issuance of the permit all parameters of concern included the parameters listed in Appendix A of the then General NPDES PAG 03, with addition of Zinc, Copper, Silver, Chromium, Chloroform, Toluene, Xylene and Ethylbenzene, with 2/year monitoring on all 3 (three) outfalls. On April 21, 2017, DEP has received a Notice to Terminate for their discharge. Based on April 26, 2017 inspection report the facility was vacant and the permit was terminated on 5/15/2017.

The review of the submittal revealed that there are 3 areas of the stormwater runoffs with industrial activity that flows to 3 (three) outfalls.

There were several phone calls with Permittee's consultant - Andrew Beaver / Project Engineer All4 Inc. It has been added that existing storage buildings are being renovated at the site. And site has been known as Land Recycling and Environmental Remediation Standard Act (ACT2) site.

Based on the DEP's ECP's Mr. Brown – PG Manager, the site's Remedial Investigation Report (2019) has needed a revision.

Approve	Deny	Signatures	Date
X		<i>Begay Omuralieva</i> Begay Omuralieva / Environmental Engineering Specialist	6/28/2022
X		<i>Pravin Patel</i> Pravin C. Patel, P.E. / Environmental Engineer Manager	06/29/2022

### Summary of Review

Therefore, all previously established effluent limits and monitoring requirements of former permittee will be reestablished in this permit as shown on pages. 6-11 of this factsheet.

The permittee may wish to monitor for following pollutants of concern: Copper, Silver, Chromium, Chloroform, Toluene, Xylene, and Ethylbenzene for minimum period of 2 years from permit issuance. if the results of any pollutants are below PA Water Quality Criteria, Permittee may request NPDES permit amendment to eliminate those parameters from permit.

#### Act 14 Notification:

West Sadsbury Township Planning Commission has received the notice on October 25, 2021  
Chester County Planning Commission has received the notice on November 1, 2021

#### 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.	<u>001</u>		
Latitude	<u>39° 57' 10"</u>	Longitude	<u>-75° 56' 51"</u>
Quad Name	_____	Quad Code	_____
Wastewater Description:	<u>Stormwater</u>		
Receiving Waters	<u>Valley Creek (TSF, MF)</u>	Stream Code	_____
NHD Com ID	<u>57465247</u>	RMI	<u>1.1</u>
Drainage Area	_____	Yield (cfs/mi <sup>2</sup> )	_____
Q <sub>7-10</sub> Flow (cfs)	_____	Q <sub>7-10</sub> Basis	_____
Elevation (ft)	_____	Slope (ft/ft)	_____
Watershed No.	<u>7-K</u>	Chapter 93 Class.	<u>TSF, MF</u>
Existing Use	_____	Existing Use Qualifier	_____
Exceptions to Use	_____	Exceptions to Criteria	_____
Assessment Status	<u>Impaired</u>		
Cause(s) of Impairment	<u>SILTATION, SILTATION</u>		
Source(s) of Impairment	<u>AGRICULTURE, AGRICULTURE</u>		
TMDL Status	<u>Tentative</u>	Name	<u>Octoraro Creek Watershed TMDL</u>
_____			
Nearest Downstream Public Water Supply Intake _____			
PWS Waters	_____	Flow at Intake (cfs)	_____
PWS RMI	_____	Distance from Outfall (mi)	_____

Changes Since Last Permit Issuance: n/a

**Discharge, Receiving Waters and Water Supply Information**

Outfall No.	<u>002</u>		
Latitude	<u>39° 57' 5"</u>	Longitude	<u>-75° 57' 5"</u>
Quad Name	_____	Quad Code	_____
Wastewater Description: <u>Stormwater</u>			
Receiving Waters	<u>Valley Creek (TSF, MF)</u>	Stream Code	_____
NHD Com ID	<u>57465247</u>	RMI	<u>1.1300</u>
Drainage Area	_____	Yield (cfs/mi <sup>2</sup> )	_____
Q <sub>7-10</sub> Flow (cfs)	_____	Q <sub>7-10</sub> Basis	_____
Elevation (ft)	_____	Slope (ft/ft)	_____
Watershed No.	<u>7-K</u>	Chapter 93 Class.	<u>TSF, MF</u>
Existing Use	_____	Existing Use Qualifier	_____
Exceptions to Use	_____	Exceptions to Criteria	_____
Assessment Status	<u>Impaired</u>		
Cause(s) of Impairment	<u>SILTATION</u>		
Source(s) of Impairment	<u>AGRICULTURE</u>		
TMDL Status	<u>Tentative</u>	Name	<u>Octoraro Creek Watershed TMDL</u>
Nearest Downstream Public Water Supply Intake _____			
PWS Waters	_____	Flow at Intake (cfs)	_____
PWS RMI	_____	Distance from Outfall (mi)	_____

