

Application Type Renewal
Wastewater Type Sewage
Facility Type SRSTP

**NPDES PERMIT FACT SHEET
INDIVIDUAL SFTF/SRSTP**

Application No. PA0262030
APS ID 1098080
Authorization ID 1457030

Applicant, Facility and Project Information

Applicant Name	<u>Staci Stettler</u>	Facility Name	<u>Stettler Res</u>
Applicant Address	<u>584 Bull Run Road</u> <u>Wrightsville, PA 17368-9045</u>	Facility Address	<u>584 Bull Run Road</u> <u>Wrightsville, PA 17368-9045</u>
Applicant Contact	<u>Staci Stettler</u>	Facility Contact	<u>Staci Stettler</u>
Applicant Phone	<u>(717) 342-8759</u>	Facility Phone	<u>(717) 342-8759</u>
Client ID	<u>380131</u>	Site ID	<u>770188</u>
SIC Code	<u>6514</u>	Municipality	<u>Lower Windsor Township</u>
SIC Description	<u>Fin, Ins & Real Est - Dwelling Operators, Except Apartments</u>	County	<u>York</u>
Date Application Received	<u>October 4, 2023</u>	WQM Required	<u>Pending Transfer</u>
Date Application Accepted	<u>October 18, 2023</u>	WQM App. No.	<u>6713401 T-1</u>
Project Description	<u>Staci Stettler has submitted an application for the renewal of their SRSTP for their existing treatment plant.</u>		

Summary of Review

Staci Stettler has submitted an application for a permit for her existing Single Residence Small Flow Treatment Facility located in York County. DEP received the renewal NPDES permit application on October 4, 2023 by the applicant. The facility was previously under the ownership of Samuel Shaffer III, but after selling the home to Staci Stettler, a permit transfer application for both the NPDES and WQM application were submitted. Since the existing NPDES permit had already expired, we requested Staci to also submit a renewal application so that the renewal and transfer can be processed at the same time and the client can have a valid permit with a new expiration date.

The Department has reviewed the application in order to ensure that the facility does not receive or discharge a flow greater than 400 GPD or exceed the specified limits of CBOD5, Total Suspended Solids, and Fecal Coliform prescribed in the permit. As per 25 Pa. Code § 92a.53, all applicable effluent limits and standards are considered in development of the permit. The limits noted in the permit suggest that any applicable water quality standards will not be violated.

The limits discussed in the permit are based off of several factors that were determined by the Standard Operating Procedure for Small Flow Treatment Facilities (SOP No. BCW-PMT-003).

The TSS limits were prescribed based on The Department's Water Quality Antidegradation Implementation Guidance ID No. 391-0300-002

The Fecal Coliform limits listed in the permit were required by the Bureau of Clean Water, as stated in Chapter 92a and 93.

Public Participation

Approve	Deny	Signatures	Date
X		<i>Jared Lescavage</i> Jared Lescavage / Project Manager	October 19, 2023
		Scott M. Arwood, P.E. / Environmental Engineer Manager	

Summary of Review

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 and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	<u>001</u>	Design Flow (MGD)	<u>.0004</u>
Latitude	<u>39° 57' 12.45"</u>	Longitude	<u>-76° 29' 39.11"</u>
Quad Name	_____	Quad Code	_____
Wastewater Description: <u>Sewage Effluent</u>			
Receiving Waters	<u>Bull Run (WWF, MF)</u>	Stream Code	<u>7845</u>
NHD Com ID	<u>57467759</u>	RMI	_____
Drainage Area	<u>0.39 mi²</u>	Yield (cfs/mi ²)	_____
Q ₇₋₁₀ Flow (cfs)	<u>0.144</u>	Q ₇₋₁₀ Basis	<u>StreamStats</u>
Elevation (ft)	_____	Slope (ft/ft)	_____
Watershed No.	<u>7-I</u>	Chapter 93 Class.	<u>WWF, MF</u>
Existing Use	_____	Existing Use Qualifier	_____
Exceptions to Use	_____	Exceptions to Criteria	_____
Assessment Status	<u>Impaired</u>		
Cause(s) of Impairment	<u>FLOW REGIME MODIFICATION, SILTATION</u>		
Source(s) of Impairment	<u>CHANNELIZATION, REMOVAL OF RIPARIAN VEGETATION</u>		
TMDL Status	_____	Name	_____
Background/Ambient Data		Data Source	
pH (SU)	_____	_____	
Temperature (°F)	_____	_____	
Hardness (mg/L)	_____	_____	
Other:	_____	_____	
Nearest Downstream Public Water Supply Intake	<u>Red Lion Municipal Authority</u>		
PWS Waters	<u>Susquehanna River</u>	Flow at Intake (cfs)	_____
PWS RMI	_____	Distance from Outfall (mi)	<u>5</u>

Changes Since Last Permit Issuance: Old permit expired, addition of pH, transfer to new owner.

Other Comments: None

Compliance History	
Summary of DMRs:	None
Summary of Inspections:	None

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⁾ 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
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	XXX	1/year	Grab

Compliance Sampling Location: Outfall 001

Other Comments: None