

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: LANCASTER CNTY SWMA TRANSFER STATION LOCATION: 1299 HARRISBURG AVE, LANCASTER PA, 17603-2515 STAGE:

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	Final Effluent	Final E
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PAG033794	001
PERMIT NUMBER	OUTFALL NUMBER

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

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:	

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATION	١	SAMPLING FREQUENCY	SAMPLING TYPE	
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING TIPE	
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	***	***	***	***	***	7.76	S.U.	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	17	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	3	mg/L	1/6 months	Calculation	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation	
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.33	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Total Phosphorus (00665)	Sample Measurement	***	***	***	***	***	.063	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.21	mg/L	1/6 months	Grab	
	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)

002

OUTFALL NUMBER

NAME: LANCASTER CNTY SWMA 1299 HARRISBURG AVE, LANCASTER PA, 17603-2515 ADDRESS: FACILITY: LANCASTER CNTY SWMA TRANSFER STATION LOCATION: 1299 HARRISBURG AVE, LANCASTER PA, 17603-2515 STAGE: Final Effluent

		MONITORING PERIOD											
	YEAR	МО	DAY		YEAR	МО	DAY						
FROM	2024	07	01	то	2024	12	31						

PAG033794

PERMIT NUMBER

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DMR Effective To:	12/31/2024
Permit Expires:	03/23/2028
Permit Application Due:	09/25/2027
No Discharge:	П

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATION	1	SAMPLING FREQUENCY	SAMPLING TYPE	
FARAWEIER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE VALUE UNITS		SAMPLING FREQUENCY	SAIVIFLING ITFE	
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	145	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
pH (00400)	Sample Measurement	***	***	***	***	***	7.32	S.U.	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	31	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	4.16	mg/L	1/6 months	Calculation	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation	
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.52	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Total Phosphorus (00665)	Sample Measurement	***	***	***	***	***	.059	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.66	mg/L	1/6 months	Grab	
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab	
Facility Sampling Point Comments						•					



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NAME: LANCASTER CNTY SWMA

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

FACILITY: LANCASTER CNTY SWMA TRANSFER STATION

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

STAGE: Final Effluent

PAG033794	
PERMIT NUMBER	

003
OUTFALL NUMBER

 MONITORING PERIOD

 YEAR
 MO
 DAY
 YEAR
 MO
 DAY

 FROM
 2024
 07
 01
 TO
 2024
 12
 31

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:	

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATION	1	SAMPLING EDECLIENCY	SAMPLING TYPE
TAKAMETEK		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAWIFLING TIFE
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	81	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.34	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	25	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	3.47	mg/L	1/6 months	Calculation
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.26	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	Sample Measurement	***	***	***	***	***	.067	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.39	mg/L	1/6 months	Grab
	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)

PAG033794

PERMIT NUMBER

NAME: LANCASTER CNTY SWMA

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

FACILITY: LANCASTER CNTY SWMA TRANSFER STATION

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

STAGE: Final Effluent

		MONITORING PERIOD												
	YEAR	МО	DAY		YEAR	МО	DAY							
FROM	2024	07	01	то	2024	12	31							

004

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:		

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATION	١	SAMPLING FREQUENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	SAMPLING ITPE
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	< 15	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.11	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	7	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	6.42	mg/L	1/6 months	Calculation
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	< .1	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	Sample Measurement	***	***	***	***	***	.02	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.18	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Facility Sampling Point Comments			•	•						



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NAME: LANCASTER CNTY SWMA

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

FACILITY: LANCASTER CNTY SWMA TRANSFER STATION

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

STAGE: Final Effluent

PAG033794 PERMIT NUMBER

005 OUTFALL NUMBER

DAY

31

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 abla

MONITORING PERIOD MO YEAR MO YEAR DAY 07 2024 01 TO 2024 12 FROM

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 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										



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:	LANCASTER CNTY SWMA TRANSFER STATION
LOCATION:	1299 HARRISBURG AVE, LANCASTER PA, 17603-2515
STAGE:	Final Effluent

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Final Effluer	τ		

PAG033794					
PERMIT NUMBER					

DAY

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07

YEAR

FROM **2024**

MONITORING PERIOD

TO

YEAR

2024

006							
OUTFALL NUMBER							

MO

12

DAY

31

DMR Effective From:	07/01/2
DMR Effective To:	12/31/2
Permit Expires:	03/23/2
Permit Application Due:	09/25/2
No Discharge:	

Reporting Frequency:

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

PARAMETER		QUA	NTITY OR LOA	DING	Q	UANTITY OR (CONCENTRATION	1	SAMBLING EDECLIENCY	SAMPLING TYPE
PARAMETER		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS	SAMPLING FREQUENCY	
Chemical Oxygen Demand (COD) (00340)	Sample Measurement	***	***	***	***	***	172	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
pH (00400)	Sample Measurement	***	***	***	***	***	7.2	S.U.	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Suspended Solids (00530)	Sample Measurement	***	***	***	***	***	24	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Nitrogen (00600)	Sample Measurement	***	***	***	***	***	6.61	mg/L	1/6 months	Calculation
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Calculation
Ammonia-Nitrogen (00610)	Sample Measurement	***	***	***	***	***	.16	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Total Phosphorus (00665)	Sample Measurement	***	***	***	***	***	.035	mg/L	1/6 months	Grab
	Permit Requirement	***	***		***	***	Monitor & Report Daily Max		1/6 months	Grab
Iron, Total (01045)	Sample Measurement	***	***	***	***	***	.64	mg/L	1/6 months	Grab
	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
TSC 003 Stormwater Add Info.pdf	Stormwater Additional Information Form	2024-12-31T14:05:49-05:00	
TSC 005 Stormwater Add Info.pdf	Stormwater Additional Information Form	2024-12-31T14:06:18-05:00	
TSC 006 Stormwater Add Info.pdf	Stormwater Additional Information Form	2024-12-31T14:06:37-05:00	
Lab Results TSC Outfalls 11.20.2024.pdf	Laboratory Analytical Report	2024-12-31T14:05:01-05:00	
TSC 001 Stormwater Add Info.pdf	Stormwater Additional Information Form	2024-12-31T14:05:22-05:00	
TSC 002 Stormwater Add Info.pdf	Stormwater Additional Information Form	2024-12-31T14:05:35-05:00	
SUPPLEMENTAL_LABORATORY_ACCREDITATION_FORM.pdf	Laboratory Accreditation Form	2024-12-31T14:05:11-05:00	
TSC 004 Stormwater Add Info.pdf	Stormwater Additional Information Form	2024-12-31T14:06:06-05:00	

PERMIT VIOLATIONS

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	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 Start Date Event End Date Date and Time Discovered Discharged Substance Discharged Substance Discharged Discharged Discharged Discharged Comments Orally

OTHER PERMIT VIOLATIONS

Non-C	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).

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