

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

MONITORING PERIOD

TO

YEAR

2024

NAME:	LANCASTER CNTY SWMA
ADDRESS:	1299 HARRISBURG AVE, LANCASTER PA, 17603-2515

SUSQUEHANNA RESOURCE MANAGEMENT COMPLEX - LANDFILL FACILITY:

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

STAGE: Final Effluent

PAG033886	
PERMIT NUMBER	

MO

07

DAY

01

YEAR

2024

FROM

005 OUTFALL NUMBER

MO

12

DAY

31

Reporting Frequency: DMR Effective From: DMR Effective To: Permit Expires: Permit Application Due: No Discharge:

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (	CONCENTRATION	1	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITP
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	32	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.7	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	436	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	5.47	mg/L	1/6 months	Calculation
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.83	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	Sample Measurement	***	***	***	***	***	.021	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	10.1	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments										



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MONITORING PERIOD

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YEAR

2024

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

STAGE: Final Effluent

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31

DMR Effective From: DMR Effective To: Permit Expires: Permit Application Due:

Reporting Frequency:

No Discharge:

Semi-Annually 07/01/2024 12/31/2024 03/23/2028 09/25/2027 abla

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (	CONCENTRATION	1	SAMPLING FREQUENCY	SAMPLING TYP
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMIFLING FREQUENCY	SAMPLING ITP
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
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	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				•						



# 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

PAG033886	
PERMIT NUMBER	

008
OUTFALL NUMBER

Reporting Frequency: Semi-Annually

DMR Effective From: 07/01/2024

DMR Effective To: 12/31/2024

Permit Expires: 03/23/2028

Permit Application Due: 09/25/2027

No Discharge:

		ا	MONITO	DRING F	PERIOD		
	YEAR	МО	DAY		YEAR	МО	DAY
FROM	2024	07	01	то	2024	12	31

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR	CONCENTRATION	1	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITP
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	115	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.59	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	136	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	3.08	mg/L	1/6 months	Calculation
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.64	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	Sample Measurement	***	***	***	***	***	.17	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	2.1	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments										



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SUSQUEHANNA RESOURCE MANAGEMENT COMPLEX - LANDFILL FACILITY:

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

STAGE: Final Effluent

PAG033886 PERMIT NUMBER

009 OUTFALL NUMBER Reporting Frequency: Semi-Annually DMR Effective From: DMR Effective To:

07/01/2024 12/31/2024 03/23/2028

MONITORING PERIOD DAY

MO YEAR 07 2024 01 FROM

YEAR MO DAY 2024 12 31 TO

Permit Application Due: No Discharge:

Permit Expires:

# 09/25/2027 abla

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (	CONCENTRATION	1	SAMPLING FREQUENCY	SAMPLING TYPE
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
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	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				•				



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SUSQUEHANNA RESOURCE MANAGEMENT COMPLEX - LANDFILL FACILITY:

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

STAGE: Final Effluent

PAG033886 PERMIT NUMBER

MO

07

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01

YEAR

2024

FROM

010 OUTFALL NUMBER

MO

12

DAY

31

DMR Effective From: DMR Effective To: Permit Expires: Permit Application Due:

Reporting Frequency:

No Discharge:

Semi-Annually 07/01/2024 12/31/2024 03/23/2028 09/25/2027 abla

#### **PARAMETERS REPORTED VALUES**

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (	CONCENTRATION	N .	SAMPLING FREQUENCY	SAMPLING TYP
FARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMIFLING FREQUENCY	SAWIPLING ITE
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
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	***	mg/L		
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	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				-						

MONITORING PERIOD

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NAME: LANCASTER CNTY SWMA ADDRESS: 1299 HARRISBURG AVE, LANCASTER PA, 17603-2515

SUSQUEHANNA RESOURCE MANAGEMENT COMPLEX - LANDFILL FACILITY:

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

STAGE: Final Effluent

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MO

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DAY

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Reporting Frequency: DMR Effective From: DMR Effective To: Permit Expires: Permit Application Due: No Discharge:

Semi-Annually 07/01/2024		
12/31/2024		
03/23/2028		
09/25/2027		

#### **PARAMETERS REPORTED VALUES**

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (	CONCENTRATION	1	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITP
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	34	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.59	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	12	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	3.71	mg/L	1/6 months	Calculation
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.68	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	Sample Measurement	***	***	***	***	***	.19	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.3	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments			1	-1		ı				

MONITORING PERIOD

TO

YEAR

2024



# 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_005_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2024-12-31T14:36:16-05:00	
SRMC_009_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2024-12-31T14:36:48-05:00	
SRMC_011_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2024-12-31T14:37:11-05:00	
SRMC_007_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2024-12-31T14:36:27-05:00	
SRMC_008_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2024-12-31T14:36:38-05:00	
SRMC_010_NPDES DMR Additional Information.pdf	Stormwater Additional Information Form	2024-12-31T14:36:59-05:00	
Lab Results SRMC Outfalls 11.20.2024.pdf	Laboratory Analytical Report	2024-12-31T14:35:54-05:00	
SUPPLEMENTAL_LABORATORY_ACCREDITATION_FORM.pdf	Laboratory Accreditation Form	2024-12-31T14:36:03-05:00	

#### **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**

	Substance Event Location Volume (gal) Discharged	Duration (hrs) Receiving Waters Impact On Waters	S Cause Of Discharge Date and Time DEP Notified Orally	Comments
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#### OTHER PERMIT VIOLATIONS

Non-Compliance ID	Non-Compliance Type	Sampling Point	Parameter	Reported Value	Permit Limit	Comments

#### **COMMENT DETAILS**

Comments	Operator Name	Operator Certification Number	Operator Contact Number

#### SUBMISSION INFORMATION

\*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 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).

Daniel Brown	TELEPHONE DATE				
	(717)	553-5864	2024	12	31
SUBMITTED BY FULL NAME	AREA CODE	NUMBER	YEAR	МО	DAY