



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

**NOTIFICATION OF PROPOSED STORMWATER DISCHARGES
TO MS4s AND CSSs FOR CHAPTER 102 PERMITS**

GENERAL INFORMATION (COMPLETED BY APPLICANT)

Applicant Name:	<u>Mercer Node Property, LLC</u>	Contact Name:	<u>Craig Hibbard</u>
Applicant Address:	<u>850 New Burton Road Suite 201</u>	Contact Phone:	<u>720-277-1022</u>
Applicant City, State, ZIP:	<u>Dover DE 19904</u>	County:	<u>Mercer</u>
Project Site Name:	<u>Mercer Node Development</u>	Municipality:	<u>City of Sharon</u>

SEWER SYSTEM AND DISCHARGE INFORMATION (COMPLETED BY APPLICANT)

Stormwater will be discharged to a(n): ☒ MS4 ☐ CSS ☒ During Construction ☒ After Construction

Name of MS4 or CSS Owner: PennDOT Discharge Point ID: 002

Proposed Change(s) in Stormwater Runoff **Peak Discharge Rate** (cfs): ☐ No Change

☐ Increase @	☐ 2-yr	☐ 10-yr	☐ 50-yr	☐ 100-yr
☒ Decrease @	☒ 2-yr <u>7.18</u>	☒ 10-yr <u>6.44</u>	☒ 50-yr <u>6.30</u>	☒ 100-yr <u>6.65</u>

Proposed Change in Stormwater Runoff **Volume** up to the 2-year/24-hour storm (CF): ☐ No Change

☐ Increase ☒ Decrease

Proposed Change in Stormwater **Quality (Pollutant Loads)** up to the 2-year/24-hour storm (lbs): ☒ No Change

APPLICANT CERTIFICATION

I certify under penalty of law (see 18 Pa.C.S. § 4904 (relating to unsworn falsification)) that the information reported herein was 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 information, 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 am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

<u>Mercer Node Property LLC</u>	<u>Senior Vice President</u>
Applicant Name	Official Title
Signed by:	<u>6/1/2026</u>
Applicant Signature	Date Signed

ACCEPTANCE OF DISCHARGE (COMPLETED BY MS4/CSS OWNER, IF REQUIRED)

☐ I agree to accept the increase in stormwater runoff rate, volume or quality (pollutant loads) if identified above.

<u>Name of Person Signing for MS4 or CSS Permittee</u>	<u>Official Title</u>
<u>MS4 or CSS Permittee Signature</u>	<u>Date Signed</u>