

1299 HARRISBURG PIKE P.O. BOX 4425 LANCASTER, PA 17604 PHONE: (717) 397-9968 FAX: (717) 397-9973 www.lcswma.org

February 2, 2005

Mr. Joe Roth; Water Quality Specialist Pennsylvania Department of Environmental Protection Bureau of Water Quality Management 909 Elmerton Avenue Harrisburg, PA 17110-8200

Ref: NPDES Permit #PAR503501

Frey Farm Landfill; Stormwater Discharge

Dear Mr. Roth:

I am pleased to enclose the NPDES DMR's and the "Additional Information" form regarding stormwater discharge from the above referenced facility for each of the two (2) permitted outfalls. In accordance with the permit issued October 8, 2004, this report completes the annual compliance monitoring required.

I have reviewed the results from this sampling event. As with previous events, they generally parallel historic or seasonal information previously reported to the Department.

Thank you for your efforts regarding our permitting activities. Feel free to call if you have any questions or comments.

Sincerely,

Brooks K. Norris

Technical Services Manager

Enclosures

cc: Jim Warner

Bob Zorbaugh Bob Eshbach

Jeff Musser (w/enclosures)

Tom Hanlon (PaDEP; w/enclosures)
Randy Weiss (PaDEP; w/enclosures)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT - STORMWATER

APPENDIX J

NAME:

Lancaster County Solid Waste Management Auth.

ADDRESS:

1299 Harrisburg Pike

Lancaster, PA 17604-4425

FACILITY: LOCATION:

LCSWMA Frey Farm Landfill Manor Township, Lancaster County

Manns Run - WWF - 7-J

	DI	SCHARGE	NO. PA	AR50350	01; Outfall	001	
		MON	ITORE	NG PE	RIOD		
	YEAR	MONTH	DAY		YEAR	MONTH	DAY
FROM	2005	01	01	TO	2005	12	31

NOTE: Read instructions before completing this form

		QUA	ANTITY OR LO	DADING	Q		CONCENTRA	TION	NO	ANALYSIS	SAMPLE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX	FREQUENCY	TYPE
	SAMPLE		 				l		 	+	
C-Biochemical	MEASUREMENT	XXX	l xxx i		XXX	XXX	2.9			1 /year	Grab
Oxygen	PERMIT						Report				4-1-
Demand (5-Day)	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	1 /year	Grab
	SAMPLE							-		T	
	MEASUREMENT	XXX	XXX		XXX	XXX	39			1/year	Grab
Chemical Oxygen	PERMIT						Report				
Demand	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/I	X	1 /year	Grab
	SAMPLE	1	i I								
	MEASUREMENT	XXX	XXX		XXX	XXX	4.8			1 /year	Grab
	PERMIT						Report				
Oil and Grease	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	l/year	Grab
	SAMPLE	·	ا ا								١
į	MEASUREMENT	XXX	XXX		XXX	XXX	7.30	·	<u> </u>	l /year	Grab
.,,,	PERMIT	1777/	76777	1/3/3/		3/3/3/	Report	Std.	1 ,		a
pН	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	Unit	X	1 /year	Grab
Total	SAMPLE MEASUREMENT	xxx	VVV		VVV	xxx	537			I bassa	Carola
Suspended Solids	PERMIT		XXX		XXX	7.7.7	Report			I /year	Grab
(TSS)	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	x	1/year	Grab
(135)	SAMPLE		 ~~~	222	1 222	AAA	Daily Iviax	111271	 ^	17900	0,10
Total	MEASUREMENT	XXX	xxx	•	xxx	xxx	2.0		1	I /year	Grab
Kjeldahl Nitrogen	PERMIT	7551	7220		1221	1221	Report			*******	0.40
(TKN)	REQUIREMENT	XXX	xxx	xxx	XXX	XXX	Daily Max	mg/l	x	l /year	Grab
	SAMPLE			·				•			
	MEASUREMENT	XXX	xxx		XXX	XXX	0.65			1 /year	Grab
1	PERMIT		Ţ				Report			1	
Total Phosphorus	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	rng/l	х	1 /year	Grab
	SAMPLE		1						Ĭ		
Effluent Guideline	MEASUREMENT	XXX	XXX		XXX	XXX					
Pollutants	PERMIT						Report				
(Name:	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	1 /year	Grab
	SAMPLE										
	MEASUREMENT	XXX	XXX		XXX	XXX	9.88			1/year	Grah
l	PERMIT						Report	_	1	1	
Iron (Total)	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	1/year	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 and 33 U.S.C. 1319.

