

Application Type New  
Wastewater Type Sewage  
Facility Type SRSTP

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

Application No. PA0272396  
APS ID 996394  
Authorization ID 1278690

**Applicant, Facility and Project Information**

Applicant Name	<u>Gary I Snyder</u>	Facility Name	<u>Gary Snyder SRSTP</u>
Applicant Address	<u>4119 Maple Grove Drive</u> <u>Erie, PA 16510-6601</u>	Facility Address	<u>130 Gay Road</u> <u>North East, PA 16428</u>
Applicant Contact	<u>Gary Snyder</u>	Facility Contact	<u></u>
Applicant Phone	<u>(814) 646-7690</u>	Facility Phone	<u></u>
Client ID	<u>350873</u>	Site ID	<u>835404</u>
Municipality	<u>North East Township</u>	County	<u>Erie</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>
Application Received	<u>June 12, 2019</u>	WQM Required	<u>pending</u>
Application Accepted	<u>July 11, 2019</u>	WQM App. No.	<u>2519415</u>
Project Description	<u>Single Residence Sewage Treatment Plant.</u>		

**Summary of Review**

Proposed is a replacement of a malfunctioning on-lot system serving a three-bedroom home. Design is for 400-gpd and 1.1-PPD.

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		William H. Mentzer, P.E. Environmental Engineering Specialist	July 17, 2019
X		Justin C. Dickey, P.E. Environmental Engineer Manager	

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	<u>001</u>	Design Flow (MGD)	<u>00004</u>
Latitude NHD	<u>42° 15' 50.94"</u>	Longitude NHD	<u>-79° 46' 23.34"</u>
Latitude DP	<u>42° 15' 50.11"</u>	Longitude DP	<u>-79° 46' 27.36"</u>
Quad Name	<u>North East</u>	Quad Code	<u>0107</u>
Wastewater:	<u>Treated single residence domestic wastes</u>		
Receiving Waters	<u>Storm drain to Lake Erie</u>	Stream Code	<u>unknown</u>
NHD Com ID	<u>123924719</u>	RMI	<u>0.03</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>591.75</u>	Slope (ft/ft)	<u>0.01902</u>
Watershed No.	<u>15A</u>	Chapter 93 Class.	<u>Cold Water &amp; Migratory 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>Discharge is to a storm sewer inlet for conveyance to Lake Erie. Storm sewer outlet location is</u>		
	<u>Is not reported.</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>State of New York</u>		
PWS Waters	<u>Lake Erie</u>	Flow at Intake (cfs)	<u>NA</u>
PWS RMI	<u>953.46</u>	Distance from Outfall (mi)	<u>0.72</u>

Changes Since Last Permit Issuance: NA

Other Comments: No water supply impairments 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 (MGD)	Report Annl Avg	XXX	XXX	XXX	XXX	XXX	1/year	Measured
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	Upon Request	Grab
BOD5	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
TSS	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200	XXX	1000	1/year	Grab

Compliance Sampling Location: Outfall 001 after disinfection