



**Transcontinental Gas Pipe Line Company, LLC**  
2800 Post Oak Boulevard (77056)  
P.O. Box 1396  
Houston, Texas 77251-1396  
13/215-2000

June 13, 2025

Ms. Rebecca M. Albert, PG  
Chapter 102 Section Chief  
Department of Environmental Protection  
Regional Permit Coordination Office  
Rachel Carson State Office Building  
400 Market Street  
Harrisburg, PA 17101

**RE: Individual Erosion and Sediment Control Permit Application**

Transcontinental Gas Pipe Line Company, LLC  
Northeast Supply Enhancement Project  
Quarryville Loop and Compressor Station 200 Modifications  
Drumore, East Drumore, and Eden Townships, Lancaster County and  
East Whiteland Township, Chester County, PA

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Dear Ms. Albert,

In connection with Transcontinental Gas Pipe Line Company, LLC's (Transco), Northeast Supply Enhancement Project (NESE) entailing the Quarryville Loop and Compressor Station 200 modifications (Project), enclosed for filing with the Pennsylvania Department of Environmental Protection (PADEP) is a Chapter 102 Individual Erosion and Sediment Control Application.

The Quarryville Loop portion of the Project is located in Lancaster County, Pennsylvania, and is proposed as part of the overall NESE project, an interstate natural gas pipeline. NESE is proposing to deliver 400,000 dekatherms per day of firm transportation of natural gas to an existing customer of Transco. The Quarryville Loop will consist of approximately 10.17 miles of 42-inch natural gas pipeline designed for a maximum allowable operating pressure of 1,440 pounds per square inch gauge (psig). The Quarryville Loop will run from MP 1681.00 of Transco's Mainline to MP 1691.17 in Drumore, East Drumore, and Eden Townships. The Quarryville Loop will be co-located within the existing Mainline right-of-way (ROW) with the exception of areas where it is necessary to widen the existing ROW to accommodate a 25-foot offset between pipelines.

Transco also proposes to modify Compressor Station 200 in East Whiteland Township as part of the NESE project, which aims to expand Transco's interstate natural gas pipeline system. Piping and valve modifications to the existing Compressor Station are proposed.

Transco is reviving the Project at the request of the federal administration and in consideration of the President's Executive Orders, *Declaring a National Energy Emergency* and *Unleashing American Energy*, issued on January 20, 2025. These Executive Orders make clear that infrastructure development, particularly in the Northeastern United States, is desperately needed. Transco's Project will enhance reliability, flexibility, and efficiency on a critical part of Transco's system and provide access to crucial supplies of natural gas. As recently highlighted in the Northeast Power Coordinating Council's *Northeast Gas/Electric System Study*, existing gas infrastructure in New York is unable to meet the demand for most electric generators during a cold snap.<sup>1</sup> While many generators in downstate New York—where the Project is intended to serve—are dual-fuel capable, very few electric generators have firm transportation entitlements, exposing electric generation to risk in the event of an extreme weather event or a pipeline outage.<sup>2</sup>

Transco filed a petition the Federal Energy Regulatory Commission (FERC or Commission) requesting the reissuance of the Certification of Public Convenience and Necessity (Certificate) for the Project on May 29, 2025.

This Erosion and Sediment Control permit application and supporting contents have been provided to PADEP electronically via the Onbase Electronic Application Form Uploads system, with the corresponding fee check provided via FedEx overnight to the Regional Permit Coordination Office.

Items provided include:

- Completed and signed Erosion and Sediment Control District Permit For Discharges of Stormwater Associated With Construction Activities Application and Checklist
- Completed General Information Form
- Erosion and Sediment (E&S) Control Plan
- Project Location Map
- Act 14 municipal notification letters
- Proof of receipt of Act 14 municipal notification letters
- PNHP review receipt with impact clearance letters
- PHMC cultural consultation
- Complete Post-Construction Stormwater Management (PCSM) Plan
- Requisite E&S and PCSM Modules
- Permit filing fees:
  - A \$22,800.00 check made payable to the Commonwealth of Pennsylvania Clean Water Fund for the disturbed acreage fee

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<sup>1</sup> Northeast Power Coordinating Council, *Northeast Gas/Electric System Study*, at 5 (Jan. 21, 2025).

<sup>2</sup> *Id.* at 5-6.

Given the urgent need for affordable natural gas supplies, Transco is respectfully requesting that the PADEP expedite its review of this application. Transco appreciates the PADEP's assistance. If you require any additional information that will facilitate the PADEP's review, please contact me at 281-433-8046 or via email at [joseph.dean@williams.com](mailto:joseph.dean@williams.com). Alternatively, you can contact Heather Brewster at AECOM at 610-234-0381 or via email at [Heather.Brewster@aecom.com](mailto:Heather.Brewster@aecom.com).

Sincerely,

A handwritten signature in black ink, appearing to read "Joseph Dean", with a long horizontal flourish extending to the right.

Joseph Dean  
Manager, Permitting  
Encls.

cc (via e-mail):  
Heather Brewster, AECOM

# **PADEP CHAPTER 102 INDIVIDUAL EROSION AND SEDIMENT CONTROL PLAN**

**FOR  
NORTHEAST SUPPLY ENHANCEMENT PROJECT**

**COMPRESSOR STATION 200 AND  
QUARRYVILLE LOOP  
(Application Part 1 - Administrative)**

**EAST WHITELAND,  
DRUMORE, EAST  
DRUMORE, EDEN  
TOWNSHIPS  
CHESTER AND LANCASTER COUNTY, PENNSYLVANIA**

**JUNE 2025  
Prepared for:**



**TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC (TRANSCO)  
2800 POST OAK BOULEVARD  
HOUSTON, TEXAS 77251-1396**

**Prepared By:**



**625 WEST RIDGE PIKE, SUITE E-100  
CONSHOHOCKEN, PENNSYLVANIA 19428**

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## **Section 1**

### **CH 102 Individual E&S Application Form**



## EROSION AND SEDIMENT CONTROL PERMIT FOR DISCHARGES OF STORMWATER ASSOCIATED WITH CONSTRUCTION ACTIVITIES APPLICATION

Before completing this form, read the step-by-step instructions provided in the individual permit package.

DEP / CCD USE ONLY					
Date Received: _____			Permit ID: _____		
<input type="checkbox"/> Application Complete			Date of: <input type="checkbox"/> Return <input type="checkbox"/> Withdrawal <input type="checkbox"/> Denial		
Date Determined Complete: _____			_____		
Issuance Date: _____			Date Resubmission Received: _____		
Effective Date: _____			Expiration Date: _____		
GENERAL INFORMATION					
1. Applicant Name(s): <b>Transcontinental Gas Pipe Line Company, LLC (Transco)</b>					
2. Appl. Type: <input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Major Amendment <input type="checkbox"/> Minor Amendment Permit No. PA_____					
3. Project Description: See attached					
4. Project Activity: <input type="checkbox"/> Road Maintenance <input type="checkbox"/> Timber Harvesting <input checked="" type="checkbox"/> Oil and Gas <input type="checkbox"/> Other:					
5. <input type="checkbox"/> Site Restoration Project 6. <input checked="" type="checkbox"/> Discharges to Special Protection Waters (Module 3 Attached)					
7. <input checked="" type="checkbox"/> Project Site Within 150 Feet of Special Protection Waters (Module 4 Attached)					
8. <input checked="" type="checkbox"/> Phased Project No. phases: 2 No. phases complete:					
PROJECT SITE INFORMATION					
1. Project Site Name: Northeast Supply Enhancement- Quarryville Loop and CS200					
2. Total Project Site Area: 228.39 acres					
3. Project Site Impervious Area – Pre-Construction:		23.71	acres	Percent of Total:	10.4 %
4. Project Site Impervious Area – Post-Construction:		26.31	acres	Percent of Total:	11.5 %
5. Hydric soils or other wetland features are present within the Project Site. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
<input checked="" type="checkbox"/> If Yes, the wetland determination is attached to the application.					
6. County Name	Municipality Name	City	Boro	Twp	State
Lancaster- Quarryville Loop	Drumore, East Drumore, and Eden	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PA
7. County Name	Municipality Name	City	Boro	Twp	State
Chester - CS200	East Whiteland	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PA
8. Site Location Address					
Quarryville Loop: 39.860939, -76.202406					
CS200: 60 N Bacton Hill Rd, Malvern, PA 19355					
9. Site Location City		State	ZIP+4		
Various (linear project)		PA	17566-9410, 17566-9360, 17566-9611, 17566-9273, 17532-9741, 17518-9741, 17518-9745, 19355-1026		

