



pennsylvania
DEPARTMENT OF ENVIRONMENTAL
PROTECTION

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

SEWAGE FACILITIES PLANNING MODULE

Component 3. Sewage Collection and Treatment Facilities

(Return completed module package to appropriate municipality)

DEP USE ONLY				
DEP CODE #	CLIENT ID #	SITE ID #	APS ID #	AUTH ID #

This planning module component is used to fulfill the planning requirements of Act 537 for the following types of projects: (1) a subdivision to be served by sewage collection, conveyance or treatment facilities, (2) a tap-in to an existing collection system with flows on a lot of 2 EDU's or more, or (3) the construction of, or modification to, wastewater collection, conveyance or treatment facilities that will require DEP to issue or modify a Clean Streams Law permit. Planning for any project that will require DEP to issue or modify a permit cannot be processed by a delegated agency. Delegated agencies must send their projects to DEP for final planning approval.

This component, along with any other documents specified in the cover letter, must be completed and submitted to the municipality with jurisdiction over the project site for review and approval. All required documentation must be attached for the Sewage Facilities Planning Module to be complete. Refer to the instructions for help in completing this component.

REVIEW FEES: Amendments to the Sewage Facilities Act established fees to be paid by the developer for review of planning modules for land development. These fees may vary depending on the approving agency for the project (DEP or delegated local agency). Please see section R and the instructions for more information on these fees.

NOTE: All projects must complete Sections A through I, and Sections O through R. Complete Sections J, K, L, M and/or N if applicable or marked ☒.

A. PROJECT INFORMATION (See Section A of instructions)

- Project Name Trump Street Lofts
- Brief Project Description Convert existing industrial building to 24 loft apartments with light industrial to remain on the first floor

B. CLIENT (MUNICIPALITY) INFORMATION (See Section B of instructions)

Municipality Name	County	City	Boro	Twp
Allentown City	Lehigh	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Municipality Contact Individual - Last Name	First Name	MI	Suffix	Title
Kimmerly	Dave			Director of Planning
Additional Individual Last Name	First Name	MI	Suffix	Title
Municipality Mailing Address Line 1	Mailing Address Line 2			
City of Allentown	435 Hamilton Street			
Address Last Line -- City	State	ZIP+4		
Allentown	PA	18101		
Area Code + Phone + Ext.	FAX (optional)	Email (optional)		
610-437-7611				

C. SITE INFORMATION (See Section C of instructions)

Site (Land Development or Project) Name

Trump Street Lofts

Site Location Line 1

691 Trump Street

Site Location Line 2

Site Location Last Line -- City

Allentown

State

PA

ZIP+4

18109

Latitude

40°37'18.2"N

Longitude

75°25'24.6"W

Detailed Written Directions to Site From Route 22, Airport Road South 1.5 miles, N. Irving Street South 0.5 miles, Hanover Avenue East 1.0 miles, Trump Street South 0.04 miles, E. Clair Street East - Site is at Southeast corner of Trump Street and E. Clair Street

Description of Site Existing industrial building with parking area.

Site Contact (Developer/Owner)

Last Name

Larish

First Name

Richard

MI

M

Suffix

Phone

610-739-6408

Ext.

Site Contact Title

Owner

FAX

Site Contact Firm (if none, leave blank)

Larish & Associates

Email

wag75lar@gmail.com

Mailing Address Line 1

375 Auburn Street

Mailing Address Line 2

Mailing Address Last Line -- City

Allentown

State

PA

ZIP+4

18103

D. PROJECT CONSULTANT INFORMATION (See Section D of instructions)

Last Name

Ott

First Name

Jeffrey

MI

L

Suffix

Title

President

Consulting Firm Name

Ott Consulting, Inc.

Mailing Address Line 1

222 Main Street

Mailing Address Line 2

Address Last Line -- City

Emmaus

State

PA

ZIP+4

18049

Country

USA

Email

jott@otteng.com

Area Code + Phone

610-928-4690

Ext.

111

Area Code + FAX

610-928-4695

E. AVAILABILITY OF DRINKING WATER SUPPLY

The project will be provided with drinking water from the following source: (Check appropriate box)

☐ Individual wells or cisterns.

☐ A proposed public water supply.

☒ An existing public water supply.

If existing public water supply is to be used, provide the name of the water company and attach documentation from the water company stating that it will serve the project.

Name of water company: Lehigh County Authority, Agent for City of Allentown

F. PROJECT NARRATIVE (See Section F of instructions)

☐ A narrative has been prepared as described in Section F of the instructions and is attached.

The applicant may choose to include additional information beyond that required by Section F of the instructions.

G. PROPOSED WASTEWATER DISPOSAL FACILITIES (See Section G of instructions)

Check all boxes that apply, and provide information on collection, conveyance and treatment facilities and EDU's served. This information will be used to determine consistency with Chapter 93 (relating to wastewater treatment requirements).

1. COLLECTION SYSTEM

a. Check appropriate box concerning collection system

- ☐ New collection system ☐ Pump Station ☐ Force Main
☐ Grinder pump(s) ☒ Extension to existing collection system ☐ Expansion of existing facility

Clean Streams Law Permit Number _____

b. Answer questions below on collection system

Number of EDU's and proposed connections to be served by collection system. EDU's 22.7

Connections 1

Name of:

existing collection or conveyance system Allentown

owner City of Allentown

existing interceptor Lehigh River Interceptor

owner City of Allentown

2. WASTEWATER TREATMENT FACILITY

Check all boxes that apply, and provide information on collection, conveyance and treatment facilities and EDU's served. This information will be used to determine consistency with Chapter(s) 91 (relating to general provisions), 92 (relating to national Pollution Discharge Elimination System permitting, monitoring and compliance) and 93 (relating to water quality standards).

a. Check appropriate box and provide requested information concerning the treatment facility

- ☐ New facility ☒ Existing facility ☐ Upgrade of existing facility ☐ Expansion of existing facility

Name of existing facility Allentown WWTP (Kline's Island)

NPDES Permit Number for existing facility PA-26000

Clean Streams Law Permit Number _____

Location of discharge point for a new facility. Latitude _____ Longitude _____

b. The following certification statement must be completed and signed by the wastewater treatment facility permittee or their representative.

As an authorized representative of the permittee, I confirm that the Kline's Island WWTP (Name from above) sewage treatment facilities can accept sewage flows from this project without adversely affecting the facility's ability to achieve all applicable technology and water quality based effluent limits (see Section I) and conditions contained in the NPDES permit identified above.

Name of Permittee Agency, Authority, Municipality City of Allentown, Lehigh County Authority

Name of Responsible Agent Liesel M. Gross Agent

Agent Signature Liesel M. Gross Date 11/15/17

(Also see Section I. 4.)

G. PROPOSED WASTEWATER DISPOSAL FACILITIES (Continued)

3. PLOT PLAN

The following information is to be submitted on a plot plan of the proposed subdivision.

- | | |
|---|---|
| a. Existing and proposed buildings. | j. Any designated recreational or open space area. |
| b. Lot lines and lot sizes. | k. Wetlands - from National Wetland Inventory Mapping and USGS Hydric Soils Mapping. |
| c. Adjacent lots. | l. Flood plains or Flood prone areas, floodways, (Federal Flood Insurance Mapping) |
| d. Remainder of tract. | m. Prime Agricultural Land. |
| e. Existing and proposed sewerage facilities. Plot location of discharge point, land application field, spray field, COLDS, or LVCOLDS if a new facility is proposed. | n. Any other facilities (pipelines, power lines, etc.) |
| f. Show tap-in or extension to the point of connection to existing collection system (if applicable). | o. Orientation to north. |
| g. Existing and proposed water supplies and surface water (wells, springs, ponds, streams, etc.) | p. Locations of all site testing activities (soil permeability tests, slope measurements, sampling, etc. (if applicable). |
| h. Existing and proposed buildings, streets, roadways, access roads, etc. | q. Soils types and boundaries when a land based system is proposed. |
| | r. Topographic lines with elevations when a land based system is proposed |

4. WETLAND PROTECTION

YES NO

- a. ☐ ☒ Are there wetlands in the project area? If yes, ensure these areas appear on the plot plan as shown in the mapping or through on-site delineation.
- b. ☐ ☒ Are there any construction activities (encroachments, or obstructions) proposed in, along, or through the wetlands? If yes, identify any proposed encroachments on wetlands and identify whether a General Permit or a full encroachment permit will be required. If a full permit is required, address time and cost impacts on the project. Note that wetland encroachments should be avoided where feasible. Also note that a feasible alternative **MUST BE SELECTED** to an identified encroachment on an exceptional value wetland as defined in Chapter 105. Identify any project impacts on streams classified as HQ or EV and address impacts of the permitting requirements of said encroachments on the project.

