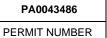
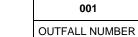
### 3800-FM-BCW0462 12/2016



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

# NAME:LANCASTER CNTY SWMAADDRESS:1299 HARRISBURG PIKE, LANCASTER PA, 17603FACILITY:LCSWMA CRESSWELL LFLOCATION:3049 RIVER RD, CONESTOGA PA, 17516-9328STAGE:Final Effluent





 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 FROM
 2024
 09
 01
 TO
 2024
 09
 30

Reporting Frequency:
DMR Effective From:

DMR Effective To: Permit Expires:

Permit Application Due:

No Discharge:

09/01/2024		
09/30/2024		
01/31/2027		
08/04/2026		

### PARAMETERS REPORTED VALUES

PARAMETER		QUA	NTITY OR LOAD	DING	Q	UANTITY OR (	CONCENTRATIO		SAMPLING FREQUENCY	SAMPLING TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS		
Dissolved Oxygen (00300)	Sample Measurement	***	***	***	5.1	***	***	mg/L	5/week	Grab
	Permit Requirement	***	***		5.0 Inst Min	***	***		5/week	Grab
pH (00400)	Sample Measurement	***	***	***	7.3	***	8.1	S.U.	5/week	Grab
	Permit Requirement	***	***		6.0 Inst Min	***	9.0 IMAX		5/week	Grab
Total Suspended Solids (00530)	Sample Measurement	2.71	2.71	lbs/day	***	6.00	6.00	mg/L	1/month	24-Hr Composite
	Permit Requirement	65 Avg Mo	211 Daily Max		***	27 Avg Mo	88 Daily Max		1/month	24-Hr Composite
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	7.1	mg/L	1/month	Calculation
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/month	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	< .063	.137	lbs/day	***	< .145	.280	mg/L	1/week	24-Hr Composite
(May-Oct)	Permit Requirement	3.6 Avg Mo	7.2 Daily Max		***	1.5 Avg Mo	3.0 Daily Max		1/week	24-Hr Composite
Total Kjeldahl Nitrogen (00625)	Sample Measurement	***	***	***	***	***	2.2	mg/L	1/month	24-Hr Composite
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/month	24-Hr Composite
Nitrate-Nitrite as N (00630)	Sample Measurement	***	***	***	***	***	4.9	mg/L	1/month	24-Hr Composite
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/month	24-Hr Composite
Total Phosphorus (00665)	Sample Measurement	***	.05	lbs/day	***	***	.12	mg/L	1/month	24-Hr Composite
	Permit Requirement	***	Monitor & Report Daily Max		***	***	Monitor & Report Daily Max		1/month	24-Hr Composite
Boron, Total (01022)	Sample Measurement	.52	.588	lbs/day	***	1.30	1.30	mg/L	2/month	24-Hr Composite
	Permit Requirement	4.73 Avg Mo	7.38 Daily Max		***	1.97 Avg Mo	3.07 Daily Max		2/month	24-Hr Composite
Iron, Total (01045)	Sample Measurement	.086	.113	lbs/day	***	.210	.250	mg/L	2/month	24-Hr Composite
	Permit Requirement	4.3 Avg Mo	8.6 Daily Max		***	1.8 Avg Mo	3.6 Daily Max		2/month	24-Hr Composite
Zinc, Total (01092)	Sample Measurement	GG	GG	lbs/day	***	GG	GG	mg/L		
	Permit Requirement	.26 Avg Mo	.48 Daily Max		***	.11 Avg Mo	.2 Daily Max		2/month	24-Hr Composite
	Facility Parameter Comments	Not Sampled due to	ELG Parameters Wai	ver.		1				
Flow (50050)	Sample Measurement	.05417	.20140	MGD	***	***	***	***	Continuous	Metered
	Permit Requirement	Monitor & Report Avg Mo	Monitor & Report Daily Max		***	***	***		Continuous	Metered
Total Nitrogen (Total Load, lbs) (51445)	Sample Measurement	96.0	***	lbs	***	***	***	***	1/month	Calculation
	Permit Requirement	Monitor & Report Total Mo	***		***	***	***		1/month	Calculation
Ammonia-Nitrogen (Total Load, lbs) (51446)	Sample Measurement	< 1.888	***	lbs	***	***	***	***	1/month	Calculation
	Permit Requirement	Monitor & Report Total Mo	***		***	***	***		1/month	Calculation
otal Kjeldahl Nitrogen (Total Load, lbs) (51449)	Sample Measurement	29.8	***	lbs	***	***	***	***	1/month	Calculation
	Permit Requirement	Monitor & Report Total Mo	***		***	***	***		1/month	Calculation
Nitrate-Nitrite as N (Total Load, lbs) (51450)	Sample Measurement	66.6	***	lbs	***	***	***	***	1/month	Calculation
	Permit Requirement	Monitor & Report Total Mo	***		***	***	***		1/month	Calculation

