

Application Type New
Wastewater Type Sewage
Facility Type SRSTP

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

Application No. PA0288101
APS ID 1011431
Authorization ID 1305665

Applicant, Facility and Project Information

Applicant Name	<u>Craig Toocheck</u>	Facility Name	<u>Craig Toocheck SRSTP</u>
Applicant Address	<u>520 Edgewood Avenue</u> <u>Trafford, PA 15085</u>	Facility Address	<u>2975 Dawson Run Road</u> <u>West Hickory, PA 16370</u>
Applicant Contact	<u>Craig Toocheck</u>	Facility Contact	<u></u>
Applicant Phone	<u>(412) 973-9040</u>	Facility Phone	<u></u>
Client ID	<u>355182</u>	Site ID	<u>840301</u>
Municipality	<u>Harmony Township</u>	County	<u>Forest</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>January 31, 2020</u>	WQM Required	<u>Yes, review pending concurrently</u>
Application Accepted	<u>March 4, 2020</u>	WQM App. No.	<u>2720401</u>
Project Description	<u>Single Residence Sewage Treatment Plant.</u>		



Summary of Review

No violations listed.

According to the Small Flow Treatment Facility's Manual the proposed treatment facilities are poorly located within 50-feet of the facility water supply.

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	March 16, 2020
		Justin C. Dickey, P.E. Environmental Engineer Manager	

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	001	Design Flow (MGD)	.0004
Latitude DP	41° 33' 24.25"	Longitude DP	-79° 26' 0.06"
Latitude NHD	41° 33' 24.25"	Longitude NHD	-79° 26' 0.06"
Quad Name	West Hickory	Quad Code	0610
Wastewater:	Treated single residence domestic wastes		
Receiving Waters	Unnamed Tributary to Allegheny River	Stream Code	unknown
NHD Com ID	100473925	RMI	0.17
Drainage Area	0.1	Yield (cfs/mi ²)	0
Q ₇₋₁₀ Flow (cfs)	0	Q ₇₋₁₀ Basis	Dry stream
Elevation (ft)	1110.00	Slope (ft/ft)	0.18939
Watershed No.	16F	Chapter 93 Class.	Cold Water Fish
Existing Use	statewide	Existing Use Qualifier	none
Exceptions to Use	none	Exceptions to Criteria	none
Comments	Drains to Allegheny RMI157.72 and 0.64 mile above tributary 55598		
Assessment Status	Attaining Use(s)		
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	Aqua PA (Emlenton Water)		
PWS Waters	Allegheny River	Flow at Intake (cfs)	NA
PWS RMI	90.57	Distance from Outfall (mi)	66.36

Changes Since Last Permit Issuance: NA

Other Comments: No downstream public water supply impacts are 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) ⁽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
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	Upon Request	Grab
CBOD5	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	1000	1/year	Grab

Compliance Sampling Location: Outfall 0\01 after disinfection

Other Comments: UV radiation monitoring and maintenance as stated on the Annual Maintenance Report (AMR)