### OPERATOR INFORMATION

1. Operator Name: \_\_\_\_\_ 2. Contact Name: \_\_\_\_\_  
 3. Operator Address: \_\_\_\_\_ 4. Operator Phone: \_\_\_\_\_  
 5. Operator City, State, ZIP: \_\_\_\_\_  
 6. Operator's Role in Project: ☐ General Contractor ☐ Consultant ☐ Excavation Contractor ☐ Other  
 7. Operator's Responsibilities: \_\_\_\_\_

1. Operator Name: \_\_\_\_\_ 2. Contact Name: \_\_\_\_\_  
 3. Operator Address: \_\_\_\_\_ 4. Operator Phone: \_\_\_\_\_  
 5. Operator City, State, ZIP: \_\_\_\_\_  
 6. Operator's Role in Project: ☐ General Contractor ☐ Consultant ☐ Excavation Contractor ☐ Other  
 7. Operator's Responsibilities: \_\_\_\_\_

### EARTH DISTURBANCE INFORMATION

1. Total Earth Disturbance Area 220.40 acres 9,600,513 sf  
 2. Pre-Construction Impervious Area: 838332 sf  
 3. Post-Construction Impervious Area: 870954 sf  
 4. Pre-Construction/Present Land Use(s):  

<u>Meadow</u>	<u>7%</u>
<u>Forested</u>	<u>4%</u>
<u>Impervious</u>	<u>6%</u>
<u>Agricultural</u>	<u>68%</u>
<u>Grass</u>	<u>15%</u>

 5. Post-Construction Land Use(s):  

<u>Meadow</u>	<u>7%</u>
<u>Forested</u>	<u>4%</u>
<u>Impervious</u>	<u>5%</u>
<u>Agricultural</u>	<u>68%</u>
<u>Grass</u>	<u>15%</u>

 6. ☒ A map/drawing showing the site, LOD, surface waters, discharge points, BMPs and drainage is attached.  
 7. Report latitude and longitude at the center of the proposed disturbed area.  
 Latitude: 39.860939/40.049792 Longitude: -76.202406/-75.587548  
 8. Horizontal Reference Datum: ☐ NAD of 1927 ☒ NAD of 1983 ☐ WGS of 1984 ☐ Unknown  
 9. There will be off-site construction support activities. ☐ Yes ☒ No  
 10. If Yes, identify the nature of known off-site support activities whose disturbance is included in #1, above:

Description of Off-Site Support Activity	Distance from Site	Disturbance Area
	mi	acres
	mi	acres

11. Identify any other off-site support activities whose disturbance is not included in #1, above (see instructions).

Description of Off-Site Support Activity	Distance from Site	Disturbance Area
	mi	acres
	mi	acres

12. Check the appropriate box concerning fill material (see instructions):  
☐ No fill material is expected to be imported to the project site.  
☒ It is expected that fill will be needed for this project. The source of fill has not yet been determined but will undergo environmental due diligence when identified.  
☐ It is expected that fill will be exported from the project. The applicant has identified the source of the fill and has determined the material to be clean fill. DEP's online Certification of Clean Fill form has been submitted.



determined the material to be clean fill. DEP's online Certification of Clean Fill form has been submitted.

### EARTH DISTURBANCE INFORMATION (CONTINUED)

- ☐ It is expected that fill will be needed for this project, which is located on a site that is being remediated to Act 2 standards and will be utilized in accordance with DEP standards under that program.
- ☐ It is expected that fill will be needed for this project. The applicant has identified the source of the fill and has determined it to be regulated fill. The regulated fill is authorized on the project site under a Waste Management General Permit No. WMGR096 authorization dated: \_\_\_\_\_.
- ☐ It is expected that fill will be needed for this project, which is not on an Act 2 site. The applicant has identified the fill and has determined that it does not meet criteria for clean fill. The applicant is seeking authorization to use the regulated fill from DEP's Waste Management Program.

13. The site is enrolled in DEP's Act 2 Program. ☐ Yes ☒ No

14. The site was previously enrolled in DEP's Act 2 Program and cleanup standards have been met. ☐ Yes ☒ No

15. Is Act 537 sewage planning approval needed for this project? ☐ Yes ☒ No

The Act 537 approval letter is attached to the NOI. ☐ Yes ☐ No (will be submitted prior to approval) ☒ N/A

16. A Chapter 105 permit or authorization is required. ☒ Yes ☐ No

17. If Yes, identify the necessary authorization. ☒ Joint Permit ☐ General Permit ☐ Waiver

18. Other DEP/CCD permits or authorizations are required. ☐ Yes ☒ No

19. If Yes, identify the necessary authorizations.

### EXISTING PERMITS

Identify all environmental permits issued by DEP/CCD/EPA or are pending for this facility/project site within the past 5 years.

Type of Permit	Permit No.	Date Issued	Issued By

### COMPLIANCE HISTORY

Was/Is the facility owner or operator in violation of any DEP regulation, permit, order or schedule of compliance at this or any other facility or project site within the past 5 years? ☐ Yes ☒ No

If "Yes," list each permit, order or schedule of compliance and provide current compliance status. Use additional sheets to provide information on all permits.

Permit Program:

Permit No.:

Brief Description of Non-Compliance:

Steps Taken to Achieve Compliance

Date(s) Compliance Achieved

Current Compliance Status: ☒ In Compliance ☐ In Non-Compliance

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
001	39°48'54.80"	76°17'17.50"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
002	39°48'55.99"	76°17'07.46"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
003	39°48'58.97"	76°17'01.63"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
004	39°49'06.21"	76°17'01.47"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
005	39°49'11.05"	76°16'53.45"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
006	39°49'14.32"	76°16'48.06"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
001	39°48'54.80"	76°17'17.50"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
002	39°48'55.99"	76°17'07.46"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
003	39°48'58.97"	76°17'01.63"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
004	39°49'06.21"	76°17'01.47"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
005	39°49'11.05"	76°16'53.45"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
006	39°49'14.32"	76°16'48.06"	UNT to Wissler Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
007	39°49'24.46"	76°16'30.26"	UNT to Wissler Run via WW-T02-008	<input type="checkbox"/>	<input type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
008	39°49'36.71"	76°16'12.51"	UNT to Wissler Run overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
009	39°49'51.94"	76°15'59.57"	UNT to Muddy Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
010	39°49'51.84"	76°15'42.54"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
011	39°49'54.03"	76°15'38.63"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
012	39°50'05.01"	76°15'19.37"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
007	39°49'24.46"	76°16'30.26"	UNT to Wissler Run via WW-T02-008	<input type="checkbox"/>	<input type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
008	39°49'36.71"	76°16'12.51"	UNT to Wissler Run overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
009	39°49'51.94"	76°15'59.57"	UNT to Muddy Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-WWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
010	39°49'51.84"	76°15'42.54"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
011	39°49'54.03"	76°15'38.63"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
012	39°50'05.01"	76°15'19.37"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
013	39°50'13.28"	76°15'35.20"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
014	39°50'13.37"	76°15'23.66"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
015	39°50'13.04"	76°15'04.82"	UNT to Fishing Creek via WW-T02-01	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
016	39°50'13.84"	76°15'03.24"	UNT to Fishing Creek via W-T02-012A-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
017	39°50'18.69"	76°14'54.09"	UNT to Fishing Creek via WW-T02-009	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
018	39°50'20.73"	76°14'50.29"	UNT to Fishing Creek via WB-T02-013	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
013	39°50'13.28"	76°15'35.20"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
014	39°50'13.37"	76°15'23.66"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
015	39°50'13.04"	76°15'04.82"	UNT to Fishing Creek via WW-T02-01	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
016	39°50'13.84"	76°15'03.24"	UNT to Fishing Creek via W-T02-012A-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
017	39°50'18.69"	76°14'54.09"	UNT to Fishing Creek via WW-T02-009	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
018	39°50'20.73"	76°14'50.29"	UNT to Fishing Creek via WB-T02-013	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
019	39°50'29.22"	76°14'34.00"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
020	39°50'43.40"	76°14'31.36"	UNT to Fishing Creek overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
021	39°50'31.48"	76°14'27.06"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
022	39°50'22.54"	76°14'22.25"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
023	39°50'43.01"	76°14'06.85"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
024	39°50'46.26"	76°14'00.46"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
019	39°50'29.22"	76°14'34.00"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
020	39°50'43.40"	76°14'31.36"	UNT to Fishing Creek overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
021	39°50'31.48"	76°14'27.06"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
022	39°50'22.54"	76°14'22.25"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
023	39°50'43.01"	76°14'06.85"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
024	39°50'46.26"	76°14'00.46"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No  
Name of storm sewer owner/operator: Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.  
De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
025	39°50'48.99"	76°13'54.73"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
026	39°50'53.01"	76°13'47.22"	UNT to Fishing Creek overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
027	39°50'55.22"	76°13'42.57"	UNT to Fishing Creek via WW-T02-10	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
028	39°51'03.90"	76°13'30.61"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
029	39°51'06.98"	76°13'15.12"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
030	39°51'15.23"	76°13'13.63"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
025	39°50'48.99"	76°13'54.73"	UNT to Fishing Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
026	39°50'53.01"	76°13'47.22"	UNT to Fishing Creek overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
027	39°50'55.22"	76°13'42.57"	UNT to Fishing Creek via WW-T02-10	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
028	39°51'03.90"	76°13'30.61"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
029	39°51'06.98"	76°13'15.12"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
030	39°51'15.23"	76°13'13.63"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
031	39°51'08.69"	76°13'10.04"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
032	39°51'13.09"	76°13'04.10"	UNT to Conowingo Creek via W-T02-001A	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
033	39°51'15.11"	76°13'00.55"	UNT to Conowingo Creek via W-T02-001C	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
034	39°51'22.31"	76°12'42.93"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
035	39°51'21.06"	76°12'40.80"	UNT to Conowingo Creek via W-T02-014A-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
036	39°51'25.89"	76°12'37.10"	UNT to Conowingo Creek via W-T02-014B-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
031	39°51'08.69"	76°13'10.04"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
032	39°51'13.09"	76°13'04.10"	UNT to Conowingo Creek via W-T02-001A	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
033	39°51'15.11"	76°13'00.55"	UNT to Conowingo Creek via W-T02-001C	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
034	39°51'22.31"	76°12'42.93"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
035	39°51'21.06"	76°12'40.80"	UNT to Conowingo Creek via W-T02-014A-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
036	39°51'25.89"	76°12'37.10"	UNT to Conowingo Creek via W-T02-014B-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*



### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
037	39°51'31.87"	76°12'29.82"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
038	39°51'36.88"	76°12'14.92"	UNT to Conowingo Creek via WW-T02-005	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
039	39°51'37.97"	76°12'11.45"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
040	39°51'39.40"	76°12'06.96"	UNT to Conowingo Creek via WW-T02-006	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
041	39°51'37.60"	76°12'02.08"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
042	39°51'43.79"	76°11'54.95"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
037	39°51'31.87"	76°12'29.82"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
038	39°51'36.88"	76°12'14.92"	UNT to Conowingo Creek via WW-T02-005	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
039	39°51'37.97"	76°12'11.45"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
040	39°51'39.40"	76°12'06.96"	UNT to Conowingo Creek via WW-T02-006	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
041	39°51'37.60"	76°12'02.08"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
042	39°51'43.79"	76°11'54.95"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
043	39°51'53.36"	76°11'44.83"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
044	39°51'57.57"	76°11'34.42"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
045	39°52'00.30"	76°11'27.73"	UNT to Conowingo Creek via WW-T02-007	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
046	39°52'19.97"	76°10'46.87"	UNT to Stewart Run via W-T02-009A-2	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
047	39°52'26.93"	76°10'33.40"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
048	39°52'31.06"	76°10'25.28"	UNT to Stewart Run via WW-T02-011	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
043	39°51'53.36"	76°11'44.83"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
044	39°51'57.57"	76°11'34.42"	UNT to Conowingo Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
045	39°52'00.30"	76°11'27.73"	UNT to Conowingo Creek via WW-T02-007	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
046	39°52'19.97"	76°10'46.87"	UNT to Stewart Run via W-T02-009A-2	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
047	39°52'26.93"	76°10'33.40"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
048	39°52'31.06"	76°10'25.28"	UNT to Stewart Run via WW-T02-011	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
049	39°52'38.33"	76°10'11.39"	UNT to Stewart Run via WW-T02-011	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
050	39°52'43.50"	76°10'01.51"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
051	39°52'47.25"	76°09'54.30"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
052	39°52'55.65"	76°09'34.72"	UNT to Stewart Run via WW-T06-001	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
053	39°53'04.61"	76°09'16.81"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
054	39°53'07.54"	76°09'11.17"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
049	39°52'38.33"	76°10'11.39"	UNT to Stewart Run via WW-T02-011	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
050	39°52'43.50"	76°10'01.51"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
051	39°52'47.25"	76°09'54.30"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
052	39°52'55.65"	76°09'34.72"	UNT to Stewart Run via WW-T06-001	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
053	39°53'04.61"	76°09'16.81"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
054	39°53'07.54"	76°09'11.17"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
055	39°53'10.12"	76°09'06.17"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
056	39°53'20.05"	76°08'50.89"	UNT to South Fork Big Beaver Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
057	39°53'30.29"	76°08'33.48"	UNT to Bowery Run via WW-T02-012	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
058	39°53'31.22"	76°08'32.16"	UNT to Bowery Run via W-T02-011A-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
059	39°53'43.15"	76°08'14.96"	UNT to Bowery Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
060	39°53'44.26"	76°08'11.36"	UNT to Bowery Run via W-T06-004A-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
055	39°53'10.12"	76°09'06.17"	UNT to Stewart Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
056	39°53'20.05"	76°08'50.89"	UNT to South Fork Big Beaver Creek via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
057	39°53'30.29"	76°08'33.48"	UNT to Bowery Run via WW-T02-012	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
058	39°53'31.22"	76°08'32.16"	UNT to Bowery Run via W-T02-011A-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
059	39°53'43.15"	76°08'14.96"	UNT to Bowery Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
060	39°53'44.26"	76°08'11.36"	UNT to Bowery Run via W-T06-004A-1	<input type="checkbox"/>	<input type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### STORMWATER DISCHARGE INFORMATION

1. List all stormwater discharge points during construction and provide the information requested below (see instructions). ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
061	39°53'49.46"	76°08'03.96"	UNT to Bowery Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
062	39°53'53.60"	76°07'59.12"	UNT to Bowery Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
063	39°53'52.80"	76°07'49.68"	UNT to Bowery Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
000				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
000				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
000				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

2. List all stormwater discharge points after construction and stabilization are complete and provide the information requested below. ☐ Not Applicable

Discharge Point No.	LATITUDE	LONGITUDE	RECEIVING WATERS					
	Degrees	Degrees	Name of Receiving Waters	Ches. Bay?	Non-Surface Waters	Ch. 93 Class.	Impaired?	TMDL?
061	39°53'49.46"	76°08'03.96"	UNT to Bowery Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
062	39°53'53.60"	76°07'59.12"	UNT to Bowery Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
063	39°53'52.80"	76°07'49.68"	UNT to Bowery Run via overland flow	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HQ-CWF-MF	<input type="checkbox"/>	<input type="checkbox"/>
000				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
000				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
000				<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

3. Will any of the points identified above discharge to a storm sewer system? ☐ Yes ☒ No Is the storm sewer an MS4 or CSS? ☐ Yes ☒ No

Name of storm sewer owner/operator:

Discharge points discharging to storm sewer:

4. Identify and describe all non-stormwater discharges that are expected to occur during permit coverage. Describe the frequency and volume of all such discharges.

De minimis impacts (e.g., dust control via water spray bar) - No non-stormwater discharges are anticipated but de minimis impacts may occur during construction operations.

☐ No non-stormwater discharges are anticipated.

5. Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? ☐ Yes ☒ No

*If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate controls during and after earth disturbance activities to prevent accelerated erosion.*

### DISCHARGES TO IMPAIRED WATERS

1. Are stormwater discharges anticipated to impaired waters during or following construction activities? ☒ Yes ☐ No
2. If Yes to #1, is Antidegradation Module 3 attached to the application? ☒ Yes ☐ No
3. Is there an EPA-approved TMDL for the impaired waters? ☐ Yes ☒ No
4. If Yes to #3, is there a WLA(s) in the TMDL that would apply to the applicant's discharges? ☐ Yes ☒ No
5. If Yes to #4, explain in the space provided or in a separate attachment how the discharges will comply with the WLA(s).

### CERTIFICATION FOR APPLICANTS

I certify under penalty of law and subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my 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 my knowledge and belief, true, accurate, and complete. I certify that I will abide by the terms and conditions of the permit until the Notice of Termination (NOT) is submitted. I will not commence in construction resulting in earth disturbance until all criteria specified in the permit are met for commencing construction. I will ensure that a licensed professional or a designee is present on-site and be responsible during critical stages of implementation of the PCSM Plan, as applicable. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Joseph E. Dean

**Applicant Name** (type or print legibly)



**Applicant Signature**

Manager, Permitting

**Official Title**

6/12/2025

**Date Signed**

### CERTIFICATION FOR OPERATORS

I understand that I am assuming joint and severable responsibility, coverage, and liability under the permit for all duties, responsibilities, and non-compliance with the Chapter 102 permit, as a co-permittee of this permit coverage. I certify that I will implement the requirements of the permit and the approved design plans and will notify the permittee and the agency that issued permit coverage prior to implementing changes to the plans.

**Operator Name** (type or print legibly)

**Official Title**

**Operator Signature**

**Date Signed**

**Operator Name** (type or print legibly)

**Official Title**

**Operator Signature**

**Date Signed**



## EROSION AND SEDIMENT CONTROL PERMIT FOR DISCHARGES OF STORMWATER ASSOCIATED WITH CONSTRUCTION ACTIVITIES APPLICATION CHECKLIST <sup>1</sup>

<b>Applicant Name:</b>	Transcontinental Gas Pipe Line Company, LLC		
<b>Project Site Name:</b>	Northeast Supply Enhancement Project - Compressor Station 200		
<b>Application Type:</b>	<input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Major Amendment <input type="checkbox"/> Minor Amendment		
<b>Check the box provided for all items completed and/or provided. Failure to provide all required information will delay the processing of the application. ENCLOSE THIS CHECKLIST WITH YOUR COMPLETED APPLICATION.</b>			
	APPLICATION REQUIREMENTS	Check ✓ If Included	Check ✓ If Not Applicable
1.	One original and one copy of the complete Application form (3800-PM-BCW0019b)	<input checked="" type="checkbox"/>	
2.	One original and one copy of the complete General Information Form (GIF) (0210-PM-PIO0001) <sup>2</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	Administrative Filing Fee (\$1,500 plus any additional CCD-specific fees, if applicable)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	One copy of the completed Application form and one copy of the GIF to DEP (if CCD is the initial recipient) <sup>2</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	Disturbed Acreage Fee (\$100 x disturbed acres)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	Two copies of the County Notification Form (3800-FM-BCW0271b) <sup>3</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	Two copies of the Municipal Notification Form (3800-FM-BCW0271c) <sup>3</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.	Two copies of the proof of county and municipal receipt of Notification Forms (required if Notification Forms are not signed by county and/or municipality) <sup>3</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.	One original and one copy of the PNDI Receipt <sup>4</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.	Two copies of the PNDI clearance letter(s) from jurisdictional agencies <sup>4</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.	Two copies of the PHMC clearance letter(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12.	One original and two copies of E&S Module 1 (3800-PM-BCW0406a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13.	Three copies of the E&S Plan Drawings <sup>5</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14.	Three copies of the E&S Standard Worksheets (or equivalent) and supporting calculations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15.	One original and two copies of PCSM Module 2 (3800-PM-BCW0406b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16.	Three copies of the PCSM Plan Drawings <sup>5</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17.	Three copies of the PCSM Supporting Calculations – BMP Design	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18.	Three copies of the PCSM Supporting Calculations – Stormwater Analysis (required where DEP PCSM Spreadsheet not used)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19.	Three copies of the DEP PCSM Spreadsheet – Volume Worksheet (optional)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20.	Three copies of the DEP PCSM Spreadsheet – Rate Worksheet (optional)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21.	Three copies of the DEP PCSM Spreadsheet – Quality Worksheet	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22.	Two copies of the soil/geologic test results (where BMPs relying on infiltration will be installed)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23.	One original and two copies of Antidegradation Analysis Module 3 (3800-PM-BCW0406c) (and required attachments)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24.	One original and two copies of Riparian Buffer Module 4 (3800-PM-BCW0406d) (and required attachments)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
25.	Other:	<input type="checkbox"/>	



## EROSION AND SEDIMENT CONTROL PERMIT FOR DISCHARGES OF STORMWATER ASSOCIATED WITH CONSTRUCTION ACTIVITIES APPLICATION CHECKLIST <sup>1</sup>

<b>Applicant Name:</b>	Transcontinental Gas Pipe Line Company, LLC		
<b>Project Site Name:</b>	Northeast Supply Enhancemen Project - Quarryville Loop		
<b>Application Type:</b>	<input checked="" type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Major Amendment <input type="checkbox"/> Minor Amendment		
<b>Check the box provided for all items completed and/or provided. Failure to provide all required information will delay the processing of the application. ENCLOSE THIS CHECKLIST WITH YOUR COMPLETED APPLICATION.</b>			
	APPLICATION REQUIREMENTS	Check ✓ If Included	Check ✓ If Not Applicable
1.	One original and one copy of the complete Application form (3800-PM-BCW0019b)	<input checked="" type="checkbox"/>	
2.	One original and one copy of the complete General Information Form (GIF) (0210-PM-PIO0001) <sup>2</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.	Administrative Filing Fee (\$1,500 plus any additional CCD-specific fees, if applicable)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.	One copy of the completed Application form and one copy of the GIF to DEP (if CCD is the initial recipient) <sup>2</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5.	Disturbed Acreage Fee (\$100 x disturbed acres)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6.	Two copies of the County Notification Form (3800-FM-BCW0271b) <sup>3</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7.	Two copies of the Municipal Notification Form (3800-FM-BCW0271c) <sup>3</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8.	Two copies of the proof of county and municipal receipt of Notification Forms (required if Notification Forms are not signed by county and/or municipality) <sup>3</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9.	One original and one copy of the PNDI Receipt <sup>4</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10.	Two copies of the PNDI clearance letter(s) from jurisdictional agencies <sup>4</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11.	Two copies of the PHMC clearance letter(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12.	One original and two copies of E&S Module 1 (3800-PM-BCW0406a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13.	Three copies of the E&S Plan Drawings <sup>5</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14.	Three copies of the E&S Standard Worksheets (or equivalent) and supporting calculations	<input checked="" type="checkbox"/>	<input type="checkbox"/>
15.	One original and two copies of PCSM Module 2 (3800-PM-BCW0406b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16.	Three copies of the PCSM Plan Drawings <sup>5</sup>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
17.	Three copies of the PCSM Supporting Calculations – BMP Design	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18.	Three copies of the PCSM Supporting Calculations – Stormwater Analysis (required where DEP PCSM Spreadsheet not used)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19.	Three copies of the DEP PCSM Spreadsheet – Volume Worksheet (optional)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20.	Three copies of the DEP PCSM Spreadsheet – Rate Worksheet (optional)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
21.	Three copies of the DEP PCSM Spreadsheet – Quality Worksheet	<input checked="" type="checkbox"/>	<input type="checkbox"/>
22.	Two copies of the soil/geologic test results (where BMPs relying on infiltration will be installed)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
23.	One original and two copies of Antidegradation Analysis Module 3 (3800-PM-BCW0406c) (and required attachments)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
24.	One original and two copies of Riparian Buffer Module 4 (3800-PM-BCW0406d) (and required attachments)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
25.	Other:	<input type="checkbox"/>	



**Section 2**

**Fee Check**

# AECOM TECHNOLOGY CORPORATION

NO. 14695761

DATE 11-Jun-2025  
INVOICE NO.  
CK1749585475707

VENDOR NAME COMMONWEALTH OF PENNSYLVANIA CLEAN WATER FUND  
DESCRIPTION  
PADEP CH 102 Permit Fee

INVOICE DATE  
11-Jun-2025

VOUCHER NO.  
863252095

VENDOR NO 108358  
DISCOUNT  
0.00

NET AMOUNT  
22,800.00

PLEASE DETACH AND RETAIN THIS STATEMENT AS YOUR RECORD OF PAYMENT

0.00 22,800.00

VERIFY THE AUTHENTICITY OF THIS MULTI-TONE SECURITY DOCUMENT. CHECK BACKGROUND AREA CHANGES COLOR GRADUALLY FROM TOP TO BOTTOM.

AECOM TECHNOLOGY CORPORATION  
9400 Amberglen Boulevard, Bldg C  
Austin, Texas 78729-1100

WELLS FARGO BANK  
115 Hospital Drive  
Van Wert, OH 45891

56-382  
412

NO. 14695761

CHECK DATE	CHECK NUMBER
11-Jun-2025	14695761

CHECK AMOUNT

\$22,800.00

PAY: Twenty-Two Thousand Eight Hundred Dollars And Zero Cents\*\*\*\*\*

TO THE  
ORDER OF:

COMMONWEALTH OF PENNSYLVANIA CLEAN  
WATER FUND

909 ELMERTON AVENUE  
HARRISBURG, PA 17110  
United States

AUTHORIZED SIGNATURES

FROM: AECOM TECHNOLOGY CORPORATION  
9400 Amberglen Boulevard, Bldg C  
Austin, Texas 78729-1100

TO: COMMONWEALTH OF PENNSYLVANIA CLEAN WATER FUND  
909 ELMERTON AVENUE  
HARRISBURG, PA 17110  
United States

# AECOM TECHNOLOGY CORPORATION

NO. 14695780

DATE 11-Jun-2025  
INVOICE NO.  
CK1749586253863

VENDOR NAME LANCASTER COUNTY CONSERVATION DISTRICT  
DESCRIPTION  
Lancaster SCD Permit Fee

INVOICE DATE  
11-Jun-2025

VOUCHER NO.  
863252472

VENDOR NO 201364  
DISCOUNT  
0.00

NET AMOUNT  
57,880.00

PLEASE DETACH AND RETAIN THIS STATEMENT AS YOUR RECORD OF PAYMENT

0.00 57,880.00

VERIFY THE AUTHENTICITY OF THIS MULTI-TONE SECURITY DOCUMENT. CHECK BACKGROUND AREA CHANGES COLOR GRADUALLY FROM TOP TO BOTTOM.

AECOM TECHNOLOGY CORPORATION  
9400 Amberglen Boulevard, Bldg C  
Austin, Texas 78729-1100

WELLS FARGO BANK  
115 Hospital Drive  
Van Wert, OH 45891

56-382  
412

NO. 14695780

CHECK DATE	CHECK NUMBER
11-Jun-2025	14695780

PAY: Fifty-Seven Thousand Eight Hundred Eighty Dollars And Zero Cents\*\*\*\*\*

CHECK AMOUNT

\$57,880.00

TO THE  
ORDER OF: LANCASTER COUNTY CONSERVATION  
DISTRICT  
1383 ARCADIA RD RM 200  
LANCASTER, PA 17601-3149  
United States

AUTHORIZED SIGNATURES

FROM: AECOM TECHNOLOGY CORPORATION  
9400 Amberglen Boulevard, Bldg C  
Austin, Texas 78729-1100

TO: LANCASTER COUNTY CONSERVATION DISTRICT  
1383 ARCADIA RD RM 200  
LANCASTER, PA 17601-3149  
United States

1-888-724-3257

60-7269/2313

504

HEATHER BREWSTER

[Redacted]

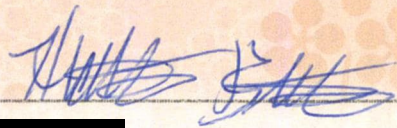
Date 01/11/25

Pay to the Order of LLCD Clean Water Fund \$ 1,500.00

one thousand five hundred 00/100 Dollars

 Security Features included. Details on Back.

SANTANDER BANK, N.A.

Memo Lancaster Fee check  MP

[Redacted]



# AECOM TECHNOLOGY CORPORATION

NO. 14695744

DATE 11-Jun-2025  
INVOICE NO.  
CK1749585847354

VENDOR NAME CHESTER COUNTY CONSERVATION DISTRICT  
DESCRIPTION  
Chester SCD Permit Fee

INVOICE DATE  
11-Jun-2025

VOUCHER NO.  
863252096

VENDOR NO 197127  
DISCOUNT 0.00  
NET AMOUNT 6,500.00

PLEASE DETACH AND RETAIN THIS STATEMENT AS YOUR RECORD OF PAYMENT

0.00 6,500.00

VERIFY THE AUTHENTICITY OF THIS MULTI-TONE SECURITY DOCUMENT. CHECK BACKGROUND AREA CHANGES COLOR GRADUALLY FROM TOP TO BOTTOM.

AECOM TECHNOLOGY CORPORATION  
9400 Amberglen Boulevard, Bldg C  
Austin, Texas 78729-1100

WELLS FARGO BANK  
115 Hospital Drive  
Van Wert, OH 45891

56-382  
412

NO. 14695744

CHECK DATE	CHECK NUMBER
11-Jun-2025	14695744

CHECK AMOUNT

\$6,500.00

PAY: Six Thousand Five Hundred Dollars And Zero Cents\*\*\*\*\*

TO THE  
ORDER OF:

CHESTER COUNTY CONSERVATION  
DISTRICT  
674 UNIONVILLE ROAD  
SUITE 105  
KENNETT SQUARE, PA 19348-1704  
United States

AUTHORIZED SIGNATURES

FROM: AECOM TECHNOLOGY CORPORATION  
9400 Amberglen Boulevard, Bldg C  
Austin, Texas 78729-1100

TO: CHESTER COUNTY CONSERVATION DISTRICT  
674 UNIONVILLE ROAD  
SUITE 105  
KENNETT SQUARE, PA 19348-1704  
United States

### **Section 3**

#### **General Information Form**



## GENERAL INFORMATION FORM – AUTHORIZATION APPLICATION

Before completing this General Information Form (GIF), read the step-by-step instructions provided in this application package. This form is used by the Department of Environmental Protection (DEP) to inform our programs regarding what other DEP permits or authorizations may be needed for the proposed project or activity. This version of the General Information Form (GIF) must be completed and returned with any program-specific application being submitted to the DEP.

Related ID#s (If Known)		DEP USE ONLY
Client ID# _____	APS ID# _____	Date Received & General Notes
Site ID# _____	Auth ID# _____	
Facility ID# _____		

### CLIENT INFORMATION

DEP Client ID# 82494	Client Type/Code LLC	Dun & Bradstreet ID#	
Legal Organization Name or Registered Fictitious Name Transcontinental Gas Pipe Line Company, LLC		Employer ID# (EIN) 74-1079400	Is the EIN a SSN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
State of Incorporation or Registration of Fictitious Name TX	<input type="checkbox"/> Corporation <input checked="" type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> LLP <input type="checkbox"/> LP <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Association/Organization <input type="checkbox"/> Estate/Trust <input type="checkbox"/> Other		
Individual Last Name Dean	First Name Joseph	MI E	Suffix
Additional Individual Last Name	First Name	MI	Suffix
Mailing Address Line 1 2800 Post Oak Blvd, Suite 600 - Office 1135		Mailing Address Line 2	
Address Last Line – City Houston	State Texas	ZIP+4 77056-6016	Country United States
Client Contact Last Name Dean	First Name Joseph	MI E	Suffix
Client Contact Title Manager, Permitting	Phone 215-667-9894	Ext	Cell Phone
Email Address joseph.dean@williams.com	FAX		

### SITE INFORMATION

DEP Site ID#	Site Name Northeast Supply Enhancement Project- Quarryville Loop and Compressor Station 200				
EPA ID#	Estimated Number of Employees to be Present at Site				
Description of Site Rural, agricultural area adjacent to/overlapping an existing natural gas pipeline right-of-way for the installation of an approximately 10 mile natural gas pipeline. CS 200 existing natural gas compressor station.					
Tax Parcel ID(s):					
County Name(s) Lancaster (Loop)	Municipality(ies) East Drumore, Drumore, Eden	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input checked="" type="checkbox"/>	State PA

Chester (CS 200)	East Whiteland	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PA
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Site Location Line 1**

Eastern Terminus Loop: 39.898013, -76.132475;  
Western Terminus Loop: 39.815498, -76.287820

**Site Location Line 2**

CS Centerpoint 40.049722, -75.5888056

**Site Location Last Line – City**

Quarryville (Loop) and Frazer (Compressor Station)

**State**

PA

**ZIP+4**
**Detailed Written Directions to Site**

To Western Terminus of Loop: From Buck, PA, head southwest on PA-372 and follow for 2.4 mi. Turn left onto Susquehannock Drive and follow for 2.0 mi. Turn right onto River Rd. and follow for 2.1 mi. Turn left and site will be located on the left, 367 ft. after turn. To CS from Route 202 exit for PA-401 and head west for approximately 1.5 miles. Turn left onto N. Bacton Hill Road for 0.6 miles and the site will be on the right side of the roadway.

**Site Contact Last Name**

Dean

**First Name**

Joseph

**MI**

E.

**Suffix**
**Site Contact Title**

Manager, Permitting

**Site Contact Firm**

Transcontinental Gas Pipe Line Company, LLC

**Mailing Address Line 1**

2800 Post Oak Blvd, Suite 600 - Office 1135

**Mailing Address Line 2**
**Mailing Address Last Line – City**

Houston

**State**

Texas

**ZIP+4**

77056-6016

**Phone**

215-667-9894

**Ext**
**FAX**
**Email Address**

joseph.dean@williams.com

**NAICS Codes** (Two- & Three-Digit Codes – List All That Apply)

221

**6-Digit Code** (Optional)

**Client to Site Relationship**

OWN

## FACILITY INFORMATION

**Modification of Existing Facility**
**Yes**
**No**

1. Will this project modify an existing facility, system, or activity?

☒
☐

2. Will this project involve an addition to an existing facility, system, or activity?

☒
☐

*If "Yes", check all relevant facility types and provide DEP facility identification numbers below.*

Facility Type	DEP Fac ID#	Facility Type	DEP Fac ID#
<input type="checkbox"/> Air Emission Plant		<input type="checkbox"/> Industrial Minerals Mining Operation	
<input type="checkbox"/> Beneficial Use (water)		<input type="checkbox"/> Laboratory Location	
<input type="checkbox"/> Blasting Operation		<input type="checkbox"/> Land Recycling Cleanup Location	
<input type="checkbox"/> Captive Hazardous Waste Operation		<input type="checkbox"/> Mine Drainage Treatment / Land Recycling Project Location	
<input type="checkbox"/> Coal Ash Beneficial Use Operation		<input type="checkbox"/> Municipal Waste Operation	
<input type="checkbox"/> Coal Mining Operation		<input type="checkbox"/> Oil & Gas Encroachment Location	
<input type="checkbox"/> Coal Pillar Location		<input checked="" type="checkbox"/> Oil & Gas Location	238159
<input type="checkbox"/> Commercial Hazardous Waste Operation		<input type="checkbox"/> Oil & Gas Water Poll Control Facility	
<input type="checkbox"/> Dam Location		<input type="checkbox"/> Public Water Supply System	
<input type="checkbox"/> Deep Mine Safety Operation -Anthracite		<input type="checkbox"/> Radiation Facility	
<input type="checkbox"/> Deep Mine Safety Operation -Bituminous		<input type="checkbox"/> Residual Waste Operation	
<input type="checkbox"/> Deep Mine Safety Operation -Ind Minerals		<input type="checkbox"/> Storage Tank Location	



<input type="checkbox"/> Encroachment Location (water, wetland)	<hr/>	<input type="checkbox"/> Water Pollution Control Facility	<hr/>
<input type="checkbox"/> Erosion & Sediment Control Facility	<hr/>	<input type="checkbox"/> Water Resource	<hr/>
<input type="checkbox"/> Explosive Storage Location	<hr/>	<input type="checkbox"/> Other:	<hr/>

Latitude/Longitude Point of Origin	Latitude			Longitude										
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds								
CS 200 40 02 54.44, -75 35 13.02 Western Termin Loop 39 48 55.79, -76 17 16.15														
<b>Horizontal Accuracy Measure</b>	Feet	--or--		Meters										
<b>Horizontal Reference Datum Code</b>	<input type="checkbox"/>	North American Datum of 1927												
	<input checked="" type="checkbox"/>	North American Datum of 1983												
	<input type="checkbox"/>	World Geodetic System of 1984												
<b>Horizontal Collection Method Code</b>	GISDR													
<b>Reference Point Code</b>	CNTAR													
<b>Altitude</b>	Feet	--or--		Meters										
<b>Altitude Datum Name</b>	<input type="checkbox"/>	The National Geodetic Vertical Datum of 1929												
	<input checked="" type="checkbox"/>	The North American Vertical Datum of 1988 (NAVD88)												
<b>Altitude (Vertical) Location Datum Collection Method Code</b>	TOPO													
<b>Geometric Type Code</b>	POINT													
<b>Data Collection Date</b>	6/12/2025													
<b>Source Map Scale Number</b>	1	Inch(es)	=	24,000	Feet									
	--or--	Centimeter(s)	=		Meters									

## PROJECT INFORMATION

### Project Name

Northeast Supply Enhancement Project - Quarryville Loop and Compressor Station 200

### Project Description

Installation and operation of an approximately 10.16 mile long, 42" natural gas pipeline loop in Lancaster County, PA and upgrades to the existing Compressor Station 200 in Chester County, Frazer PA.

### Project Consultant Last Name

Haas

### First Name

Peter

### MI

### Suffix

PE

### Project Consultant Title

Senior Civil Engineer

### Consulting Firm

AECOM Technical Services, LLC

### Mailing Address Line 1

625 West Ridge Pike

### Mailing Address Line 2

STE E-100

### Address Last Line – City

Conshohocken

### State

PA

### ZIP+4

19428-9998

### Phone

215-667-9894

### Ext

### FAX

### Email Address

Peter.Haas@aecom.com

### Time Schedules

4<sup>th</sup> QTR 2025

### Project Milestone (Optional)

Commence Construction

4<sup>th</sup> QTR 2026

In-Service

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1. Is the project located in or within a 0.5-mile radius of an Environmental Justice community as defined by DEP? ☒ Yes ☐ No

To determine if the project is located in or within a 0.5-mile radius of an environmental justice community, please use [the online PennEnviroScreen tool](#). To see specific EJ areas, select the appropriate year of your submittal from the themes box on the right.

2. Have you informed the surrounding community prior to submitting the application to the Department? ☒ Yes ☐ No

Method of notification: FERC 7C process

3. Have you addressed community concerns that were identified? ☒ Yes ☐ No ☐ N/A

If no, please briefly describe the community concerns that have been expressed and not addressed.

4. Is your project funded by state or federal grants? ☐ Yes ☒ No

**Note:** If "Yes", specify what aspect of the project is related to the grant and provide the grant source, contact person and grant expiration date.

Aspect of Project Related to Grant

Grant Source: \_\_\_\_\_

Grant Contact Person: \_\_\_\_\_

Grant Expiration Date: \_\_\_\_\_

5. Is this application for an authorization on Appendix A of the Land Use Policy? (For referenced list, see Appendix A of the Land Use Policy attached to GIF instructions) ☒ Yes ☐ No

**Note:** If "No" to Question 5, the application is not subject to the Land Use Policy.

If "Yes" to Question 5, the application is subject to this policy and the Applicant should answer the additional questions in the **Land Use Information** section.

### LAND USE INFORMATION

**Note:** Applicants should submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances.

1. Is there an adopted county or multi-county comprehensive plan? ☒ Yes ☐ No
2. Is there a county stormwater management plan? ☒ Yes ☐ No
3. Is there an adopted municipal or multi-municipal comprehensive plan? ☒ Yes ☐ No
4. Is there an adopted county-wide zoning ordinance, municipal zoning ordinance or joint municipal zoning ordinance? ☒ Yes ☐ No

**Note:** If the Applicant answers "No" to either Questions 1, 3 or 4, the provisions of the PA MPC are not applicable and the Applicant does not need to respond to questions 5 and 6 below.

If the Applicant answers "Yes" to questions 1, 3 and 4, the Applicant should respond to questions 5 and 6 below.

5. Does the proposed project meet the provisions of the zoning ordinance or does the proposed project have zoning approval? If zoning approval has been received, attach documentation. ☒ Yes ☐ No
6. Have you attached Municipal and County Land Use Letters for the project? ☒ Yes ☐ No

## COORDINATION INFORMATION

**Note:** The PA Historical and Museum Commission must be notified of proposed projects in accordance with DEP Technical Guidance Document 012-0700-001 [at PHMC's online portal, PA-SHARE](#).

**If the activity will be a mining project** (i.e., mining of coal or industrial minerals, coal refuse disposal and/or the operation of a coal or industrial minerals preparation/processing facility), respond to questions 1.0 through 2.5 below.

**If the activity will not be a mining project**, skip questions 1.0 through 2.5 and begin with question 3.0.

<b>1.0</b>	<b>Is this a coal mining project?</b> If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
<b>1.1</b>	<b>Will this coal mining project involve coal preparation/processing activities in which the total amount of coal prepared/processed will be equal to or greater than 200 tons/day?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>1.2</b>	<b>Will this coal mining project involve coal preparation/processing activities in which the total amount of coal prepared/processed will be greater than 50,000 tons/year?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>1.3</b>	<b>Will this coal mining project involve coal preparation/processing activities in which thermal coal dryers or pneumatic coal cleaners will be used?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>1.4</b>	<b>For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>1.5</b>	<b>Will this coal mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>1.6</b>	<b>Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>2.0</b>	<b>Is this a non-coal (industrial minerals) mining project?</b> If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
<b>2.1</b>	<b>Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>2.2</b>	<b>Will this non-coal (industrial minerals) mining project involve the crushing and/or screening of sand and gravel with the exception of wet sand and gravel operations (screening only) and dry sand and gravel operations with a capacity of less than 150 tons/hour of unconsolidated materials?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>2.3</b>	<b>Will this non-coal (industrial minerals) mining project involve the construction, operation and/or modification of a portable non-metallic (i.e., non-coal) minerals processing plant under the authority of the General Permit for Portable Non-metallic Mineral Processing Plants (i.e., BAQ-PGPA/GP-3)?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<b>2.4</b>	<b>For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

2.5	Will this non-coal (industrial minerals) mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.0	Will your project, activity, or authorization have anything to do with a well related to oil or gas production, have construction within 200 feet of, affect an oil or gas well, involve the waste from such a well, or string power lines above an oil or gas well? If "Yes", respond to 3.1-3.3. If "No", skip to Question 4.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
3.1	Does the oil- or gas-related project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water (including wetlands)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.2	Will the oil- or gas-related project involve discharge of industrial wastewater or stormwater to a dry swale, surface water, ground water or an existing sanitary sewer system or storm water system? If "Yes", discuss in <i>Project Description</i> .	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.3	Will the oil- or gas-related project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.0	Will the project involve a construction activity that results in earth disturbance? If "Yes", specify the total disturbed acreage.	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.0.1	Total Disturbed Acreage	228			
4.0.2	Will the project discharge or drain to a special protection water (EV or HQ) or an EV wetland?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.0.3	Will the project involve a construction activity that results in earth disturbance in the area of the earth disturbance that are contaminated at levels exceeding residential or non-residential medium-specific concentrations (MSCs) in 25 Pa. Code Chapter 250 at residential or non-residential construction sites, respectively?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.0	Does the project involve any of the following: water obstruction and/or encroachment, wetland impacts, or floodplain project by the Commonwealth/political subdivision or public utility? If "Yes", respond to 5.1-5.7. If "No", skip to Question 6.0.	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.1	Water Obstruction and Encroachment Projects – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.2	Wetland Impacts – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a wetland?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No

5.3	<b>Floodplain Projects by the Commonwealth, a Political Subdivision of the Commonwealth or a Public Utility – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a floodplain?</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.4	<b>Is your project an interstate transmission natural gas pipeline?</b>	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.5	<b>Does your project consist of linear construction activities which result in earth disturbance in two or more DEP regions AND three or more counties?</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.6	<b>Does your project utilize Floodplain Restoration as a best management practice for Post Construction Stormwater Management?</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.7	<b>Does your project utilize Class V Gravity / Injection Wells as a best management practice for Post Construction Stormwater Management?</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
6.0	<b>Will the project involve discharge of construction related stormwater to a dry swale, surface water, ground water or separate storm water system?</b>	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.1	<b>Will the project involve discharge of industrial waste stormwater or wastewater from an industrial activity or sewage to a dry swale, surface water, ground water or an existing sanitary sewer system or separate storm water system?</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
7.0	<b>Will the project involve the construction and operation of industrial waste treatment facilities?</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	<b>Will the project involve construction of sewage treatment facilities, sanitary sewers, or sewage pumping stations? If “Yes”, indicate estimated proposed flow (gal/day). Also, discuss the sanitary sewer pipe sizes and the number of pumping stations/treatment facilities/name of downstream sewage facilities in the <i>Project Description</i>, where applicable.</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
<b>8.0.1 Estimated Proposed Flow (gal/day)</b>					
9.0	<b>Will the project involve the subdivision of land, or the generation of 800 gpd or more of sewage on an existing parcel of land or the generation of an additional 400 gpd of sewage on an already-developed parcel, or the generation of 800 gpd or more of industrial wastewater that would be discharged to an existing sanitary sewer system?</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
9.0.1	<b>Was Act 537 sewage facilities planning submitted and approved by DEP? If “Yes” attach the approval letter. Approval required prior to 105/NPDES approval.</b>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.0	<b>Is this project for the beneficial use of biosolids for land application within Pennsylvania? If “Yes” indicate how much (i.e. gallons or dry tons per year).</b>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
10.0.1	<b>Gallons Per Year (residential septage)</b>				
10.0.2	<b>Dry Tons Per Year (biosolids)</b>				

<b>11.0</b>	<b>Does the project involve construction, modification or removal of a dam?</b> If "Yes", identify the dam.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>11.0.1</b>	<b>Dam Name</b>		
<b>12.0</b>	<b>Will the project interfere with the flow from, or otherwise impact, a dam?</b> If "Yes", identify the dam.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>12.0.1</b>	<b>Dam Name</b>		
<b>13.0</b>	<b>Will the project involve operations (excluding during the construction period) that produce air emissions (i.e., NOX, VOC, etc.)?</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>13.0.1</b>	If "Yes", is the operation subject to the agricultural exemption in 35 P.S. § 4004.1?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>13.0.2</b>	If the answer to 13.0.1 is "No", identify each type of emission followed by the estimated amount of that emission. <b>Enter all types &amp; amounts of emissions; separate each set with semicolons.</b>		
<b>14.0</b>	<b>Does the project include the construction or modification of a drinking water supply to serve 15 or more connections or 25 or more people, at least 60 days out of the year?</b> If "Yes," check all proposed sub-facilities.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>14.0.1</b>	<b>Number of Persons Served</b>		
<b>14.0.2</b>	<b>Number of Employee/Guests</b>		
<b>14.0.3</b>	<b>Number of Connections</b>		
<b>14.0.4</b>	<b>Sub-Fac: Distribution System</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>14.0.5</b>	<b>Sub-Fac: Water Treatment Plant</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>14.0.6</b>	<b>Sub-Fac: Source</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>14.0.7</b>	<b>Sub-Fac: Pump Station</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>14.0.8</b>	<b>Sub-Fac: Transmission Main</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>14.0.9</b>	<b>Sub-Fac: Storage Facility</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>15.0</b>	<b>Will your project include infiltration of storm water or waste water to ground water within one-half mile of a public water supply well, spring or infiltration gallery?</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>16.0</b>	<b>Is your project to be served by an existing public water supply?</b> If "Yes", indicate name of supplier and attach letter from supplier stating that it will serve the project.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>16.0.1</b>	<b>Supplier's Name</b>		
<b>16.0.2</b>	<b>Letter of Approval from Supplier is Attached</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>17.0</b>	<b>Will this project be served by on-lot drinking water wells?</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>18.0</b>	<b>Will this project involve a new or increased drinking water withdrawal from a river, stream, spring, lake, well or other water bod(ies)?</b> If "Yes," reference Safe Drinking Water Program.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>18.0.1</b>	<b>Source Name</b>		



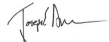
19.0	Will the construction or operation of this project involve treatment, storage, reuse, or disposal of waste? If "Yes," indicate what type (i.e., hazardous, municipal (including infectious & chemotherapeutic), residual) and the amount to be treated, stored, re-used or disposed.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
19.0.1	Type & Amount				
20.0	Will your project involve the removal of coal, minerals, contaminated media, or solid waste as part of any earth disturbance activities?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0	Does your project involve installation of a field constructed underground storage tank? If "Yes," list each Substance & its Capacity. <b>Note:</b> Applicant may need a Storage Tank Site Specific Installation Permit.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
22.0	Does your project involve installation of an aboveground storage tank greater than 21,000 gallons capacity at an existing facility? If "Yes," list each Substance & its Capacity. <b>Note:</b> Applicant may need a Storage Tank Site Specific Installation Permit.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
22.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
23.0	Does your project involve installation of a tank greater than 1,100 gallons which will contain a highly hazardous substance as defined in DEP's Regulated Substances List, 2570-BK-DEP2724? If "Yes," list each Substance & its Capacity. <b>Note:</b> Applicant may need a Storage Tank Site Specific Installation Permit.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
23.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
24.0	Does your project involve installation of a storage tank at a new facility with a total AST capacity greater than 21,000 gallons? If "Yes," list each Substance & its Capacity. <b>Note:</b> Applicant may need a Storage Tank Site Specific Installation Permit.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
24.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
<b>NOTE:</b> If the project includes the installation of a regulated storage tank system, including diesel emergency generator systems, the project may require the use of a Department Certified Tank Handler. For a full list of regulated storage tanks and substances, please go to <a href="http://www.dep.pa.gov">www.dep.pa.gov</a> search term storage tanks					
25.0	Will the intended activity involve the use of a radiation source?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No

## CERTIFICATION

I certify that I have the authority to submit this application on behalf of the applicant named herein and that the information provided in this application is true and correct to the best of my knowledge and information.

For applicants supplying an EIN number: I am applying for a permit or authorization from the Pennsylvania Department of Environmental Protection (DEP). As part of this application, I will provide DEP with an accurate EIN number for the applicant entity. By filing this application with DEP, I hereby authorize DEP to confirm the accuracy of the EIN number provided with the Pennsylvania Department of Revenue. As applicant, I further consent to the Department of Revenue discussing the same with DEP prior to issuance of the Commonwealth permit or authorization.

Type or Print Name     Joseph E. Dean



Manager, Permitting

06/12/2025

Signature

Title

Date