Changes Since Last Permit Issuance: n/a

**Discharge, Receiving Waters and Water Supply Information**

Outfall No.	<u>003</u>		
Latitude	<u>39° 57' 9"</u>	Longitude	<u>-75° 57' 7"</u>
Quad Name	_____	Quad Code	_____
Wastewater Description: <u>Stormwater</u>			
Receiving Waters	<u>Valley Creek (TSF, MF)</u>	Stream Code	_____
NHD Com ID	<u>57465247</u>	RMI	<u>1.0700</u>
Drainage Area	_____	Yield (cfs/mi <sup>2</sup> )	_____
Q <sub>7-10</sub> Flow (cfs)	_____	Q <sub>7-10</sub> Basis	_____
Elevation (ft)	_____	Slope (ft/ft)	_____
Watershed No.	<u>7-K</u>	Chapter 93 Class.	<u>TSF, MF</u>
Existing Use	_____	Existing Use Qualifier	_____
Exceptions to Use	_____	Exceptions to Criteria	_____
Assessment Status	<u>Impaired</u>		
Cause(s) of Impairment	<u>SILTATION</u>		
Source(s) of Impairment	<u>AGRICULTURE</u>		
TMDL Status	<u>Tentative</u>	Name	<u>Octoraro Creek Watershed TMDL</u>
Nearest Downstream Public Water Supply Intake _____			
PWS Waters	_____	Flow at Intake (cfs)	_____
PWS RMI	_____	Distance from Outfall (mi)	_____

Changes Since Last Permit Issuance: 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) <sup>(1)</sup>		Concentrations (mg/L)				Minimum <sup>(2)</sup> Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Average Monthly	Daily Maximum	Instant. Maximum		
pH (S.U.)	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
DO	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
COD	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
BOD5	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
TSS	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Nitrate-Nitrite	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Nitrogen	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Calculation
Ammonia	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
TKN	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Phosphorus	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Chromium	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Copper	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Iron	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Silver	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Zinc	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Ethylbenzene	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab

**Outfall 001 , Continued (from Permit Effective Date through Permit Expiration Date)**

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) <sup>(1)</sup>		Concentrations (mg/L)				Minimum <sup>(2)</sup> Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Average Monthly	Daily Maximum	Instant. Maximum		
Chloroform	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Toluene	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Xylenes	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab

Compliance Sampling Location: 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 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 002, Effective Period: Permit Effective Date through Permit Expiration Date.**

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) <sup>(1)</sup>		Concentrations (mg/L)				Minimum <sup>(2)</sup> Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Average Monthly	Daily Maximum	Instant. Maximum		
pH (S.U.)	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
DO	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
BOD5	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
COD	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
TSS	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Nitrate-Nitrite	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Nitrogen	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Calculation
Ammonia	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
TKN	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Phosphorus	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Chromium	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Copper	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Iron	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Silver	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Zinc	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Ethylbenzene	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab



**Outfall 002 , Continued (from Permit Effective Date through Permit Expiration Date )**

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) <sup>(1)</sup>		Concentrations (mg/L)				Minimum <sup>(2)</sup> Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Average Monthly	Daily Maximum	Instant. Maximum		
Chloroform	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Toluene	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Xylenes	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab

Compliance Sampling Location: Outfall 002

**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 003, Effective Period: Permit Effective Date through Permit Expiration Date.**

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) <sup>(1)</sup>		Concentrations (mg/L)				Minimum <sup>(2)</sup> Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Average Monthly	Daily Maximum	Instant. Maximum		
pH (S.U.)	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
DO	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
BOD5	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
COD	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
TSS	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Nitrate-Nitrite	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Nitrogen	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Calculation
Ammonia-Nitrogen	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
TKN	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Phosphorus	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Chromium	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Copper	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Iron	XXX	XXX	XXX	XXX	XXX	Report	1/6 months	Grab
Total Silver	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Zinc	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Ethylbenzene	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab

**Outfall 003 , Continued (from Permit Effective Date through Permit Expiration Date )**

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) <sup>(1)</sup>		Concentrations (mg/L)				Minimum <sup>(2)</sup> Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Average Monthly	Daily Maximum	Instant. Maximum		
Chloroform	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Toluene	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab
Total Xylenes	XXX	XXX	XXX	XXX	Report	XXX	1/6 months	Grab

Compliance Sampling Location: Outfall 003