

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

TRANSMITTAL LETTER FOR SEWAGE FACILITIES PLANNING MODULE

		DEF	PARTMENT OF E	INVIRONMENTAL PROTEC	CTION (DEP) USE ONLY		
DEP	CODE#	CLIEN	NT ID#	SITE ID#	APS ID#	AUTH. ID #	
Cle 453	an Water 30 Bath P	gency (DEP or o Program ike PA 18017	lelegated loca	l agency)	Date		
Dear Sir/N	Madam:						
Attached	please fii	nd a completed	sewage faciliti	es planning module pre	epared by <u>Benjamin A. I</u>	Kutz (Name)	
Project Er	ngineer			for <u>To</u>	for Townes on Ridge		
a subdivis	sion, com	<i>(Title)</i> mercial ,or indus	strial facility lo	cated in City of Allento	(Nan wn	1e)	
Lehigh						County.	
Check or	ne	(City, Boroug	gh, Township)				
⊠ (i)	The planning module, as prepared and submitted by the applicant, is approved by the municipality as proposed ☐ revision ☒ supplement for new land development to its Official Sewage Facilities Plan (Official Plan), and is ☐ adopted for submission to DEP ☐ transmitted to the delegated LA for approval in accordance with the requirements of 25 <i>Pa. Code</i> Chapter 71 and the <i>Pennsylvania Sewage Facilities Act</i> (35 P.S. §750),						
	OR						
(ii) The planning module will not be approved by the municipality as a proposed revision of land development to its Official Plan because the project described therein is unaccept checked below:							
	Check	Check Boxes					
	Additional studies are being performed by or on behalf of this municipality which may have an effect or the planning module as prepared and submitted by the applicant. Attached hereto is the scope of services to be performed and the time schedule for completion of said studies.						
	or 25	The planning module as submitted by the applicant fails to meet limitations imposed by other laws ordinances, officially adopted comprehensive plans and/or environmental plans (e.g., zoning, land use 25 <i>Pa. Code</i> Chapter 71). Specific reference or applicable segments of such laws or plans are attached hereto.					
	☐ Ot	Other (attach additional sheet giving specifics).					
Municipal approving			low by check	ing appropriate boxes	s which components are	e being transmitted to the	
Modu Mod		eteness Checklist Community Onlot		e Collection/Treatment F Flow Treatment Facilities	☐ 4B County Pt	Planning Agency Review lanning Agency Review Joint Health Department	
Mich	act of	143Man		Make	P Idahan	6/16/2021	
Municip	oal Secreta	ry (print)		Signatu	ıre -	Date	