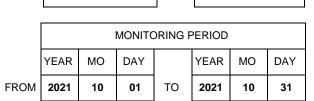
## 3800-FM-BCW0462 12/2016



# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

# NAME:LANCASTER CNTY SWMAADDRESS:PO BOX 44251299 HARRISBURG PIKE, LANCASTER PA,<br/>17604-4425FACILITY:LCSWMA CRESSWELL LFLOCATION:3049 RIVER RD, CONESTOGA PA, 17516-9328STAGE:Final Effluent

PA0043486 PERMIT NUMBER



001

OUTFALL NUMBER

Reporting Frequency: DMR Effective From:

DMR Effective To: Permit Expires:

Permit Application Due:

No Discharge:

| Monthly    |  |  |
|------------|--|--|
| 10/01/2021 |  |  |
| 10/31/2021 |  |  |
| 12/31/2016 |  |  |
| 07/04/2016 |  |  |
|            |  |  |

### PARAMETERS REPORTED VALUES

| PARAMETER                                            |                    | QUA                          | NTITY OR LOA                  | DING            | Q          | UANTITY OR (  | CONCENTRATIO                  | N     | SAMPLING FREQUENCY | SAMPLING TYPE   |  |
|------------------------------------------------------|--------------------|------------------------------|-------------------------------|-----------------|------------|---------------|-------------------------------|-------|--------------------|-----------------|--|
| FARAMETER                                            |                    | VALUE                        | VALUE                         | VALUE UNITS VAL |            | VALUE VALUE   |                               | UNITS | SAMPLING PREQUENCT |                 |  |
| Dissolved Oxygen (00300)                             | Sample Measurement | ***                          | ***                           | ***             | 6.8        | ***           | ***                           | mg/L  | 5/week             | Grab            |  |
|                                                      | Permit Requirement | ***                          | ***                           |                 | 5.0<br>Min | ***           | ***                           |       | 5/week             | Grab            |  |
| рН (00400)                                           | Sample Measurement | ***                          | ***                           | ***             | 7.2        | ***           | 7.4                           | S.U.  | 5/week             | Grab            |  |
|                                                      | Permit Requirement | ***                          | ***                           |                 | 6.0<br>Min | ***           | 9.0<br>Max                    |       | 5/week             | Grab            |  |
| Total Suspended Solids (00530)                       | Sample Measurement | 6.14                         | 6.14                          | lbs/day         | ***        | 9.00          | 9.00                          | mg/L  | 1/month            | 24-Hr Composite |  |
|                                                      | Permit Requirement | 65<br>Avg Mo                 | 211<br>Daily Max              |                 | ***        | 27<br>Avg Mo  | 88<br>Daily Max               |       | 1/month            | 24-Hr Composite |  |
| Total Nitrogen (00600)                               | Sample Measurement | ***                          | ***                           | ***             | ***        | ***           | 7.6                           | mg/L  | 1/month            | Calculation     |  |
|                                                      | Permit Requirement | ***                          | ***                           |                 | ***        | ***           | Monitor & Report<br>Daily Max |       | 1/month            | Calculation     |  |
| Ammonia-Nitrogen (00610)                             | Sample Measurement | < .173                       | .290                          | lbs/day         | ***        | < .238        | .514                          | mg/L  | 1/week             | 24-Hr Composite |  |
| (May-Oct)                                            | Permit Requirement | 3.6<br>Avg Mo                | 7.2<br>Daily Max              |                 | ***        | 1.5<br>Avg Mo | 3.0<br>Daily Max              |       | 1/week             | 24-Hr Composite |  |
| Total Kjeldahl Nitrogen (00625)                      | Sample Measurement | ***                          | ***                           | ***             | ***        | ***           | 1.9                           | mg/L  | 1/month            | 24-Hr Composite |  |
|                                                      | Permit Requirement | ***                          | ***                           |                 | ***        | ***           | Monitor & Report<br>Daily Max |       | 1/month            | 24-Hr Composite |  |
| Nitrate-Nitrite as N (00630)                         | Sample Measurement | ***                          | ***                           | ***             | ***        | ***           | 5.7                           | mg/L  | 1/month            | 24-Hr Composite |  |
|                                                      | Permit Requirement | ***                          | ***                           |                 | ***        | ***           | Monitor & Report<br>Daily Max |       | 1/month            | 24-Hr Composite |  |
| Total Phosphorus (00665)                             | Sample Measurement | ***                          | .07                           | lbs/day         | ***        | ***           | .10                           | mg/L  | 1/month            | 24-Hr Composite |  |
|                                                      | Permit Requirement | ***                          | Monitor & Report<br>Daily Max |                 | ***        | ***           | Monitor & Report<br>Daily Max |       | 1/month            | 24-Hr Composite |  |
| Iron, Total (01045)                                  | Sample Measurement | .110                         | .143                          | lbs/day         | ***        | .185          | .210                          | mg/L  | 2/month            | 24-Hr Composite |  |
|                                                      | Permit Requirement | 4.3<br>Avg Mo                | 8.6<br>Daily Max              |                 | ***        | 1.8<br>Avg Mo | 3.6<br>Daily Max              |       | 2/month            | 24-Hr Composite |  |
| Flow (50050)                                         | Sample Measurement | .10304                       | .35420                        | MGD             | ***        | ***           | ***                           | ***   | Continuous         | Metered         |  |
|                                                      | Permit Requirement | Monitor & Report<br>Avg Mo   | Monitor & Report<br>Daily Max |                 | ***        | ***           | ***                           |       | Continuous         | Metered         |  |
| Total Nitrogen (Total Load, lbs) (51445)             | Sample Measurement | 161.4                        | ***                           | lbs             | ***        | ***           | ***                           | ***   | 1/month            | Calculation     |  |
|                                                      | Permit Requirement | Monitor & Report<br>Total Mo | ***                           |                 | ***        | ***           | ***                           |       | 1/month            | Calculation     |  |
| Ammonia-Nitrogen (Total Load, lbs) (51446)           | Sample Measurement | < 5.365                      | ***                           | lbs             | ***        | ***           | ***                           | ***   | 1/month            | Calculation     |  |
|                                                      | Permit Requirement | Monitor & Report<br>Total Mo | ***                           |                 | ***        | ***           | ***                           |       | 1/month            | Calculation     |  |
| Total Kjeldahl Nitrogen (Total Load, lbs) (51449)    | Sample Measurement | 40.2                         | ***                           | lbs             | ***        | ***           | ***                           | ***   | 1/month            | Calculation     |  |
|                                                      | Permit Requirement | Monitor & Report<br>Total Mo | ***                           |                 | ***        | ***           | ***                           |       | 1/month            | Calculation     |  |
| Nitrate-Nitrite as N (Total Load, lbs) (51450)       | Sample Measurement | 121.2                        | ***                           | lbs             | ***        | ***           | ***                           | ***   | 1/month            | Calculation     |  |
|                                                      | Permit Requirement | Monitor & Report<br>Total Mo | ***                           |                 | ***        | ***           | ***                           |       | 1/month            | Calculation     |  |
| Total Phosphorus (Total Load, lbs) (51451)           | Sample Measurement | 2.11                         | ***                           | lbs             | ***        | ***           | ***                           | ***   | 1/month            | Calculation     |  |
|                                                      | Permit Requirement | Monitor & Report<br>Total Mo | ***                           |                 | ***        | ***           | ***                           |       | 1/month            | Calculation     |  |
| rbonaceous Biochemical Oxygen Demand (CBOD5) (80082) | Sample Measurement | 1.64                         | 1.64                          | lbs/day         | ***        | 2.40          | 2.40                          | mg/L  | 1/month            | 24-Hr Composite |  |
|                                                      | Permit Requirement | 60<br>Avg Mo                 | 120<br>Daily Max              |                 | ***        | 25<br>Avg Mo  | 50<br>Daily Max               |       | 1/month            | 24-Hr Composite |  |
| Facility Sampling Point Comments                     |                    |                              |                               |                 | 1          | -             |                               |       |                    |                 |  |



# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER DISCHARGE MONITORING REPORT (DMR)

