

Application Type Renewal
Wastewater Type Sewage
Facility Type SRSTP

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

Application No. PA0267457
APS ID 1037819
Authorization ID 1549516

Applicant, Facility and Project Information

Applicant Name	<u>Jason E Donaldson</u>	Facility Name	<u>Donaldson Residence</u>
Applicant Address	<u>326 Beaver Dam Road</u> <u>Hollidaysburg, PA 16648-8421</u>	Facility Address	<u>326 Beaver Dam Road</u> <u>Hollidaysburg, PA 16648</u>
Applicant Contact	<u>Jason Donaldson</u>	Facility Contact	<u>Jason Donaldson</u>
Applicant Phone	<u>(814) 686-7105</u>	Facility Phone	<u>(814) 686-7105</u>
Client ID	<u>362677</u>	Site ID	<u>849217</u>
SIC Code	<u>8811</u>	Municipality	<u>Frankstown Township</u>
SIC Description	<u>Services - Private Households</u>	County	<u>Blair</u>
Date Application Received	<u>November 17, 2025</u>	WQM Required	<u>Issued</u>
Date Application Accepted	<u>December 16, 2025</u>	WQM App. No.	<u>0721403</u>
Project Description	<u>.</u>		

Summary of Review

Jason Donaldson has submitted an application for a renewal permit for their existing Single Residence Small Flow Treatment Facility located in York County. DEP received the NPDES permit applications on November 17, 2025 from the applicant. 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, Ammonia, , 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 on several factors that were determined by the Standard Operating Procedure for Small Flow Treatment Facilities (SOP No. BCW-PMT-003).

The TSS and Ammonia-Nitrogen 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.

The permit renewal was submitted after the expiration of the previous permit. Therefore, the above permit will be considered "New". The new permit will retain the previous permit number and carry forward all previous data from past permits.

Public Participation

Approve	Deny	Signatures	Date
X		<i>Jared Lescavage</i> Jared Lescavage / Project Manager	March 16, 2026
x		<i>Scott M Arwood</i> Scott M. Arwood, P.E. / Environmental Engineer Manager	03/17/2026

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>.0005</u>
Latitude	<u>40° 28' 59.36"</u>	Longitude	<u>-78° 16' 38.12"</u>
Quad Name	_____	Quad Code	_____
Wastewater Description: <u>Sewage Effluent</u>			
Receiving Waters	<u>Frankstown Branch Juniata River (HQ-CWF, MF), Canoe Creek (HQ-CWF, MF), and Canoe Creek (WWF, MF)</u>	Stream Code	<u>16252</u>
NHD Com ID	<u>65607838</u>	RMI	<u>0.2400</u>
Drainage Area	<u>258</u>	Yield (cfs/mi ²)	_____
Q ₇₋₁₀ Flow (cfs)	<u>22.7</u>	Q ₇₋₁₀ Basis	<u>StreamStats</u>
Elevation (ft)	_____	Slope (ft/ft)	_____
Watershed No.	<u>11-A</u>	Chapter 93 Class.	<u>HQ-CWF, MF</u>
Existing Use	_____	Existing Use Qualifier	_____
Exceptions to Use	_____	Exceptions to Criteria	_____
Assessment Status	<u>Not Assessed</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>Mifflintown Municipal Authority</u>		
PWS Waters	<u>Juniata River</u>	Flow at Intake (cfs)	_____
PWS RMI	<u>37</u>	Distance from Outfall (mi)	<u>90</u>

Changes Since Last Permit Issuance: None

Other Comments: N/A

Compliance History	
Summary of DMRs:	DMRs submitted timely.
Summary of Inspections:	Inspection done in 2023 by Fred Clark resulted in a clean facility with no violations noted.

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
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: N/A