3800-FM-BCW0462 12/2016



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

PA0043486

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

1	2024	01	01	TO	2024	06	30			
	YEAR	МО	DAY		YEAR	МО	DAY			
	MONITORING PERIOD									
	-			_	,-					
	PERI	MIT NUI	MBER	OUTFALL NUME						

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Reporting Frequency:	Semi-Annually
DMR Effective From:	01/01/2024
DMR Effective To:	06/30/2024
Permit Expires:	01/31/2027
Permit Application Due:	08/04/2026
No Discharge:	П

PARAMETERS REPORTED VALUES

Final Effluent

STAGE:

PARAMETER	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				SAMPLING FREQUENCY	SAMPLING TYPE		
TANAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMI LING I KEQUENCI	SAMPLING TIPE	
Iron, Dissolved (01046)	Sample Measurement	< .115	< .115	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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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
Lab Accreditation Form_3 2024.pdf	Laboratory Accreditation Form	2024-04-10T11:03:53-04:00	
Lab Results_CWLEEFFS_3.5.2024.pdf	Laboratory Analytical Report	2024-04-10T08:52:44-04:00	

PERMIT VIOLATIONS

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	Non-Compliance ID	Event Start Date Event End Date	Parameter	Limit Type	Reported Value	Permit I imit	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	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
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COMMENT DETAILS

Comments	Operator Name	Operator Certification Number	Operator Contact Number

SUBMISSION INFORMATION

TELEPHONE DATE *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 **Daniel Brown** 553-5864 (717) 2024 04 10 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). SUBMITTED BY AREA CODE NUMBER YEAR MO DAY **FULL NAME**