### ATTACHMENT DETAILS

| File Name data data data data data data data dat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                   |                      |           | Att                                                          | achment Type          |                           |                   | Uploaded Tir              | me                                                     | Attachment Comments |              |                   |              |                |          |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------|--------------------------------------------------------------|-----------------------|---------------------------|-------------------|---------------------------|--------------------------------------------------------|---------------------|--------------|-------------------|--------------|----------------|----------|--|
| Sewage S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ludge Biosolids Dispos                                                                                                            | al Report_10 2021.pc | lf        | Sewage Sludge / Biosolids Production and Disposal Form       |                       |                           |                   |                           | 2021-11-10T13:38:01-05:00                              |                     |              |                   |              |                |          |  |
| D                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | aily Effluent Monitoring                                                                                                          | 10 2021.pdf          |           | Daily Effluent Monitoring Form                               |                       |                           |                   |                           | 2021-11-10T13:36:06-05:00                              |                     |              |                   |              |                |          |  |
| L                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ab Accreditation Form                                                                                                             | _10 2021.pdf         |           | Laboratory Accreditation Form                                |                       |                           |                   | 2021-11-10T13:36:38-05:00 |                                                        |                     |              |                   |              |                |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Nutrient Monitoring Re                                                                                                            | eport_10.pdf         |           | Nutrient Monitoring Form                                     |                       |                           |                   | 2021-11-10T13:37:10-05:00 |                                                        |                     |              |                   |              |                |          |  |
| La                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | b Results CWLEEFFS_                                                                                                               | _10.19.21.PDF        |           | Laboratory Analytical Report<br>Laboratory Analytical Report |                       |                           |                   |                           | 2021-11-10T13:40:20-05:00<br>2021-11-10T13:39:11-05:00 |                     |              |                   |              |                |          |  |
| La                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ab Results CWLEEFFS                                                                                                               | _10.5.21.PDF         |           |                                                              |                       |                           |                   |                           |                                                        |                     |              |                   |              |                |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | b Results CWLEEFFS_                                                                                                               | _                    |           |                                                              | Laborato              | atory Analytical Report 2 |                   |                           | 2021-11-10T13:39:52-05:00                              |                     |              |                   |              |                |          |  |
| La                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | b Results CWLEEFFS_                                                                                                               | _10.26.21.PDF        |           |                                                              | Laborato              | ory Analytical Report     |                   |                           | 2021-11-10T13:40:                                      | 42-05:00            |              |                   |              |                |          |  |
| ERMIT VIOLATIONS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 3                                                                                                                                 |                      |           |                                                              |                       |                           |                   |                           |                                                        |                     |              |                   |              |                |          |  |
| Non-Compliance ID                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Event Start Date                                                                                                                  | Event End Date       | Parameter | Limit Type Reported Value Permit Limit Unit                  |                       |                           |                   | Sampl                     | Sampling Point Cause Of Non-Compliance                 |                     |              | Corrective Action |              |                | Comments |  |
| THER PERMIT VIOL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                   | Ion-Compliance Typ   | l         | Discharged<br>Sampling Pe                                    | oint                  |                           | Para              | ameter                    |                                                        | Reported            | Value        |                   | Permit Limit |                | Comments |  |
| OMMENT DETAILS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | L                                                                                                                                 | Comments             |           |                                                              | T                     |                           | perator Name      |                           | I                                                      | Operator Certifica  | stion Number |                   | Operator     | Contact Number |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                   | Comments             |           |                                                              |                       | 0                         |                   |                           |                                                        | Operator Certifica  | ation Number |                   | Operator     |                |          |  |
| UBMISSION INFORI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | MATION                                                                                                                            |                      |           |                                                              |                       |                           |                   |                           |                                                        |                     |              |                   |              |                |          |  |
| SUBMITTED BY<br>GREENPORT USER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | NPORT USER electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify und |                      |           |                                                              |                       | certify under             | nder Daniel Brown |                           | TELEPHONE                                              |                     | DATE         |                   |              |                |          |  |
| browndan1 penalty of law that this document and all attachments were prepared under your direction or supervision in accordance wit system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any fa statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities). |                                                                                                                                   |                      |           | itted. Based on                                              | your inquiry of       |                           |                   | (717)                     | 553-5864                                               | 2021                | 11           | 1                 |              |                |          |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                   |                      |           | e that any false                                             | SUBMITTED<br>FULL NAM |                           | AREA CODE         | NUMBER                    | YEAR                                                   | МО                  | DA           |                   |              |                |          |  |

falsification to authorities).