

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

NAME: LANCASTER CNTY SWMA

ADDRESS: 1299 HARRISBURG AVE, LANCASTER PA, 17603-2515

FACILITY: SUSQUEHANNA RESOURCE MANAGEMENT COMPLEX - LANDFILL

LOCATION: 1670 S 19TH ST, HARRISBURG PA, 17104-3201

STAGE: Final Effluent

PAR403508	
PERMIT NUMBER	OU

005
OUTFALL NUMBER

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 FROM
 2023
 01
 01
 TO
 2023
 06
 30

Reporting Frequency:	Semi-Annually
DMR Effective From:	01/01/2023
DMR Effective To:	06/30/2023
Permit Expires:	05/31/2017
Permit Application Due:	12/02/2016
No Discharge:	

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATIO	N	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	43	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	8.25	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	95	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.709	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	2.6	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments							1			



LANCASTER CNTY SWMA

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ADDRESS:

1299 HARRISBURG AVE, LANCASTER PA, 17603-2515

DMR Effective From: DMR Effective To:

01/01/2023 06/30/2023

FACILITY:

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SUSQUEHANNA RESOURCE MANAGEMENT COMPLEX - LANDFILL

Permit Expires:

LOCATION:

1670 S 19TH ST, HARRISBURG PA, 17104-3201

Permit Application Due:

05/31/2017 12/02/2016

STAGE: Final Effluent

YEAR 2023 FROM

DAY 01 TO

MONITORING PERIOD

YEAR MO DAY 2023 06 30

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OUTFALL NUMBER

No Discharge:

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATION	N	CAMPLING EDECLIENCY	SAMPLING TYPE
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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FACILITY:

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		ا	MONITO	DRING F	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2023	01	01	то	2023	06	30

DARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATION	1	CAMPI INC EDECLIENCY	SAMPLING TYPE	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	- SAMPLING FREQUENCY	JAMII LING TIFE	
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	106	mg/L	1/6 months	Grab	
	Permit Requirement	Permit Requirement *** ***		-	*** ***		Monitor & Report Daily Max		1/6 months	Grab	
pH (00400)	Sample Measurement	***	***	***	***	***	8.07	S.U.	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	238	mg/L	1/6 months	Grab	
	Permit Requirement	***	***	-	***	***	Monitor & Report Daily Max		1/6 months	Grab	
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	1.14	mg/L	1/6 months	Grab	
	Permit Requirement	***	***	-	***	***	Monitor & Report Daily Max		1/6 months	Grab	
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	1.3	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Facility Sampling Point Comments		ı									



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PARAMETERS REPORTED VALUES

DADAMETED		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATION	N	CAMPI INC EDECLIENCY	SAMPLING TYPE	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	- SAMPLING FREQUENCY	JAMPLING TIPE	
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							1				

MONITORING PERIOD

TO

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PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
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							1			



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

DISCHARGE MONITORING REPORT (DMR)

ATTACHMENT DETAILS

File Name	Attachment Type	Uploaded Time	Attachment Comments
SRMC_S05_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2023-05-09T14:18:45-04:00	
SRMC_S07_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2023-05-09T14:18:57-04:00	
SRMC_S08_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2023-05-09T14:19:19-04:00	
SRMC_S09_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2023-05-09T14:19:41-04:00	
SRMC_S10_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2023-05-09T14:19:55-04:00	
SRMC_S11_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2023-05-09T14:20:11-04:00	
Lab Results_SRMC Stormwater_4.22.2023.pdf	Laboratory Analytical Report	2023-05-09T14:09:35-04:00	

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

UNAUTHORIZED DISCHARGES

F	Non-Compliance ID	Event Start Date Event End D	te Date and Time Discovered	Substance	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	
COMMENT DETAILS							

COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number
	The state of the s	·	' The state of the

SUBMISSION INFORM	IATION						
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	Daniel Brown	TELEPHONE		DATE		
browndan1	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).		(717)	553-5864	2023	05	09
		SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY