

# **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 SUSQUEHANNA RESOURCE MANAGEMENT COMPLEX - LANDFILL FACILITY: 1670 S 19TH ST, HARRISBURG PA, 17104-3201 LOCATION: STAGE: **Final Effluent**

PAR403508 005 PERMIT NUMBER OUTFALL NUMBER MONITORING PERIOD MO YEAR MO YEAR DAY

01

07

FROM

2022

Reporting Frequency: DMR Effective From: DMR Effective To:

DAY

31

Permit Expires: Permit Application Due: No Discharge:

Semi-Annually		
07/01/2022		
12/31/2022		
05/31/2017		
12/02/2016		

### PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (	CONCENTRATION	N		SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	- SAMPLING FREQUENCY	SAMPLING ITPE
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	***	***	***	***	***	6.86	S.U.	1/6 months	Grab
	Permit Requirement	***	***	-	***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	14	mg/L	1/6 months	Grab
	Permit Requirement	***	***	-	***	***	Monitor & Report Daily Max	1	1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.132	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.73	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab

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2022

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	P	AR4035	608			007	
	PERI		MBER		OUTF	ALL NU	MBER
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			MONITO	DRING F	PERIOD		
	YEAR	МО	DAY		YEAR	MO	DAY
FROM	2022	07	01	то	2022	12	31

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PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (	CONCENTRATION	N		
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TYPE
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***	1	***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments				•					•	



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PERMIT NUMBER OUTFALL NUMBER MONITORING PERIOD МО YEAR MO DAY YEAR DAY FROM 07 2022 01 2022 12 31 то

800

PAR403508

Reporting Frequency:
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DMR Effective To: Permit Expires:

Permit Application Due:

No Discharge:

07/01/2022		
12/31/2022		
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PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (	CONCENTRATION	N	SAMPLING FREQUENCY	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCE	SAMPLING TYPE
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	188	mg/L	1/6 months	Grab
Permit F	Permit Requirement	***	***	-	***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.74	S.U.	1/6 months	Grab
Permit Re	Permit Requirement	***	***	-	***	***	Monitor & Report Daily Max		1/6 months	Grab
	Sample Measurement	***	***	***	***	***	395	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.142	mg/L	1/6 months	Grab
	Permit Requirement	***	***	-	***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	1.9	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments									L L	



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	PERI		MBER		OUTF	ALL NU	MBER
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PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	- SAMPLING FREQUENCY	SAMPLING TYPE
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
	Sample Measurement	***	***	***	***	***	***	S.U.		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***	]	***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments									1 I	



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PAR403508 010 PERMIT NUMBER OUTFALL NUMBER MONITORING PERIOD MO YEAR MO YEAR DAY

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#### PARAMETERS REPORTED VALUES

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

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### ATTACHMENT DETAILS

	Attachment Type						Uploaded Time			Attachment Comments						
SRMC_S	09_NPDES DMR Additional Information.pdf Stormwater Additional Information Form							2023-01-20T13:43:56-05:00								
La	ab Results_005 008_1	0.13.2022.pdf		Laboratory Analytical Report					2023-01-20T13:42:21-05:00							
SRMC_S	10_NPDES DMR Addi	tional Information.pdf		Stormwater Additional Information Form					2023-01-20T13:44:17-05:00							
SRMC_S	07_NPDES DMR Addi	tional Information.pdf		Stormwater Additional Information Form					2023-01-20T13:43:10-05:00							
SRMC_S	08_NPDES DMR Addi	tional Information.pdf		Stormwater Additional Information Form					2023-01-20T13:43:35-05:00							
SRMC_S	05_NPDES DMR Addi	tional Information.pdf		Stormwater Additional Information Form					2023-01-20T13:42:41-05:00							
PERMIT VIOLATIONS	i							·			·					
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type	Reported Value	Permit Limit	mit Unit		Sampling Point		Cause Of Non-Compliance		Corrective Action		Comments	
UNAUTHORIZED DIS Non-Compliance ID OTHER PERMIT VIOL	Event Start Date	Event End Date	Event End Date Date and Time Discovered Substance Event Location Volume (gal) Duration (hrs) Receiving Waters Impact On Waters Cause Of Discharge Date and Time DEP Notified   Orally Orally Orally Orally Orally Orally Orally Orally									ed	Comments			
Non-Compliance ID Non-Compliance Type Sampling Po				mpling Point		Parar	meter	Reported Value			F	Permit Limit Commo				
COMMENT DETAILS																
Comments						0	perator Name		Operator Certification Number				Operator Contact Number			
	-				1											
SUBMITTED BY GREENPORT USER *Pursuant to the Pennsylvania Electronic Transactions Act - Act 69, effective January 15, 2002, you are about to engage electronic transaction with the Commonwealth of Pennsylvania. You are submitting official information. You certify und						certify under	ler Daniel Brown		TELEPHONE		DATE					
penalty of law that this document and all attachments were prepared under your direction or supervision in accordance were system designed to assure that qualified personnel gather and evaluate the information submitted. Based on your inquities the person or persons who manage the system or those persons directly responsible for gathering the information, the person or persons who manage the system or those persons directly responsible for gathering the information, the person of persons who manage the system or those persons directly responsible for gathering the information.						our inquiry of			(717)	553-5864	2023	01	20			
browndan1 information submitted is, to the best of your knowledge and belief, true, accurate and complete. You are aware that any fals statement may be subject to substantial civil and criminal penalties, including 18 P.S. section 4904 (relating to unsworn falsification to authorities).						that any false	SUBMITT FULL N		AREA CODE	NUMBER	YEAR	МО	DAY			