5. PRIME AGRICULTURAL LAND PROTECTION

YES NO

- ☐ ☒ Will the project involve the disturbance of prime agricultural lands?
If yes, coordinate with local officials to resolve any conflicts with the local prime agricultural land protection program. The project must be consistent with such municipal programs before the sewage facilities planning module package may be submitted to DEP.
If no, prime agricultural land protection is not a factor to this project.
- ☐ ☒ Have prime agricultural land protection issues been settled?

6. HISTORIC PRESERVATION ACT

YES NO

- ☐ ☒ Sufficient documentation is attached to confirm that this project is consistent with DEP Technical Guidance 012-0700-001 *Implementation of the PA State History Code* (available online at the DEP website at www.dep.state.pa.us, select "subject" then select "technical guidance"). As a minimum this includes copies of the completed Cultural Resources Notice (CRN), a return receipt for its submission to the PHMC and the PHMC review letter.

7. PROTECTION OF RARE, ENDANGERED OR THREATENED SPECIES

Check one:

- ☒ The "Pennsylvania Natural Diversity Inventory (PNDI) Project Environmental Review Receipt" resulting from my search of the PNDI database and all supporting documentation from jurisdictional agencies (when necessary) is/are attached.
- ☐ A completed "Pennsylvania Natural Diversity Inventory (PNDI) Project Planning & Environmental Review Form," (PNDI Form) available at www.naturalheritage.state.pa.us, and all required supporting documentation is attached. I request DEP staff to complete the required PNDI search for my project. I realize that my planning module will be considered incomplete upon submission to the Department and that the DEP review will not begin, and that processing of my planning module will be delayed, until a "PNDI Project Environmental Review Receipt" and all supporting documentation from jurisdictional agencies (when necessary) is/are received by DEP.

Applicant or Consultant Initials _____

H. ALTERNATIVE SEWAGE FACILITIES ANALYSIS (See Section H of instructions)

- ☒ An alternative sewage facilities analysis has been prepared as described in Section H of the attached instructions and is attached to this component.
- The applicant may choose to include additional information beyond that required by Section H of the attached instructions.

I. COMPLIANCE WITH WATER QUALITY STANDARDS AND EFFLUENT LIMITATIONS (See Section I of instructions) (Check and complete all that apply.)

1. Waters designated for Special Protection

- ☐ The proposed project will result in a new or increased discharge into special protection waters as identified in Title 25, Pennsylvania Code, Chapter 93. The Social or Economic Justification (SEJ) required by Section 93.4c. is attached.

2. Pennsylvania Waters Designated As Impaired

- ☐ The proposed project will result in a new or increased discharge of a pollutant into waters that DEP has identified as being impaired by that pollutant. A pre-planning meeting was held with the appropriate DEP regional office staff to discuss water quality based discharge limitations.

3. Interstate and International Waters

- ☐ The proposed project will result in a new or increased discharge into interstate or international waters. A pre-planning meeting was held with the appropriate DEP regional office staff to discuss effluent limitations necessary to meet the requirements of the interstate or international compact.

4. Tributaries To The Chesapeake Bay

- ☐ The proposed project result in a new or increased discharge of sewage into a tributary to the Chesapeake Bay. This proposal for a new sewage treatment facility or new flows to an existing facility includes total nitrogen and total phosphorus in the following amounts: _____ pounds of TN per year, and _____ pounds of TP per year. Based on the process design and effluent limits, the total nitrogen treatment capacity of the wastewater treatment facility is _____ pounds per year and the total phosphorus capacity is _____ pounds per year as determined by the wastewater treatment facility permittee. The permittee has determined that the additional TN and TP to be contributed by this project (as modified by credits and/or offsets to be provided) will not cause the discharge to exceed the annual total mass limits for these parameters. Documentation of compliance with nutrient allocations is attached.

Name of Permittee Agency, Authority, Municipality _____

Initials of Responsible Agent (See Section G 2.b) _____

See *Special Instructions* (Form 3800-FM-BPNPSM0353-1) for additional information on Chesapeake Bay watershed requirements.

J. CHAPTER 94 CONSISTENCY DETERMINATION (See Section J of instructions)

Projects that propose the use of existing municipal collection, conveyance or wastewater treatment facilities, or the construction of collection and conveyance facilities to be served by existing municipal wastewater treatment facilities must be consistent with the requirements of Title 25, Chapter 94 (relating to Municipal Wasteload Management). If not previously included in Section F, include a general map showing the path of the sewage to the treatment facility. If more than one municipality or authority will be affected by the project, please obtain the information required in this section for each. Additional sheets may be attached for this purpose.

