



Lehigh Valley Planning Commission

GREG ZEBROWSKI
Chair

STEVEN GLICKMAN
Vice Chair

PAMELA PEARSON
Treasurer

BECKY A. BRADLEY, AICP
Executive Director

January 28, 2020

Mr. Bryan Ritter, PE
JENA Engineering
2358 Sunshine Road, Suite 200
Allentown, PA 18103

Re: Act 537 Review - Sewage Facilities Planning Module for the Ramia Holdings (South Carlisle/East Cumberland Streets) Subdivision in the City of Allentown, Lehigh County

Dear Mr. Ritter:

The Lehigh Valley Planning Commission (LVPC) reviewed the above-referenced planning module according to the requirements of Act 537, the Pennsylvania Sewage Facilities Act. We offer the following comments.

This sewage facilities planning module is intended for a proposed six-lot residential subdivision on approximately 0.6 acres, creating two duplexes (four twin dwellings), a single-family detached dwelling and one lot containing one-half of an existing duplex. The subdivision is proposed to be served by public sewage disposal. This sewage facilities planning module is consistent with the County Comprehensive Plan. According to the county plan, the proposed development is located in an area recommended for public sewer service.

Enclosed please find an executed Module Component 4b. Please call me if you have any questions regarding this review.

Sincerely,

Susan L. Rockwell
Senior Environmental Planner

Enclosure

cc: Irene Woodward, AICP, Director of Planning, City of Allentown
Robert Corby, PA Department of Environmental Protection



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

DEP Code #

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

Ramia Holdings (South Carlisle/East Cumberland Streets)

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 27, 2020
Agency name Lehigh Valley Planning Commission
3. Date review completed by agency January 28, 2020

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</i> |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Does this proposal meet the goals and objectives of the plan? <i>review letter dated 3/21/19</i>
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>PHMC 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 VMDI 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 28, 2020</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.		



STEPHEN REPASCH
Chair

GREG ZEBROWSKI
Vice Chair

STEVEN GLICKMAN
Treasurer

BECKY A. BRADLEY, AICP
Executive Director

March 21, 2019

Mr. David Kimmerly, Chief Planner
City of Allentown
435 Hamilton Street
Allentown, PA 18101

**RE: Ramia Holdings (S. Carlisle/E. Cumberland Sts) – Land Development
City of Allentown
Lehigh County**

Dear Mr. Kimmerly:

The subject application proposes to subdivide the four existing parcels into six lots for construction of two duplex dwellings, a single family dwelling, and an addition to an existing duplex. The project is located on East Cumberland Street and South Carlisle Street (Parcel # 640676881188, 640676874821, 640676984245, 640676972320). This proposal is consistent with the County Comprehensive Plan.

Our review does not include an in-depth examination of the plan relative to subdivision design standards or ordinance requirements since these items are covered in the municipal review.

In order to better meet the needs of all involved, the LVPC is now requiring an appointment for plan signings. Please call the office and ask for a Community Planning staff person. Generally, your appointment will be within two business days.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jillian Seitz', is written over a light blue horizontal line.

Jillian Seitz
Senior Community Planner

cc: Craig Messinger, City of Allentown
James F. Morrissey, PLS, Jena Engineering Corp.



JAN 27 2020

Lehigh County Authority

1053 Spruce Road * P.O. Box 3348 * Allentown, PA 18106-0348
(610) 398-2503 * FAX (610) 398-8413 * Email: service@lehighcountyauthority.org

LETTER OF TRANSMITTAL

Date: January 21, 2020

To: Bryan Ritter
Jena Engineering Corp
2358 Sunshine Road, Suite 200
Allentown, PA 18103

Re: South Carlisle St – East Cumberland St Subdivision
Allentown, Lehigh County, PA

<u>No. of Copies</u>	<u>Date</u>	<u>Description</u>
1	1/21/20	Completed Sewer Planning Module
1	1/21/20	Plan Showing Path of Sewage to WWTP
1	1/21/20	Appendix A Cover Letter

☒ As Requested
☐ For Your Information
☐ For Your Comments
☐ For Action By You

☐ Approved
☐ Approved As Noted
☐ Revise And Resubmit
☐ For Your Files

Comments:

LCA completed the Sewer Planning Module for the subject property. Please contact me if you have any questions.

From: Jacob Hunsicker
cc: Scott Novatnak, DEP (via email)
Robert Corby, DEP (via email)
Irene Woodward, COA (via email)
Craig Messinger, COA (via email)
Phil DePoe, LCA (via email)
Liesel Gross, LCA (via email)



1053 SPRUCE ROAD * P.O. BOX 3348 * ALLENTOWN, PA 18106-0348
610-398-2503 * FAX 610-398-8413 * www.lehighcountyauthority.org
email: service@lehighcountyauthority.org

January 20, 2020

Bryan Ritter
President
JENA Engineering
2358 Sunshine Road, Suite 200
Allentown, PA 18103

RE: Commons at Carlisle, E. Cumberland – S. Carlisle St., City of Allentown
Sewer Module - Chapter 94 Consistency Determination – Appendix A

Dear Mr. Ritter:

This letter and approval for the attached Sewage Facilities Planning Module is based on the current estimate of available wastewater capacity. This letter does not promise, guarantee or assure any future conveyance or treatment allocation without compliance with all applicable rules and regulations, payment of all necessary fees and availability of the respective allocation at that time.

In accordance with the interim Corrective Action Plan and Connection Management Plan submitted to the Pa. Department of Environmental Protection by the Kline's Island Sewer System municipalities on December 31, 2019 and approved by DEP on January 17, 2020, an amount equal to the property or development's wastewater flow will be allocated from the Connection Management Plan at the time of approval of the Sewage Facilities Planning Module. This property or development's wastewater flow need, as represented in the attached Sewage Planning Module, is 878 gallons per day. Therefore, the Connection Management Plan balance will be adjusted as follows:

Connection Management Plan Allocation (gallons per day)	1,500,000
Previously allocated from prior planning module submissions	-435,481
This submission	-878
Remaining Allocation in Connection Management Plan	1,063,641

Please contact me if you have any questions about this information.

Sincerely,

Liesel M. Gross
Chief Executive Officer

cc: Scott Novatnak, DEP
Robert Corby, DEP
Irene Woodward, COA
Craig Messinger, COA
Phil Depoe, LCA

Form



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

Code No.

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 SOUTH GARLISLE STREET & EAST CUMBERLAND STREET
- Brief Project Description SUBDIVISION OF SINGLE TRACT OF LAND INTO 6 RESIDENTIAL LOTS FOR CONSTRUCTION OF TWO DUPLEX DWELLING UNITS AND ONE SINGLE FAMILY DWELLING UNITS

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

Municipality Name <u>CITY OF ALLENTOWN</u>	County <u>LEHIGH</u>	City <input checked="" type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input type="checkbox"/>
Municipality Contact Individual - Last Name <u>WOODWARD</u>	First Name <u>IRENE</u>	MI <input type="checkbox"/>	Suffix <u>AICP</u>	Title <u>DIRECTOR OF PLANNING</u>
Additional Individual Last Name	First Name	MI	Suffix	Title
Municipality Mailing Address Line 1 <u>435 HAMILTON STREET</u>		Mailing Address Line 2		
Address Last Line -- City <u>ALLENTOWN</u>		State <u>PA</u>	ZIP+4 <u>18101-1699</u>	
Area Code + Phone + Ext. <u>610-437-7611</u>	FAX (optional) <u>610-437-8781</u>	Email (optional) <u>IRENE.WOODWARD@ALLENTOWNPA.GOV</u>		

C. SITE INFORMATION (See Section C of instructions)

Site (Land Development or Project) Name

SOUTH CARLISLE STREET AND EAST CUMBERLAND STREET

Site Location Line 1

230 / 240 EAST CUMBERLAND STREET

Site Location Line 2

1102 / 1110 SOUTH CARLISLE STREET

Site Location Last Line -- City

ALLENTOWN

State

PA

ZIP+4

18103

Latitude

40°35'30.95"

Longitude

75°26'50.05"

Detailed Written Directions to Site

FROM INTERSECTION OF SOUTH 4th STREET (PA ROUTE 145) AND EAST SESQUHANNA STREET, TURN RIGHT (EAST) ONTO EAST SESQUHANNA TRAVELING EASTWARD TO SOUTH CARLISLE ST. TURN LEFT AND TRAVEL NORTH TO INTERSECTION W/ EAST CUMBERLAND STREET. PROPERTY IS AT SOUTHWEST QUADRANT OF INTERSECTION.

Description of Site

EXISTING TRACTS OF LAND IS 4 PLOTS, OF WHICH 3 ARE VACANT TRACTS WITH FOURTH TRACT CONTAINING 1/2 OF A DUPLEX DWELLING UNIT

Site Contact (Developer/Owner)

Last Name

BRILL

First Name

Sam

MI

Suffix

Phone

484-924-8691

Ext.

Site Contact Title

PRESIDENT

Site Contact Firm (if none, leave blank)

RAMIA HOLDINGS LP

FAX

Email

CLASSIC.HOMES@5FEACH.COM

Mailing Address Line 1

P.O. Box 312

Mailing Address Line 2

Mailing Address Last Line -- City

HELEXTOWN

State

PA

ZIP+4

18055-0301

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

Last Name

RITTER

First Name

BRYAN

MI

Suffix

L.

P.E.

Title

PRESIDENT

Consulting Firm Name

JENA ENGINEERING CORP

Mailing Address Line 1

2358 SUNSHINE ROAD, SUITE 200

Mailing Address Line 2

Address Last Line -- City

ALLENTOWN

State

PA

ZIP+4

18103

Country

USA

Email

britter.jena@engineering1959@gmail.com

Area Code + Phone

610-797-4200

Ext.

EXT. 15

Area Code + FAX

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 5

Connections 5

Name of:

existing collection or conveyance system ALLENTOWN

owner CITY OF ALLENTOWN

existing interceptor JORDAN CREEK 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 KLINE'S ISLAND WWTP

NPDES Permit Number for existing facility PA-0026000

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 1/20/2020

(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 profile test pits, slope measurements, permeability test sites, background sampling, etc. (if applicable). |
| h. Existing and proposed rights-of-way. | q. Soils types and boundaries when a land based system is proposed. |
| i. Existing and proposed buildings, streets, roadways, access roads, etc. | 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 Web site 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 _____

x 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-WSFR0353-1) 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 877.5 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	1.99	7.95	0.34	2.32	0.35	2.32
Conveyance	58	81	30	78"	31	80"
Treatment	40	40	32.3	40	33.4	42

3. Collection and Conveyance Facilities **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 ALLESTOWN, LEHIGH COUNTY AUTHORITY, AGENT

Name of Responsible Agent LIESEL M GROSS

Agent Signature Liesel M Gross

Date 1/20/2020

☒ **J. CHAPTER 94 CONSISTENCY DETERMINATION (Continued)**

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 1/20/2020

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 1/20/2020

☐ **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 connect on 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 F 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)

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

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?
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.

BRYAN L. RIVER, P.E.

Name (Print)

PRESIDENT

Title

2358 SUNSHINE ROAD, SUITE 200, ALLENTOWN, PA

Address

18103

Bryan L. River

Signature

12/15/19

Date

610-797-4200

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 \$ 250.00 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.

$$\# \underline{5} \text{ Lots (or EDUs) X } \$50.00 = \$ \underline{250.00}$$

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:

$$\# \underline{\hspace{2cm}} \text{ Lots (or EDUs) X } \$35.00 = \$ \underline{\hspace{2cm}}$$

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)

PROJECT NARRATIVE

1. **Indicate the nature of the development project. (Residential, Commercial, Institutional, Industrial, etc.) If the project is commercial, institutional, describe the activity, such as light manufacturing, private hospital, or heavy manufacturing.**

The existing tracts (4), totaling 24,656 S.F., will be subdivided into (6) lots for construction of (2) duplex dwelling units and (1) single family dwelling. One lot will contain one-half of an existing duplex dwelling as shown on Lot 1.

2. **The number of lots or EDU's in the development project.**

The number of lots being created is 6 and the (5) newly created lots for construction of single family residences will generate 175.5 GPD Ea for a total of 877.5 GPD or 2.62 EDU's (1 EDU = 335 GPD) of sanitary sewage flows for the development.

3. **Describe the proposed sewage disposal method (municipal treatment facility, package plant, etc.) including a description of collection and conveyance facilities, if applicable. Include a general map showing the path of the sewage to the treatment facility.**

The proposed disposal method for this project is to connect to the existing sanitary sewer infrastructure within East Cumberland Street for those dwellings fronting said street and to the existing sanitary sewer infrastructure within south Carlisle Street for those dwellings fronting said street for conveying the flow to the Kline's Island Waste Water Treatment Plant (WWTP).

Conveyance:

The sewage flows will be conveyed to existing gravity lines in East Cumberland and South Carlisle Streets. There will be (2) additional connections in East Cumberland Street. There will be (3) additional connections in South Carlisle Street.

Treatment:

As mentioned previously, the sewage flows from this site will flow to the Kline's Island Waste Treatment Plant (WWTP) NPDES No. PA 0051985 A-2. The WWTP is operated by Horsham Water & Sewer Authority. *Wrong WWTP info.*

4. **Specify the projected population to be served and sewage flows in GPD and how these flows were calculated.**

The generation of sewer flows is as noted above at 877.5 GPD. With each new dwelling unit having approximately 3.5 residents per dwelling unit and generating 175.5 GPD, per dwelling unit equates to 877.5 GPD.

5. **Describe the location, disposal point or land application, if applicable.**

The discharge from this site is to sanitary sewers located within East Cumberland and South Carlisle Streets. Both sanitary sewer lines are 8" VCP.

6. **List the total acreage of the proposed land development project.**

The total lot area is 24,656 S.F. or 0.566 Acres.

7. **Describe the use of any acreage or parcels under the same ownership and adjacent to the property. (Such as: for future development, recreational, agriculture, open space, etc.) If the land is proposed for future development, or is part of a phased project, determine if there will be adequate sewage disposal facilities to serve those phases.**

There is no acreage or parcels adjacent to the site which are owned by RAMIA HOLDINGS LP. As such there will be no future development of an adjacent parcel by this owner.

8. **Provide information on any previous Act 537 planning completed for the site and any other information that the applicant believes is important for the Department's review of the project.**

There has been no known sewer planning module for this specific site. There will not be any expansion of the service area for this project and the project is within the City's Act 537. There are no wetlands located on this site.

Wetland Considerations

There are no wetlands on this site. As such, no additional permitting for crossing this feature is required.

Carlisle-Cumberland St Flow



1/15/2020, 12:49:32 PM

1 inch = 752 feet

- ☆ Kline's Island
- Sanitary Mains**
- Collector Sanitary Main
- Interceptor Sanitary Main

Sources: Esri, HERE, DeLorme,
 GEBCO, USGS, FAO, Swire,
 Ordnance Survey, OpenStreetMap contributors, and the
 IGN (Institut National de l'Information Géographique)



This map is intended for reference only.

Lehigh County Authority