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

Total Phosphorus (Total Load, lbs) (51451)	Sample Measurement	1.63	***	lbs	***	***	***	***	1/month	Calculation
	Permit Requirement	Monitor & Report Total Mo	***		***	***	***		1/month	Calculation
Phenol (34694)	Sample Measurement	GG	GG	lbs/day	***	GG	GG	mg/L		
	Permit Requirement	.036 Avg Mo	.06 Daily Max		***	.015 Avg Mo	.026 Daily Max		2/month	24-Hr Composite
	Facility Parameter Comments	Not Sampled due to	ELG Parameters Wai	ver.						
p-Cresol (77146)	Sample Measurement	GG	GG	lbs/day	***	GG	GG	mg/L		
	Permit Requirement	.033 Avg Mo	.06 Daily Max		***	.014 Avg Mo	.025 Daily Max		2/month	24-Hr Composite
	Facility Parameter Comments	Not Sampled due to	ELG Parameters Wai	ver.						
Benzoic Acid (77247)	Sample Measurement	GG	GG	lbs/day	***	GG	GG	mg/L		
	Permit Requirement	.17 Avg Mo	.29 Daily Max		***	.071 Avg Mo	.12 Daily Max		2/month	24-Hr Composite
	Facility Parameter Comments	Not Sampled due to	ELG Parameters Wai	ver.						
a-Terpineol (77493)	Sample Measurement	GG	GG	lbs/day	***	GG	GG	mg/L		
	Permit Requirement	.04 Avg Mo	.08 Daily Max		***	.016 Avg Mo	.033 Daily Max		2/month	24-Hr Composite
	Facility Parameter Comments	Not Sampled due to	ELG Parameters Wai	ver.						
onaceous Biochemical Oxygen Demand (CBOD5) (80082)	Sample Measurement	< .90	< .90	lbs/day	***	< 2.00	< 2.00	mg/L	1/month	24-Hr Composite
	Permit Requirement	60 Avg Mo	120 Daily Max		***	25 Avg Mo	50 Daily Max		1/month	24-Hr Composite
Facility Sampling Point Comments										



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

### ATTACHMENT DETAILS

File Name			Attachment Type				Uploaded Time			Attachment Comment	s			
Sewage Sludge Biosolids Disposal Report_9 2024.pdf         Sewage Sludge           Lab Results_CWLEEFFS_9.10.24.pdf         L					Nutrient Monitoring Fo	rm		2024-10-25T11:16:05-04:00 2024-10-25T11:16:52-04:00 2024-10-25T11:18:12-04:00						
					e Sludge / Biosolids Production	and Disposal Form								
					Laboratory Analytical Re	port								
					Daily Effluent Monitoring	Daily Effluent Monitoring Form			2024-10-25T11:13:49-04:00					
Lab Accreditation Form_9 2024.pdf				Laboratory Accreditation	Form		2024-10-25T11:14:4	1-04:00						
	Lab Results_CWLEEFFS	_9.17.24.pdf			Laboratory Analytical Re	port		2024-10-25T11:18:4	1-04:00					
	Lab Results_CWLEEFFS	_9.24.24.pdf			Laboratory Analytical Report			2024-10-25T11:19:11-04:00						
	Lab Results_CWLEEFFS	S_9.3.24.pdf			Laboratory Analytical Re	port		2024-10-25T11:17:44-04:00						
Hauled In Residual Waste_9 2024.pdf			Hauled-In Residual Waste	Form		2024-10-25T11:14:10-04:00								
Non-Compliance ID	Event Start Date	Event End Date	Parameter	Limit Type Re	ported Value Permit Lin	uit Unit	Samplin	na Point	Cause Of Non	-Compliance	Correct	tive Action		
	SCHARGES	Event End Date Event End Date	Parameter Date and Time Disc	overed Substance		it Unit Volume (gal)	Samplir Duration (hrs)	•	Cause Of Non		Discharge	Date and Time DEP		Comments
Non-Compliance ID AUTHORIZED DIS Non-Compliance ID HER PERMIT VIO Non-Compliance ID	SCHARGES Event Start Date		Date and Time Disc		Event Location	Volume (gal)		· .		Cause Of	Discharge		<sup>9</sup> Notified	
AUTHORIZED DI: Non-Compliance ID HER PERMIT VIO	SCHARGES Event Start Date	Event End Date	Date and Time Disc	overed Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters Reported Val	Cause Of	Discharge	Date and Time DEP Orally	<sup>9</sup> Notified	Comments
AUTHORIZED DI Non-Compliance ID HER PERMIT VIO Non-Compliance ID	SCHARGES Event Start Date	Event End Date	Date and Time Disc	overed Substance Discharged	Event Location	Volume (gal)	Duration (hrs)	Receiving Waters	Impact On Waters	Cause Of	Discharge	Date and Time DEP Orally Permit Limit	<sup>9</sup> Notified	Comments
AUTHORIZED DI Non-Compliance ID IER PERMIT VIO Non-Compliance ID IMENT DETAILS	SCHARGES Event Start Date LATIONS No	Event End Date	Date and Time Disc	overed Substance Discharged	Event Location	Volume (gal) Par	Duration (hrs)	Receiving Waters	Impact On Waters Reported Val	Cause Of	Discharge	Date and Time DEP Orally Permit Limit	P Notified	Comments
AUTHORIZED DI Non-Compliance ID HER PERMIT VIO Non-Compliance ID MMENT DETAILS BMISSION INFOR	SCHARGES Event Start Date LATIONS No S RMATION	Event End Date	Date and Time Disc	Substance Discharger Samplir	Event Location	Volume (gal) Par Operator Name engage in an electro	Duration (hrs) ameter onic transaction	Receiving Waters	Impact On Waters Reported Val	Cause Of	Discharge	Date and Time DEP Orally Permit Limit	P Notified	Comments

attachments were prepared under your direction or supervision in accordance with a system designed to assure that gualified personnel gather and	Damer Drown	(717)	553-5864	2024	10	25	
evaluate the information submitted. Based on your inquiry of the person or persons who manage the system or those persons directly responsible for		、 <i>,</i>				. <u> </u>	_
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 FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY	