



**JOINT PERMIT FOR USE OF AN ALGICIDE, HERBICIDE OR FISH CONTROL CHEMICAL IN WATERS OF THE COMMONWEALTH**

**PERMIT NO.: 4514802**

In compliance with the provisions of Pennsylvania's Clean Streams Law, as amended, 35 P.S. §§ 691.1 *et seq.*, the regulations at 25 Pa. Code § 91.38, and the Fish and Boat Code, 30 Pa. C.S. § 2504(a)(1),

**Pocono Wild Haven Estates  
PO Box 86  
Lake Ariel, PA 18436-0086**

is authorized to use the algicide(s), herbicide(s) or fish control chemical(s) ("pesticides") specified below, in accordance with the conditions and requirements set forth herein.

**THIS PERMIT SHALL BECOME EFFECTIVE ON**

**THIS PERMIT SHALL EXPIRE AT MIDNIGHT ON**

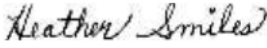
**Municipality:** Middle Smithfield Township      **County:** Monroe  
**Water Body:**       **Total Area:**  acres  
**Receiving Stream:**       **Avg Depth:**  feet

TREATMENT INFORMATION					
Chemical	Maximum Dose	Treatment Area	Treatment Depth	Amount Each Treatment	No. Annual Treatments
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**THIS PERMIT IS ISSUED UNDER THE FOLLOWING CONDITIONS:**

1. The permittee shall use pesticides strictly as described by the product label. Chemical applications shall be performed in accordance with the manufacturer's label directions, existing pesticide use laws, and any conditions imposed by local or state agencies.
2. The permittee may treat a standing body of water (i.e., pond, lake, reservoir, etc.) only when there is minimal or no outflow occurring or expected.
3. The permittee shall not treat Fish and Boat Commission approved stocked trout waters between March 1 and June 15.
4. The permittee shall not treat bass waters during the first week of the Commonwealth inland waters harvest season for bass (the first Saturday after June 11 through the following Saturday).
5. If copper sulfate will be used, the permittee shall not apply copper sulfate at a dose exceeding 0.5 mg/L Cu<sup>2+</sup> or 1.36 lbs CuSO<sub>4</sub>/acre-foot where the total hardness of the water body is less than 50 mg/L CaCO<sub>3</sub>. Where total hardness exceeds 50 mg/L CaCO<sub>3</sub>, the permittee shall not exceed a dose of 1.0 mg/L Cu<sup>2+</sup> or 2.27 lbs CuSO<sub>4</sub>/acre-foot.
6. The permittee shall not treat water bodies containing stocked or wild trout with copper in excess of 0.1 mg/L Cu<sup>2+</sup>.
7. The permittee shall treat water bodies containing very high plant densities separately, in sections, to prevent suffocation of fish. Monitoring of dissolved oxygen is recommended under these conditions.
8. The permittee is responsible for all damages to aquatic life and human health resulting from treatment.

9. Failure of the permittee or agents acting on behalf of the permittee to follow the approved specifications, conditions and requirements immediately renders this permit null and void.
10. If applicable, treatments must also comply with the terms and conditions of the NPDES General Permit for Discharges Associated with Pesticide Applications (PAG-15).
11. If the treatment(s) described herein will continue following the expiration date identified above, the permittee shall submit an application to renew the permit at least 45 days prior to the expiration date.
12. This permit is valid for the treatment information identified above. Any of the following changes will render the permit null and void and the permittee will be required to submit a new application:
  - a. Changes to the water bodies being treated.
  - b. Increases in the maximum dose or to the number of annual treatments.
  - c. Changes in the pesticide(s) used for treatment, unless the new pesticide(s) contain the same active ingredient(s) and the same or lower percent composition of the ingredient in comparison to the pesticide(s) for which approval was issued by PFBC and DEP.

APPROVALS		
<b>For the Pennsylvania Fish and Boat Commission:</b>		
 _____	Section Chief _____ Title	07/24/2018 _____ Date
<b>Additional Requirements:</b> <span style="background-color: yellow; display: inline-block; width: 15px; height: 15px; vertical-align: middle;"></span>		
<b>For the Department of Environmental Protection:</b>		
_____ Bharat Patel, P.E.	Environmental Program Manager _____ Title	_____ Date
<b>Additional Requirements:</b> <span style="background-color: yellow; display: inline-block; width: 15px; height: 15px; vertical-align: middle;"></span>		