

Application Type New
Wastewater Type Sewage
Facility Type SFTF

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

Application No. PA0267091
APS ID 1009622
Authorization ID 1302296

Applicant, Facility and Project Information

Applicant Name	<u>SCFS LLC</u>	Facility Name	<u>SCFS Personal Care Home</u>
Applicant Address	<u>200 Penn Street 2nd Floor</u> <u>Reading, PA 19602</u>	Facility Address	<u>485 Walnut Road</u> <u>Reading, PA 19606</u>
Applicant Contact	<u>Todd Seaman</u>	Facility Contact	<u>Todd Seaman</u>
Applicant Phone	<u>(610) 372-7712</u>	Facility Phone	<u>(610) 372-7712</u>
Client ID	<u>354659</u>	Site ID	<u>841150</u>
SIC Code	<u>4911</u>	Municipality	<u>Exeter Township</u>
SIC Description	<u>Trans. & Utilities - Electric Services</u>	County	<u>Berks</u>
Date Application Received	<u>January 17, 2020</u>	WQM Required	<u>Yes</u>
Date Application Accepted	<u>January 22, 2020</u>	WQM App. No.	<u>0620401</u>
Project Description	<u>SCFS LLC has submitted an application for a Small Flow Treatment Facility for their proposed operation.</u>		

Summary of Review

SCFS LLC has submitted an application for a new permit for their proposed Small Flow Treatment Facility located in Berks County. The personal care home will utilize a system to treat sewage generated by the facility. DEP received the new NPDES and WQM permit applications on January 17, 2020 by Environmental Design Service, Inc. The Department has reviewed the application in order to ensure that the facility does not receive or discharge a flow greater than 2,000 GPD or exceed the specified limits of CBOD5, pH, 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 92.2c.b(2) and 93.7.

Based on the review outlined in this fact sheet, it is recommended that the NPDES permit be drafted. Also, it is recommended that the WQM permit be issued upon issuance of the NPDES permit.

Approve	Deny	Signatures	Date
X		Jared Lescavage Jared Lescavage / Environmental Engineering Specialist	April 9, 2020
x		Scott M. Arwood Scott M. Arwood, P.E. / Environmental Engineer Manager	6/18/2020

Summary of Review

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

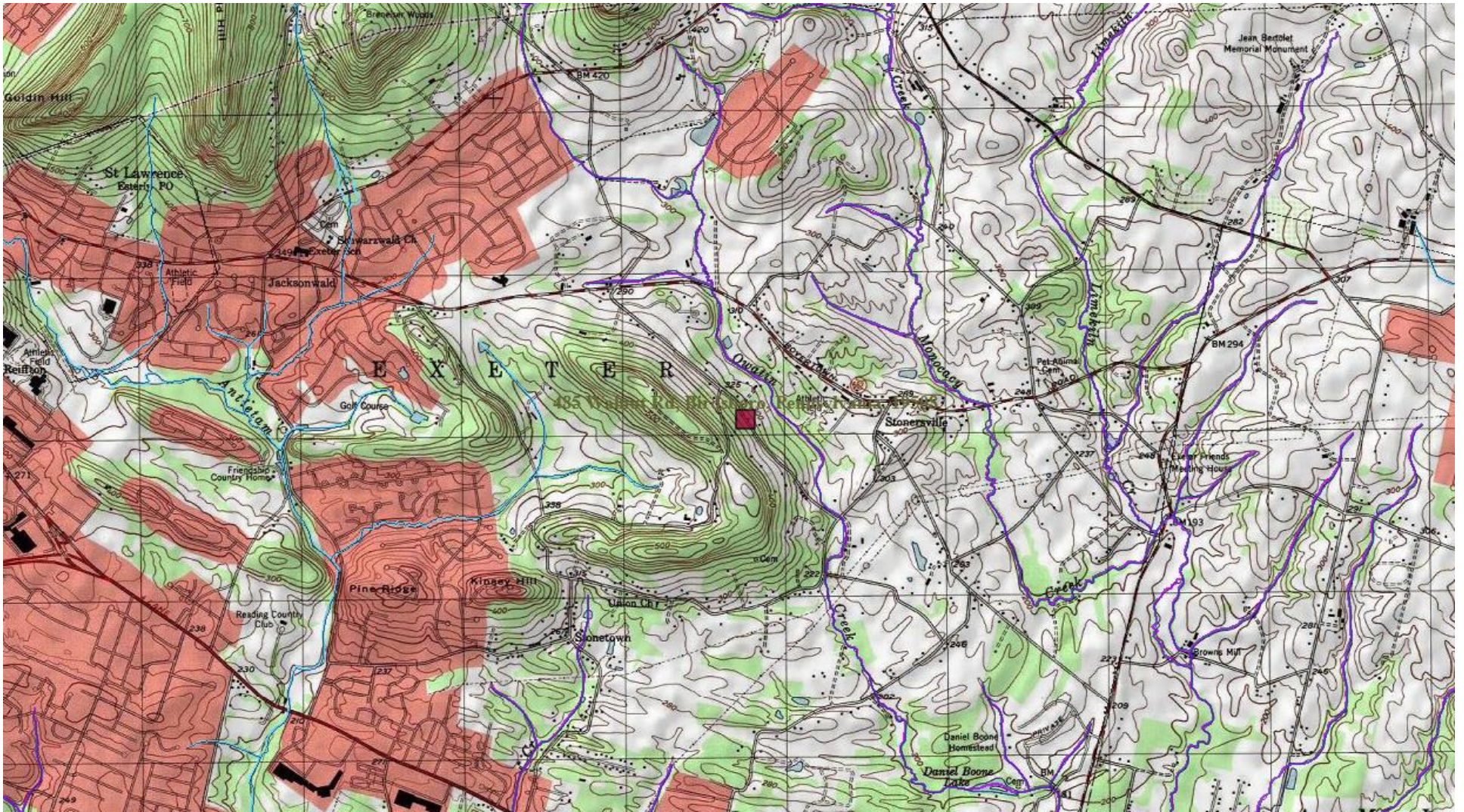
Outfall No.	<u>001</u>	Design Flow (MGD)	<u>2000</u>
Latitude	<u>40° 18' 54.48"</u>	Longitude	<u>-75° 48' 40.49"</u>
Quad Name	_____	Quad Code	_____
Wastewater Description: <u>Sewage Effluent</u>			
Receiving Waters	<u>Unnamed Tributary to Molasses Creek (WWF, MF)</u>	Stream Code	<u>53126</u>
NHD Com ID	<u>25963742</u>	RMI	<u>1.4000</u>
Drainage Area	<u>2.27</u>	Yield (cfs/mi ²)	_____
Q ₇₋₁₀ Flow (cfs)	<u>0.704</u>	Q ₇₋₁₀ Basis	<u>StreamStats</u>
Elevation (ft)	_____	Slope (ft/ft)	_____
Watershed No.	<u>03D</u>	Chapter 93 Class.	<u>Warm Water Fishes, Migratory Fishes</u>
Existing Use	_____	Existing Use Qualifier	_____
Exceptions to Use	_____	Exceptions to Criteria	_____
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>Pottstown Borough Water Authority</u>		
PWS Waters	<u>Schuylkill River</u>	Flow at Intake (cfs)	_____
PWS RMI	_____	Distance from Outfall (mi)	<u>10</u>

Changes Since Last Permit Issuance: N/A

Other Comments: N/A

Compliance History	
Summary of DMRs:	N/A
Summary of Inspections:	N/A

Other Comments: **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	Average Monthly	Average Monthly	Maximum	Instant. Maximum		
Flow (GPD)	Report	XXX	XXX	XXX	XXX	XXX	1/month	Measured
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	1/month	Grab
BOD5	XXX	XXX	10.0	XXX	XXX	20	1/month	Grab
TSS	XXX	XXX	10.0	XXX	XXX	20	1/month	Grab
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200 Geo Mean	XXX	XXX	1/month	Grab

Compliance Sampling Location: Outfall 001

Other Comments: N/A