



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

NAME: LANCASTER CNTY SWMA
 ADDRESS: 3049 RIVER ROAD, CONESTOGA PA, 17516
 FACILITY: LCSWMA FREY FARM LF SW
 LOCATION: 3049 RIVER RD, CONESTOGA PA, 17516
 STAGE: Final Effluent

PAR503501	001
PERMIT NUMBER	OUTFALL NUMBER

Reporting Frequency: Semi-Annually
 DMR Effective From: 01/01/2021
 DMR Effective To: 06/30/2021
 Permit Expires: 05/31/2019
 Permit Application Due: 12/02/2018
 No Discharge:

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
FROM	2021	01	01	TO	2021	06 30

PARAMETERS REPORTED VALUES

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS		
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	< 15	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.12	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	5	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	< .1	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.069	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments										



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 STAGE: Final Effluent

PAR503501	002
PERMIT NUMBER	OUTFALL NUMBER

Reporting Frequency: Semi-Annually
 DMR Effective From: 01/01/2021
 DMR Effective To: 06/30/2021
 Permit Expires: 05/31/2019
 Permit Application Due: 12/02/2018
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MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
FROM	2021	01	01	TO	2021	06 30

PARAMETERS REPORTED VALUES

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS		
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	< 15	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.32	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	< 5	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	1.1	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.09	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments										



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ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
FFLF_001_3800-PM-WSFR0083t Additional Information 001.pdf	Stormwater Additional Information Form	2021-05-12T12:06:11-04:00	
FFLF_002_3800-PM-WSFR0083t Additional Information 002.pdf	Stormwater Additional Information Form	2021-05-12T12:06:38-04:00	
Lab Results FFSP001S 02S.PDF	Laboratory Analytical Report	2021-05-12T12:08:35-04:00	

PERMIT VIOLATIONS

Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	Unit	Sampling Point	Cause Of Non-Compliance	Corrective Action	Comments
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UNAUTHORIZED DISCHARGES

Non-Compliance ID	Event Start Date	Event End Date	Date and Time Discovered	Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of Discharge	Date and Time DEP Notified Orally	Comments
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OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments
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COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
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SUBMISSION INFORMATION

SUBMITTED BY GREENPORT USER	*Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage in an electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify under penalty of law that this document and all attachments were prepared under your direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquiry of 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 false statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).	Daniel Brown	TELEPHONE		DATE		
browndan1			(717)	553-5864	2021	05	12
		SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	MO	DAY