Mr. James D. Warner, Executive Director NAME/TITLE EXECUTIVE OFFICER

TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER / AGENT TELEPHONE DATE

610 593-5710 2005 01/31

AREA NUMBER YEAR MONTH/DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (PLEASE USE SEPARATE SHEET OF PAPER IF NECESSARY)



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WATER SUPPLY AND WASTEWATER MANAGEMENT

ADDITIONAL INFORMATION FOR THE REPORTING OF STORMWATER DISCHARGE MONITORING

(This form must be completed and submitted with the DMR form for each outfall sampled)

A.	PERMITTEE'S NAME:	OUTFALL/DISCHARGE NO.:
	Lancaster County Solid Waste Management Authority FACILITY/LOCATION:	PAR503501; Outfall 001
	Frey Farm Landfill; Manor Township; Lancaster County, PA; N	lanns Run - WWF - 7J
		·
В.	SAMPLED STORM EVENT	
	Provide the date of storm event:	Provide the duration (in hours) of storm event:
	01/14/2005	11 hrs
	Estimate rainfall measurements (in inches) of the storm which generated the sample runoff:	Estimate the duration between the storm event sampled and the end of the previous measurement (greater than 0.1 inch rainfall) storm event:
	1.57 inches	SIGNIT CYCIIC.
		2 days
	Drainage area and volume of runoff: See Attached	
(4)	<u></u>	
	Paved area square feet x 0.9 (estimated runoff coefficient) x r	
	Unpaved area square feet x 0.5 (estimated runoff coefficient)	-
Tota	areasquare feet Total v	volume of discharge gallons
C.	GRAB SAMPLE METHODOLOGY	
	If a grab sample during the first 30 minutes of the discharge was i	impracticable, and the sample was instead taken during the first hour
	of the discharge, describe the circumstances:	
	Not Applicable	
D.	SAMPLE WAIVER	
	If samples could not be collected due to adverse climatic conditi documentation of the event:	ions, describe why samples could not be collected. Attach available
	Not Applicable	
	Тоглурноцые	
	If monitoring data submitted is being used to assure the state of the	A-N-D-d-d-d-d-d-d-d-d-d-d-d-d-d-d-d-d-d-d
	of runoff under item B. above for each outfall.	stantially identical outfalls, summarize on a drainage area and volume
L		

Location:	Sed A + B (001)	Sed C (002)
Date:	1/14/05	1/14/05
Storm Duration (hrs.):	11	 11
Discharge Duration (hrs.):	9	i 9,9 m. n
Drainage area (acres)	80.4	41.3
Drainage area (sq. ft.)	3,502,224	1,799,028
Run-Off Coef.	0.5	0.5
Rainfall (in.)	1.57	1.57
Rainfall (ft.)	0.131	0.131
Total Run-Off (cu. ft.)	229,104	117,686
Total Run-Off (gallons)	1,713,697	880,294
Estimated Total Discharge (gallons)	1,402,115	720,241
Time since last rainfall > 0.1 in. (days)	. 2	2

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT - STORMWATER

APPENDIX J

NAME:

Lancaster County Solid Waste Management Auth.

ADDRESS:

1299 Harrisburg Pike

Lancaster, PA 17604-4425

FACILITY: LOCATION: LCSWMA Frey Farm Landfill Manor Township, Lancaster County

Manns Run - WWF - 7-J

	DI	SCHARGE	NO. PA	R50350	01; Outfall	002	
		MON	ITORI	NG PE	RIOD		
	YEAR	MONTH	DAY		YEAR	MONTH	DAY
FROM	2005	01	01	то	2005	12	31

NOTE: Read instructions before completing this form

		QUA	NTITY OR L	DADING	Q		CONCENTRA	TION	NO	ANALYSIS	SAMPLE
PARAMETER		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	ĽΧ	REQUENCY	TYPE
	SAMPLE										
C-Biochemical	MEASUREMENT	XXX	XXX		XXX	XXX	6.5			1 /year	Grab
Oxygen	PERMIT						Report				
Demand (5-Day)	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	1/year	Grab
	SAMPLE										
	MEASUREMENT	XXX	XXX		XXX	XXX	41			1 /year	Grab
Chemical Oxygen	PERMIT		l i				Report			1	_
Demand	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	l /year	Grab
	SAMPLE					V25.11/	[, _m , ,			1	0.1
	MEASUREMENT	XXX	XXX		XXX	XXX	ND @2			l /year	Grab
0.1 1.0	PERMIT	7/3/1/	7777	UVV	VVV		Report	—-d	١.,	1	C h
Oil and Grease	REQUIREMENT SAMPLE	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/1	X	1 /year	Grab
	MÊASUREMENT	XXX	xxx		XXX	xxx	7.80		i	1 /year	Grab
	PERMIT	222	^^^			777	Report	Std.	-	1 / year	GIAD
pH	REQUIREMENT	XXX	XXX	xxx	xxx	XXX	Daily Max	Unit	l x	1 /year	Grab
, , , , , , , , , , , , , , , , , , ,	SAMPLE	TO CAS	7.7.7.	70.01			Duty Hart	Care	 ^	11,500.	
Total	MEASUREMENT	XXX	XXX		XXX	xxx	572		[1 /year	Grab
Suspended Solids	PERMIT						Report				
(TSS)	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	1 /year	Grab
	SAMPLE										
Total	MEASUREMENT	XXX	XXX		XXX	XXX	2.0			1 /year	Grab
Kjeldahl Nitrogen	PERMIT		ľ				Report		"		
(TKN)	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	1/year	Grab
	SAMPLE									1	<i>a</i> .
	MEASUREMENT	XXX	XXX		XXX	XXX	0.60		-	1 /year	Grab
	PERMIT	VVV	VVV	VVV	VVV	VVV	Report		v	1.7	Chale
Total Phosphorus	REQUIREMENT SAMPLE	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	X	1 /year	Grab
Effluent Guideline	MEASUREMENT	XXX	XXX		XXX	xxx					
Pollutants	PERMIT		- AAA		- ^^^		Report			+	
(Name:)	REQUIREMENT	xxx	XXX	xxx	XXX	XXX	Daily Max	mg/l	l x	1 /vcar	Grab
13 TOTAL	SAMPLE	7337	1000	100	7521	1000	Luny max	11191	 ^	17,000	2.00
	MEASUREMENT	XXX	XXX		XXX	XXX	12.4			l /vear	Grab
	PERMIT	†	1			1	Report			1	
Iron (Total)	REQUIREMENT	XXX	XXX	XXX	XXX	XXX	Daily Max	mg/l	х	1 /year	Grab

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See 18 U.S.C. 1001 and 33 U.S.C. 1319.

Mr. James D. Warner, Executive Director NAME/TITLE EXECUTIVE OFFICER~ TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER / AGENT TELEPHONE

610 593-5710 2005 01/31 AREA NUMBER YEAR MONTH/DAY

DATE

COMMENT AND EXPLANATION OF ANY VIOLATIONS (PLEASE USE SEPARATE SHEET OF PAPER IF NECESSARY)

Rev. 7/2004



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WATER SUPPLY AND WASTEWATER MANAGEMENT

ADDITIONAL INFORMATION FOR THE REPORTING OF STORMWATER DISCHARGE MONITORING

(This form must be completed and submitted with the DMR form for each outfall sampled)

Α.	PERMITTEE'S NAME:	OUTFALL/DISCHARGE NO.:
	Lancaster County Solid Waste Management Authority	PAR503501; Outfall 002
-	FACILITY/LOCATION:	Altotoori, Gullan 002
	Frey Farm Landfill; Manor Township; Lancaster County, PA; N	Isano Rus MAVE 71
	Frey Farm Landin; Martor Township; Lancaster County, PA; W	nanns mun - wwr - 73
В.	SAMPLED STORM EVENT	
	Provide the date of storm event:	Provide the duration (in hours) of storm event:
	01/14/2005	11 hrs
	Estimate rainfall measurements (in inches) of the storm which	Estimate the duration between the storm event sampled and the
	generated the sample runoff:	end of the previous measurement (greater than 0.1 inch rainfall) storm event:
	1.57 inches	
		2 days
	Drainage area and volume of runoff: See Attached	· · · · · · · · · · · · · · · · · · ·
(1)	Paved areasquare feet x 0.9 (estimated runoff coefficient) x i	rainfall inches x 0.6234 = gallons
	Unpaved area square feet x 0.5 (estimated runoff coefficient	
		volume of discharge gallons
C.	GRAB SAMPLE METHODOLOGY	
	of the discharge, describe the circumstances:	impracticable, and the sample was instead taken during the first hour
]	Not Applicable	
D.	SAMPLE WAIVER	
	If samples could not be collected due to adverse climatic condit documentation of the event:	ions, describe why samples could not be collected. Attach available
	Not Applicable	
	If monitoring data submitted is being used to represent other subs	stantially identical outfalls, summarize on a drainage area and volume
1	of runoff under item B. above for each outfall.	

Location:	Sed A + B (001)	Sed C (002)
Date:	1/14/05	1/14/05
Storm Duration (hrs.):	11	11
Discharge Duration (hrs.):	9	9
Drainage area (acres)	80.4	41.3
Drainage area (sq. ft.)	3,502,224	1,799,028
Run-Off Coef.	0.5	0.5
Rainfall (in.)	1.57	1.57
Rainfall (ft.)	0.131	0.131
Total Run-Off (cu. ft.)	229,104	117,686
Total Run-Off (gallons)	1,713,697	880,294
Estimated Total Discharge (gallons)	1,402,115	720,241
Time since last rainfall > 0.1 in. (days)	2	2