1. Project Flows 3814 gpd
2. Total Sewage Flows to Facilities (pathway from point of origin through treatment plant)

When providing "treatment facilities" sewage flows, use Annual Average Daily Flow for "average" and Maximum Monthly Average Daily Flow for "peak" in all cases. For "peak flows" in "collection" and "conveyance" facilities, indicate whether these flows are "peak hourly flow" or "peak instantaneous flow" and how this figure was derived (i.e., metered, measured, estimated, etc.).

- a. Enter average and peak sewage flows for each proposed or existing facility as designed or permitted.
- b. Enter the average and peak sewage flows for the most restrictive sections of the existing sewage facilities.
- c. Enter the average and peak sewage flows, projected for 5 years (2 years for pump stations) through the most restrictive sections of the existing sewage facilities. Include existing, proposed (this project) and future project (other approved projects) flows.

To complete the table, refer to the instructions, Section J.

	a. Design and/or Permitted Capacity (gpd) ^{MGD}		b. Present Flows (gpd) ^{MGD}		c. Projected Flows in 5 years (gpd) ^{MGD} (2 years for P.S.)	
	Average	Peak	Average	Peak	Average	Peak
Collection	0.73	2.91	0.04	0.46	0.04	0.50
Conveyance	15	19	2.4	18"	2.45	18.4"
Treatment	40	52	32.3	40	33.4	42

3. Collection and Conveyance Facilities ^{(1) PEAK HOURLY FLOW - ESTIMATED}

The questions below are to be answered by the sewer authority, municipality, or agency responsible for completing the Chapter 94 report for the collection and conveyance facilities. These questions should be answered in coordination with the latest Chapter 94 annual report and the above table. The individual(s) signing below must be legally authorized to make representation for the organization.

YES NO

- a. ☐ ☒ This project proposes sewer extensions or tap-ins. Will these actions create a hydraulic overload within five years on any existing collection or conveyance facilities that are part of the system?

If yes, this sewage facilities planning module will not be accepted for review by the municipality, delegated local agency and/or DEP until all inconsistencies with Chapter 94 are resolved or unless there is an approved Corrective Action Plan (CAP) granting an allocation for this project. A letter granting allocations to this project under the CAP must be attached to the module package.

If no, a representative of the sewer authority, municipality, or agency responsible for completing the Chapter 94 report for the collection and conveyance facilities must sign below to indicate that the collection and conveyance facilities have adequate capacity and are able to provide service to the proposed development in accordance with both §71.53(d)(3) and Chapter 94 requirements and that this proposal will not affect that status.

- b. Collection System

Name of Agency, Authority, Municipality City of Allentown, Lehigh County Authority,

Name of Responsible Agent Liesel M. Grass ^{Agent}

Agent Signature [Signature] Date 11/15/17

☐ **J. CHAPTER 94 CONSISTENCY DETERMINATION** (See Section J of instructions)

c. Conveyance System

Name of Agency, Authority, Municipality City of Allentown, Lehigh County Authority, Agent

Name of Responsible Agent Liesel M. Gross

Agent Signature *Liesel M. Gross*

Date 11/15/17

4. Treatment Facility

The questions below are to be answered by a representative of the facility permittee in coordination with the information in the table and the latest Chapter 94 report. The individual signing below must be legally authorized to make representation for the organization.

YES NO

- a. ☐ ☒ This project proposes the use of an existing wastewater treatment plant for the disposal of sewage. Will this action create a hydraulic or organic overload within 5 years at that facility?

If yes, this planning module for sewage facilities will not be reviewed by the municipality, delegated local agency and/or DEP until this inconsistency with Chapter 94 is resolved or unless there is an approved CAP granting an allocation for this project. A letter granting allocations to this project under the CAP must be attached to the planning module.

If no, the treatment facility permittee must sign below to indicate that this facility has adequate treatment capacity and is able to provide wastewater treatment services for the proposed development in accordance with both §71.53(d)(3) and Chapter 94 requirements and that this proposal will not impact that status.

b. Name of Agency, Authority, Municipality City of Allentown, Lehigh County Authority, Agent

Name of Responsible Agent Liesel M. Gross

Agent Signature *Liesel M. Gross*

Date 11/15/17

☐ **K. TREATMENT AND DISPOSAL OPTIONS** (See Section K of instructions)

This section is for land development projects that propose construction of wastewater treatment facilities. Please note that, since these projects require permits issued by DEP, these projects may **NOT** receive final planning approval from a delegated local agency. Delegated local agencies must send these projects to DEP for final planning approval.

