3800-FM-BCW0462 12/2016



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

NAME:	LANCASTER CNTY SWMA
ADDRESS:	1299 HARRISBURG PIKE, LANCASTER PA, 17603
FACILITY:	LCSWMA CRESSWELL LF
LOCATION:	3049 RIVER RD, CONESTOGA PA, 17516-9328
STAGE:	Final Effluent

PA0043486	001
ERMIT NUMBER	OUTFALL NUMBER

Reporting Frequency:	Semi-Annually
DMR Effective From:	01/01/2023
DMR Effective To:	06/30/2023
Permit Expires:	01/31/2027
Permit Application Due:	08/04/2026

No Discharge:

		MONITORING PERIOD									
	YEAR	МО	DAY		YEAR	МО	DAY				
FROM	2023	01	01	то	2023	06	30				

PARAMETERS REPORTED VALUES

TANAMETERO REFORTED VALUE										
PARAMETER		QUA	NTITY OR LOAI	DING	QUANTITY OR CONCENTRATION		V	SAMPLING FREQUENCY	SAMPLING TYPE	
TANAMETEN		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	OAMI LINO I REQUERO	CAMILENG TITE
Iron, Dissolved (01046)	Sample Measurement	< .056	< .056	lbs/day	***	< .060	< .060	mg/L	1/6 months	24-Hr Composite
	Permit Requirement	Monitor & Report SEMI AVG	Monitor & Report Daily Max		***	Monitor & Report SEMI AVG	Monitor & Report Daily Max		1/6 months	24-Hr Composite
Facility Sampling Point Comments										

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ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
Lab Results CWLEEFFS 2.21.2023.pdf	Laboratory Analytical Report	2023-03-08T15:20:38-05:00	
Lab Accreditation Form_2 2023.pdf	Laboratory Accreditation Form	2023-03-08T15:21:11-05:00	

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

UNAUTHORIZED DISCHARGES

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

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

SUBMISSION INFORM	IATION						
SUBMITTED BY GREENPORT USER	,	Daniel Brown	TELEPHO	NE		DATE	
	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		(717)	553-5864	2023	03	08
browndan1	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).	SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY