

Application Type Renewal  
Wastewater Type Sewage  
Facility Type SRSTP

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

Application No. PA0264342  
APS ID 1020425  
Authorization ID 1321518

**Applicant, Facility and Project Information**

Applicant Name	<u>Dennis &amp; Linda DeSilvey</u>	Facility Name	<u>Dennis &amp; Linda DeSilvey SRSTP</u>
Applicant Address	<u>211 Gearhart Road</u> <u>Pulaski, PA 16143-1307</u>	Facility Address	<u>211 Gearhart Road</u> <u>Pulaski, PA 16143-1307</u>
Applicant Contact	<u>Dennis Desilvey</u>	Facility Contact	<u></u>
Applicant Phone	<u>(724) 528-2628</u>	Facility Phone	<u>(724) 301-7222</u>
Applicant E Mail	<u>dadesilvey@gmail.com</u>	Facility E Mail	<u></u>
Client ID	<u>325421</u>	Site ID	<u>811700</u>
Municipality	<u>Shenango Township</u>	County	<u>Mercer</u>
SIC Code	<u>8800</u>	SIC Code	<u>4952</u>
SIC Description	<u>Private Households</u>	SIC Description	<u>Trans. &amp; Utilities - Sewerage Systems</u>
Received	<u>July 14, 2020</u>	WQM Required	<u>Present permit is adequate</u>
Accepted	<u>August 3, 2021</u>	WQM App. No.	<u></u>
Project Description	<u>Treated sewage discharge permit renewal</u>		

**Summary of Review**

No violations reported.

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		<i>William H. Mentzer</i> William H. Mentzer, P.E Environmental Engineering Specialist	March 24, 2021
X		Justin C. Dickey Justin C. Dickey, P.E. Environmental Engineer Manager	March 26, 2021

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	<u>001</u>	Design Flow (MGD)	<u>0.0005</u>
Latitude DP	<u>41° 8' 53.00"</u>	Longitude DP	<u>-80° 24' 41.99"</u>
Latitude NHD	<u>41° 8' 52.88"</u>	Longitude NHD	<u>-80° 24' 40.37"</u>
Quad Name	<u>Sharon East</u>	Quad Code	<u>0902</u>
Wastewater:	<u>Treated single residence domestic wastes</u>		
Receiving Waters	<u>Unnamed Tributary to Buchanan Run</u>	Stream Code	<u>unknown</u>
NHD Com ID	<u>130033490</u>	RMI	<u>0.37</u>
Drainage Area	<u>0.1</u>	Yield (cfs/mi <sup>2</sup> )	<u>0</u>
Q <sub>7-10</sub> Flow (cfs)	<u>0</u>	Q <sub>7-10</sub> Basis	<u>Dry stream</u>
Elevation (ft)	<u>1117.07</u>	Slope (ft/ft)	<u>0.02874</u>
Watershed No.	<u>20A</u>	Chapter 93 Class.	<u>Warm Water Fishes</u>
Existing Use	<u>statewide</u>	Existing Use Qualifier	<u>none</u>
Exceptions to Use	<u>none</u>	Exceptions to Criteria	<u>none</u>
Comments	<u>Tributary 35910 confluence at RMI 2.20 Elevation 1037.45 feet Drainage 0.75 square mile NHD RMI IS 2.24 just above the stream confluence.</u>		
Assessment Status	<u>Attaining Use(s)</u>		
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	<u>Pa American New Castle</u>		
PWS Waters	<u>Shenango River</u>	Flow at Intake (cfs)	<u>NA</u>
PWS RMI	<u>5.02</u>	Distance from Outfall (mi)	<u>14.06</u>

Changes Since Last Permit Issuance: NA

Other Comments: No downstream water supply impairment is expected.

**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	Annual Average	Maximum	Instant. Maximum		
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	Upon Request	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 after disinfection

Other Comments: The annual Maintenance Report (AMR) lists UV radiation monitoring and maintenance.