



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

NAME: LANCASTER CNTY SWMA  
 ADDRESS: PO BOX 44251299 HARRISBURG PIKE, LANCASTER PA, 17604-4425  
 FACILITY: SUSQUEHANNA RESOURCE MANAGEMENT COMPLEX - LANDFILL  
 LOCATION: 1670 S 19TH ST, HARRISBURG PA, 17104-3201  
 STAGE: Final Effluent

<b>PAR403508</b>			<b>005</b>			
PERMIT NUMBER			OUTFALL NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
2021	07	01	TO	2021	12	31

Reporting Frequency: Semi-Annually  
 DMR Effective From: 07/01/2021  
 DMR Effective To: 12/31/2021  
 Permit Expires: 05/31/2017  
 Permit Application Due: 12/02/2016  
 No Discharge:

**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	***	***	***	***	***	7.04	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	52	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.137	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.46	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

<b>PAR403508</b>			<b>007</b>			
PERMIT NUMBER			OUTFALL NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
FROM 2021	07	01	TO	2021	12	31

Reporting Frequency: Semi-Annually  
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 No Discharge:

**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	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
pH (00400)	Sample Measurement	***	***	***	***	***	***	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Facility Sampling Point Comments										



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 STAGE: Final Effluent

<b>PAR403508</b>			<b>008</b>			
PERMIT NUMBER			OUTFALL NUMBER			
MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
2021	07	01	TO	2021	12	31

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 No Discharge:

**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	***	***	***	***	***	75	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.26	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	24	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.27	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	2.3	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments										



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<b>PAR403508</b>	<b>009</b>
PERMIT NUMBER	OUTFALL NUMBER

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 No Discharge:

MONITORING PERIOD							
YEAR	MO	DAY		YEAR	MO	DAY	
FROM	2021	07	01	TO	2021	12	31

**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	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
pH (00400)	Sample Measurement	***	***	***	***	***	***	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Facility Sampling Point Comments										



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<b>PAR403508</b>			<b>010</b>			
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MONITORING PERIOD						
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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS		
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
pH (00400)	Sample Measurement	***	***	***	***	***	***	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	***	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max			
Facility Sampling Point Comments										



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**ATTACHMENT DETAILS**

File Name	Attachment Type	Uploaded Time	Attachment Comments
Lab Results_SRMC Stormwater_11.12.2021.pdf	Laboratory Analytical Report	2022-01-13T14:35:17-05:00	
SRMC_S07_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2022-01-13T15:02:01-05:00	
SRMC_S08_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2022-01-13T15:02:56-05:00	
SRMC_S10_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2022-01-13T15:03:43-05:00	
SRMC_S05_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2022-01-13T15:01:37-05:00	
SRMC_S09_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2022-01-13T15:03:28-05:00	

**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	2022	01	13
			SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	MO