Check the appropriate box indicating the selected treatment and disposal option.

- ☐ 1. Spray irrigation (other than individual residential spray systems (IRSIS)) or other land application is proposed, and the information requested in Section K.1. of the planning module instructions are attached.
- ☐ 2. Recycle and reuse is proposed and the information requested in Section K-2 of the planning module instructions is attached.
- ☐ 3. A discharge to a dry stream channel is proposed, and the information requested in Section K.3. of the planning module instructions are attached.
- ☐ 4. A discharge to a perennial surface water body is proposed, and the information requested in Section K.4. of the planning module instructions are attached.

☐ **L. PERMEABILITY TESTING** (See Section L of instructions)

- ☐ The information required in Section L of the instructions is attached.

☐ **M. PRELIMINARY HYDROGEOLOGIC STUDY** (See Section M of instructions)

- ☐ The information required in Section M of the instructions is attached.

☐ **N. DETAILED HYDROGEOLOGIC STUDY** (See Section N of instructions)

☐ The detailed hydrogeologic information required in Section N. of the instructions is attached.

O. SEWAGE MANAGEMENT (See Section O of instructions)

(1-3 for completion by the developer(project sponser), 4-5 for completion by the non-municipal facility agent and 6 for completion by the municipality)

Yes No

1. ☐ ☒ Is connection to, or construction of, a DEP permitted, non-municipal sewage facility or a local agency permitted, community onlot sewage facility proposed.

If Yes, respond to the following questions, attach the supporting analysis, and an evaluation of the options available to assure long-term proper operation and maintenance of the proposed non-municipal facilities. If No, skip the remainder of Section O.

2. Project Flows _____ gpd

Yes No

3. ☐ ☐ Is the use of nutrient credits or offsets a part of this project?

If yes, attach a letter of intent to purchase the necessary credits and describe the assurance that these credits and offsets will be available for the remaining design life of the non-municipal sewage facility;

(For completion by non-municipal facility agent)

4. Collection and Conveyance Facilities

The questions below are to be answered by the organization/individual responsible for the non-municipal collection and conveyance facilities. The individual(s) signing below must be legally authorized to make representation for the organization.

Yes No

- a. ☐ ☐ If this project proposes sewer extensions or tap-ins, will these actions create a hydraulic overload on any existing collection or conveyance facilities that are part of the system?

If yes, this sewage facilities planning module will not be accepted for review by the municipality, delegated local agency and/or DEP until this issue is resolved.

If no, a representative of the organization responsible for the collection and conveyance facilities must sign below to indicate that the collection and conveyance facilities have adequate capacity and are able to provide service to the proposed development in accordance with Chapter 71 §71.53(d)(3) and that this proposal will not affect that status.

- b. Collection System

Name of Responsible Organization _____

Name of Responsible Agent _____

Agent Signature _____

Date _____

- c. Conveyance System

Name of Responsible Organization _____

Name of Responsible Agent _____

Agent Signature _____

Date _____

5. Treatment Facility

The questions below are to be answered by a representative of the facility permittee. The individual signing below must be legally authorized to make representation for the organization.

Yes No

- a. ☐ ☐ If this project proposes the use of an existing non-municipal wastewater treatment plant for the disposal of sewage, will this action create a hydraulic or organic overload at that facility?

If yes, this planning module for sewage facilities will not be reviewed by the municipality, delegated local agency and/or DEP until this issue is resolved.

If no, the treatment facility permittee must sign below to indicate that this facility has adequate treatment capacity and is able to provide wastewater treatment services for the proposed development in accordance with §71.53(d)(3) and that this proposal will not impact that status.

- b. Name of Facility _____
Name of Responsible Agent _____
Agent Signature _____
Date _____

(For completion by the municipality)

6. ☐ The **SELECTED OPTION** necessary to assure long-term proper operation and maintenance of the proposed non-municipal facilities is clearly identified with documentation attached in the planning module package.

P. PUBLIC NOTIFICATION REQUIREMENT (See Section P of instructions)

This section must be completed to determine if the applicant will be required to publish facts about the project in a newspaper of general circulation to provide a chance for the general public to comment on proposed new land development projects. This notice may be provided by the applicant or the applicant's agent, the municipality or the local agency by publication in a newspaper of general circulation within the municipality affected. Where an applicant or an applicant's agent provides the required notice for publication, the applicant or applicant's agent shall notify the municipality or local agency and the municipality and local agency will be relieved of the obligation to publish. The required content of the publication notice is found in Section P of the instructions.

To complete this section, each of the following questions must be answered with a "yes" or "no". Newspaper publication is required if any of the following are answered "yes".

Yes No

1. ☐ ☒ Does the project propose the construction of a sewage treatment facility?
2. ☐ ☒ Will the project change the flow at an existing sewage treatment facility by more than 50,000 gallons per day?
3. ☐ ☒ Will the project result in a public expenditure for the sewage facilities portion of the project in excess of \$100,000?
4. ☐ ☒ Will the project lead to a major modification of the existing municipal administrative organizations within the municipal government?
5. ☐ ☒ Will the project require the establishment of *new* municipal administrative organizations within the municipal government?
6. ☐ ☒ Will the project result in a subdivision of 50 lots or more? (onlot sewage disposal only)
7. ☐ ☒ Does the project involve a major change in established growth projections?
8. ☐ ☒ Does the project involve a different land use pattern than that established in the municipality's Official Sewage Plan?

P. PUBLIC NOTIFICATION REQUIREMENT cont'd. (See Section P of instructions)

9. ☐ ☒ Does the project involve the use of large volume onlot sewage disposal systems (Flow > 10,000 gpd)?
10. ☐ ☒ Does the project require resolution of a conflict between the proposed alternative and consistency requirements contained in §71.21(a)(5)(i), (ii), (iii)?
11. ☐ ☒ Will sewage facilities discharge into high quality or exceptional value waters?
- ☐ Attached is a copy of:
- ☐ the public notice,
 - ☐ all comments received as a result of the notice,
 - ☐ the municipal response to these comments.
- ☐ No comments were received. A copy of the public notice is attached.

Q. FALSE SWEARING STATEMENT (See Section Q of instructions)

I verify that the statements made in this component are true and correct to the best of my knowledge, information and belief. I understand that false statements in this component are made subject to the penalties of 18 PA C.S.A. §4904 relating to unsworn falsification to authorities.

JEFFREY L. OTT

Name (Print)

PRESIDENT

Title

222 MAIN STREET, EMMAUS, PA 18049

Address



PRES.

Signature

10/3/2017

Date

610-928-4690

Telephone Number

R. REVIEW FEE (See Section R of instructions)

The Sewage Facilities Act establishes a fee for the DEP planning module review. DEP will calculate the review fee for the project and invoice the project sponsor **OR** the project sponsor may attach a self-calculated fee payment to the planning module prior to submission of the planning package to DEP. (Since the fee and fee collection procedures may vary if a "delegated local agency" is conducting the review, the project sponsor should contact the "delegated local agency" to determine these details.) Check the appropriate box.

- ☐ I request DEP calculate the review fee for my project and send me an invoice for the correct amount. I understand DEP's review of my project will not begin until DEP receives the correct review fee from me for the project.
- ☒ I have calculated the review fee for my project using the formula found below and the review fee guidance in the instructions. I have attached a check or money order in the amount of \$476.75 payable to "Commonwealth of PA, DEP". Include DEP code number on check. I understand DEP will not begin review of my project unless it receives the fee and determines the fee is correct. If the fee is incorrect, DEP will return my check or money order, send me an invoice for the correct amount. I understand DEP review will NOT begin until I have submitted the correct fee.
- ☐ I request to be exempt from the DEP planning module review fee because this planning module creates **only** one new lot and is the **only** lot subdivided from a parcel of land as that land existed on December 14, 1995. I realize that subdivision of a second lot from this parcel of land shall disqualify me from this review fee exemption. I am furnishing the following deed reference information in support of my fee exemption.

County Recorder of Deeds for _____ County, Pennsylvania

Deed Volume _____ Book Number _____

Page Number _____ Date Recorded _____

R. REVIEW FEE (continued)

Formula:

1. For a new collection system (with or without a Clean Streams Law Permit), a collection system extension, or individual tap-ins to an existing collection system use this formula.

#9.5 (EDUs)

Lots (or EDUs) X \$50.00 = \$ 476.75

The fee is based upon:

- The number of lots created or number of EDUs whichever is higher.
- For community sewer system projects, one EDU is equal to a sewage flow of 400 gallons per day.

2. For a surface or subsurface discharge system, use the appropriate one of these formulae.

- A. A new surface discharge greater than 2000 gpd will use a flat fee:

\$ 1,500 per submittal (non-municipal)
\$ 500 per submittal (municipal)

- B. An increase in an existing surface discharge will use:

_____ Lots (or EDUs) X \$35.00 = \$ _____

to a maximum of \$ 1,500 per submittal (non-municipal) or \$ 500 per submittal (municipal)

The fee is based upon:

- The number of lots created or number of EDUs whichever is higher.
- For community sewage system projects one EDU is equal to a sewage flow of 400 gallons per day.
- For non-single family residential projects, EDUs are calculated using projected population figures

- C. A sub-surface discharge system that requires a permit under The Clean Streams Law will use a flat fee:

\$ 1,500 per submittal (non-municipal)
\$ 500 per submittal (municipal)



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

DEP Code #:

SEWAGE FACILITIES PLANNING MODULE
COMPONENT 4A - MUNICIPAL PLANNING AGENCY REVIEW

Note to Project Sponsor: To expedite the review of your proposal, one copy of your completed planning module package and one copy of this *Planning Agency Review Component* should be sent to the local municipal planning agency for their comments.

SECTION A. PROJECT NAME (See Section A of instructions)

Project Name

Trump Street Lofts

SECTION B. REVIEW SCHEDULE (See Section B of instructions)

1. Date plan received by municipal planning agency 10/12/2017 10/6/2017
2. Date review completed by agency 10/12/2017

SECTION C. AGENCY REVIEW (See Section C of instructions)

- | Yes | No | |
|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Is there a municipal comprehensive plan adopted under the Municipalities Planning Code (53 P.S. 10101, <i>et seq.</i>)? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Is this proposal consistent with the comprehensive plan for land use?
If no, describe the inconsistencies -- |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Is this proposal consistent with the use, development, and protection of water resources?
If no, describe the inconsistencies -- |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4. Is this proposal consistent with municipal land use planning relative to Prime Agricultural Land Preservation? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 5. Does this project propose encroachments, obstructions, or dams that will affect wetlands?
If yes, describe impacts -- |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Will any known historical or archaeological resources be impacted by this project?
If yes, describe impacts -- |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Will any known endangered or threatened species of plant or animal be impacted by this project?
If yes, describe impacts -- |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. Is there a municipal zoning ordinance? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Is this proposal consistent with the ordinance?
If no, describe the inconsistencies -- |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10. Does the proposal require a change or variance to an existing comprehensive plan or zoning ordinance? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 11. Have all applicable zoning approvals been obtained? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 12. Is there a municipal subdivision and land development ordinance? |

SECTION C. AGENCY REVIEW (continued)

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	13. Is this proposal consistent with the ordinance? If no, describe the inconsistencies --
<input checked="" type="checkbox"/>	<input type="checkbox"/>	14. Is this plan consistent with the municipal Official Sewage Facilities Plan? If no, describe the inconsistencies --
<input type="checkbox"/>	<input checked="" type="checkbox"/>	15. Are there any wastewater disposal needs in the area adjacent to this proposal that should be considered by the municipality? If yes, describe --
<input type="checkbox"/>	<input checked="" type="checkbox"/>	16. Has a waiver of the sewage facilities planning requirements been requested for the residual tract of this subdivision?
<input type="checkbox"/>	<input type="checkbox"/>	If yes, is the proposed waiver consistent with applicable ordinances? If no, describe the inconsistencies --
17. Name, title and signature of planning agency staff member completing this section:		
Name: <u>DAVID KIMBLEY, AICP</u>		
Title: <u>CHIEF PLANNER</u>		
Signature: <u>[Signature]</u>		
Date: <u>10/12/2017</u>		
Name of Municipal Planning Agency: <u>CITY OF ALLENTOWN</u>		
Address: <u>435 HAMILTON ST. ALLENTOWN, PA 18101</u>		
Telephone Number: <u>610-437-7613</u>		

SECTION D. ADDITIONAL COMMENTS (See Section D of instructions)

This component does not limit municipal planning agencies from making additional comments concerning the relevancy of the proposed plan to other plans or ordinances. If additional comments are needed, attach additional sheets.

The planning agency must complete this component within 60 days.

