

Application Type New
Wastewater Type Sewage
Facility Type SRSTP

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

Application No. PA0272353
APS ID 996095
Authorization ID 1278185

Applicant, Facility and Project Information



Applicant Name	<u>Don P. Hegburg</u>	Facility Name	<u>Don Hegburg SRSTP</u>
Applicant Address	<u>729 Railroad Street</u> <u>Clarion, PA 16214</u>	Facility Address	<u>1239 Slalom Run Road</u> <u>Clarion, PA 16214</u>
Applicant Contact	<u>Don Hegburg</u>	Facility Contact	<u></u>
Applicant Phone	<u>(814) 229-6935</u>	Facility Phone	<u></u>
Client ID	<u>179967</u>	Site ID	<u>837233</u>
Municipality	<u>Clarion Township</u>	County	<u>Clarion</u>
SIC Code	<u>8800</u>	SIC Code	<u>4952</u>
SIC Description	<u>Private Households</u>	SIC Description	<u>Trans. & Utilities - Sewerage Systems</u>
Application Received	<u>June 3, 2019</u>	WQM Required	<u>pending</u>
Application Accepted	<u>July 10, 2019</u>	WQM App. No.	<u>1619404</u>
Project Description	<u>Single Residence Sewage Treatment Plant.</u>		

Summary of Review

This proposal is for Hemlock Acres 11.5-acre Lot 2. No violations are reported for the applicant.

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
		William H. Mentzer, P.E. Environmental Engineering Specialist	July 10, 2019
		Justin C. Dickey, P.E. Environmental Engineer Manager	

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	<u>001</u>	Design Flow (MGD)	<u>0.0004</u>
Latitude NHD	<u>41° 12' 55.00"</u>	Longitude NHD	<u>-79° 20' 42.87"</u>
Latitude DP	<u>41° 12' 55.00"</u>	Longitude DP	<u>-79° 20' 42.39"</u>
Quad Name	<u>Strattanville</u>	Quad Code	<u>0911</u>
Wastewater:	<u>Treated single residence domestic wastes</u>		
Receiving Waters	<u>Unnamed Tributary to Clarion River</u>	Stream Code	<u>49701</u>
NHD Com ID	<u>102670293</u>	RMI	<u>0.0900</u>
Drainage Area	<u>0.36</u>	Yield (cfs/mi ²)	<u>0.11</u>
Q ₇₋₁₀ Flow (cfs)	<u>0.041</u>	Q ₇₋₁₀ Basis	<u>Mahoning Creek</u>
Elevation (ft)	<u>1140.00</u>	Slope (ft/ft)	<u>0.0631</u>
Watershed No.	<u>17B</u>	Chapter 93 Class.	<u>Cold Water Fish</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>The Discharge RMI is from Clarion River mid-stream.</u>		
Assessment Status	<u>Impaired</u>		
Cause(s) of Impairment	<u>Metals, PH</u>		
Source(s) of Impairment	<u>ACID MINE DRAINAGE</u>		
TMDL Status	_____	Name	_____
Background/Ambient Data		Data Source	
pH (SU)	_____		_____
Temperature (°F)	_____		_____
Hardness (mg/L)	_____		_____
Other:	_____		_____
Nearest Downstream Public Water Supply Intake	<u>Clarion District Pa American</u>		
PWS Waters	<u>Clarion River</u>	Flow at Intake (cfs)	<u>NA</u>
PWS RMI	<u>33.47</u>	Distance from Outfall (mi)	<u>1.98</u>

Changes Since Last Permit Issuance: NA

Other Comments: NA

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	Instant. 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	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