This component and any additional comments are to be returned to the applicant.



**SEWAGE FACILITIES PLANNING MODULE
COMPONENT 4B - COUNTY PLANNING AGENCY REVIEW
(or Planning Agency with Areawide Jurisdiction)**

Note to Project Sponsor: To expedite the review of your proposal, one copy of your completed planning package and one copy of this **Planning Agency Review Component** should be sent to the existing county planning agency or planning agency with areawide jurisdiction for their comments.

SECTION A. PROJECT NAME (See Section A of instructions)

Project Name

Trump Street Lofts

SECTION B. REVIEW SCHEDULE (See Section B of instructions)

1. Date plan received by county planning agency. ----
2. Date plan received by planning agency with areawide jurisdiction January 16, 2018
Agency name Lehigh Valley Planning Commission
3. Date review completed by agency January 17, 2018

SECTION C. AGENCY REVIEW (See Section C of instructions)

- | Yes | No | |
|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Is there a county or areawide comprehensive plan adopted under the Municipalities Planning Code (53 P.S. 10101 <i>et seq.</i>)? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Is this proposal consistent with the comprehensive plan for land use? <i>See attached Act 247 review letter dated 1/16/18</i> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Does this proposal meet the goals and objectives of the plan?
If no, describe goals and objectives that are not met ---- |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4. Is this proposal consistent with the use, development, and protection of water resources?
If no, describe inconsistency ---- |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. Is this proposal consistent with the county or areawide comprehensive land use planning relative to Prime Agricultural Land Preservation?
If no, describe inconsistencies: ---- |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Does this project propose encroachments, obstructions, or dams that will affect wetlands?
If yes, describe impact ---- |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Will any known historical or archeological resources be impacted by this project? <i>P/HMC determination</i>
If yes, describe impacts ---- |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Will any known endangered or threatened species of plant or animal be impacted by the development project? <i>See PNDI results</i> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9. Is there a county or areawide zoning ordinance? |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Does this proposal meet the zoning requirements of the ordinance? <i>N/A</i>
If no, describe inconsistencies ---- |

Yes	No	SECTION C. AGENCY REVIEW (continued)
<input type="checkbox"/>	<input type="checkbox"/>	11. Have all applicable zoning approvals been obtained? <i>N/A</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	12. Is there a county or areawide subdivision and land development ordinance? <i>Not applicable to City of Allentown</i>
<input type="checkbox"/>	<input type="checkbox"/>	13. Does this proposal meet the requirements of the ordinance? <i>N/A</i> If no, describe which requirements are not met ----
<input type="checkbox"/>	<input type="checkbox"/>	14. Is this proposal consistent with the municipal Act 537 Official Sewage Facilities Plan? <i>See municipal interpretation</i> If no, describe inconsistency ----
<input type="checkbox"/>	<input checked="" type="checkbox"/>	15. Are there any wastewater disposal needs in the area adjacent to this proposal that should be considered by the municipality? If yes, describe ----
<input type="checkbox"/>	<input type="checkbox"/>	16. Has a waiver of the sewage facilities planning requirements been requested for the residual tract of this subdivision? <i>N/A</i>
<input type="checkbox"/>	<input type="checkbox"/>	If yes, is the proposed waiver consistent with applicable ordinances. If no, describe the inconsistencies ----
<input checked="" type="checkbox"/>	<input type="checkbox"/>	17. Does the county have a stormwater management plan as required by the Stormwater Management Act?
<input type="checkbox"/>	<input checked="" type="checkbox"/>	If yes, will this project plan require the implementation of storm water management measures?
		18. Name, Title and signature of person completing this section:
		Name: <u>Susan L. Rockwell</u>
		Title: <u>Senior Environmental Planner</u> Signature: <u><i>S. L. Rockwell</i></u>
		Date: <u>January 17, 2018</u>
		Name of County or Areawide Planning Agency: <u>Lehigh Valley Planning Commission</u>
		Address: <u>961 Marcon Blvd, Suite 310, Allentown PA 18109</u>
		Telephone Number: <u>610-264-4544</u>
SECTION D. ADDITIONAL COMMENTS (See Section D of instructions)		
This Component does not limit county planning agencies from making additional comments concerning the relevancy of the proposed plan to other plans or ordinances. If additional comments are needed, attach additional sheets.		
The county planning agency must complete this Component within 60 days.		
This Component and any additional comments are to be returned to the applicant.		