



Transcontinental Gas Pipe Line Company, LLC



NORTHEAST SUPPLY
ENHANCEMENT PROJECT

REQUIREMENT C – ACT NOTIFICATION LETTERS
PADEP CHAPTER 105/USACE SECTION 404 JOINT PERMIT APPLICATION



JUNE 2025

June 12, 2025

FedEx Tracking 881985565243

Drumore Township Supervisors
1675 Furniss Rd
Drumore, PA 17518

Re: Northeast Supply Enhancement Project
Quarryville Loop
Lancaster County
Pennsylvania Acts 14, 67, 68, and 127 Notification

Dear Drumore Township Supervisors:

In accordance with Section 1905-A of the Commonwealth Administrative Code, as amended by Act 14, written notification of proposed construction activities must be provided to all applicable municipalities and counties at least 30 days prior to the issuance of Pennsylvania Department of Environmental Protection (PADEP) permits; therefore, the purpose of this letter is to inform the Supervisors that WSP, Inc. (WSP) intends to submit a Joint Permit Application for US Army Corps of Engineers Section 404 and a Chapter 105 Water Obstruction and Encroachment Permit (Chapter 105) to the PADEP on behalf of Transcontinental Gas Pipe Line Company, LLC (Transco), a subsidiary of Williams Partners L.P. (Williams) for the above referenced Project..

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. The Chapter 105 application will be submitted in June 2025.

The Quarryville Loop (Project), located in Lancaster County, Pennsylvania, is proposed as part of the overall Northeast Supply Enhancement (NESE) Project, an interstate natural gas pipeline. NESE is proposed 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. Unavoidable impacts to aquatic resources are proposed as part of the Project.

If FERC reissues the Certificate for the Project and Transco obtains the applicable permits and authorizations, Transco anticipates that construction of the Project will begin in the 4th quarter of 2025 and be in-service by the 4th quarter 2026.

Applicant Contact: Joseph Dean
Williams
2800 Post Oak Blvd., Suite 600 – Office 1135
Houston, Texas 77056
(281) 433-8046

Please submit any comments concerning the land use aspects of the Chapter 105 application for portions of the Project located in your township within 30 days from the date of receipt of this letter to the Regional Permit Coordination Office at the following address:

Kevin White, P.E., Director
Regional Permit Coordination Office
Pennsylvania Department of Environmental Protection
400 Market Street
Rachel Carson State Office Building – 10th Floor
Harrisburg, Pennsylvania 17101

Enclosed is the General Information Form (GIF) (Enclosure 1) for the permit application, a Project location map (Enclosure 2), and a Municipal Land Use letter (Enclosure 3) that is to be submitted with the permit application to PADEP.

Please complete the Municipal Land Use Letter (Enclosure 3) and return **within 30 days** of the receipt of this letter to:

Ben Virts
WSP, Inc
277 Bendix Road, Suite 300
Virginia Beach, VA 23452

Please do not send the Municipal Land Use letter to the PADEP. Should you have any questions or concerns regarding this notification, please contact Ben Virts at (585) 410-1203 or via email at Benjamin.Virts@wsp.com.

Sincerely,

Benjamin.Virts@wsp.com  Digitally signed by
Benjamin.Virts@wsp.com
DN: cn=Benjamin.Virts@wsp.com
Date: 2025.06.12 14:41:01 -04'00'

Ben Virts
Senior Project Manager

Enclosures: (1) PADEP GIF Form (unsigned)
(2) Project Location Map
(3) Sample Land Use Letter



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	First Name	MI	Suffix
Additional Individual Last Name	First Name	MI	Suffix
Mailing Address Line 1 2800 Post Oak Blvd, Level 11		Mailing Address Line 2	
Address Last Line – City Houston	State TX	ZIP+4 77056	Country USA
Client Contact Last Name Dean	First Name Joseph	MI	Suffix
Client Contact Title Manager, Permitting	Phone 281-433-8046	Ext	Cell Phone
Email Address Joseph.Dean@williams.com	FAX		

SITE INFORMATION

DEP Site ID#	Site Name Northeast Supply Enhancement Project- Quarryville Loop				
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.					
Tax Parcel ID(s):					
County Name(s) Lancaster	Municipality(ies) Drumore, East Drumore, Eden	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input checked="" type="checkbox"/>	State

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Site Location Line 1

Eastern Terminus: 39.898013, -76.132475

Site Location Line 2

Western Terminus: 39.815498, -76.287820

Site Location Last Line – City

Quarryville

State ZIP+4

PA 17566

Detailed Written Directions to Site

To Western Terminus: 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.

Site Contact Last Name

Olson

First Name

Karen

MI

Suffix

Site Contact Title

Environmental Specialist

Site Contact Firm

Transcontinental Gas Pipe Line Company, LLC

Mailing Address Line 1

2800 Post Oak Blvd. - Level 11

Mailing Address Line 2

Mailing Address Last Line – City

Houston

State ZIP+4

TX 77056

Phone

713-215-4232

Ext

FAX

Email Address

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 type="checkbox"/> Oil & Gas Location	_____
<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)	_____	<input type="checkbox"/> Water Pollution Control Facility	_____
<input type="checkbox"/> Erosion & Sediment Control Facility	_____	<input type="checkbox"/> Water Resource	_____

Explosive Storage Location

Other:

Latitude/Longitude Point of Origin	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	39	51	43	76	11	58
Horizontal Accuracy Measure	Feet	--or--		Meters		
Horizontal Reference Datum Code	<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				
Horizontal Collection Method Code	GISDR					
Reference Point Code	CNTAR					
Altitude	Feet	600	--or--		Meters	
Altitude Datum Name	<input type="checkbox"/>	The National Geodetic Vertical Datum of 1929				
	<input checked="" type="checkbox"/>	The North American Vertical Datum of 1988 (NAVD88)				
Altitude (Vertical) Location Datum Collection Method Code	TOPO					
Geometric Type Code	POINT					
Data Collection Date	12/05/2016					
Source Map Scale Number	1	Inch(es)	=	24,000	Feet	
	--or--	Centimeter(s)	=	Meters		

PROJECT INFORMATION

Project Name

Northeast Supply Enhancement Project - Quarryville Loop

Project Description

Installation and operation of an approximately 10.17 mile long, 42" natural gas pipeline loop in Lancaster County, PA

Project Consultant Last Name	First Name	MI	Suffix
Virts	Ben	B	
Project Consultant Title	Consulting Firm		
Sr. Environmental Scientist	WSP USA		
Mailing Address Line 1	Mailing Address Line 2		
277 Bendix Rd	Suite 300		
Address Last Line – City	State	ZIP+4	
Virginia Beach	VA	23452	
Phone	Ext	FAX	Email Address
585-410-1203			benjamin.virts@wsp.com
Time Schedules	Project Milestone (Optional)		
October 1, 2025	Start of Construction		

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: Notification Letters

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.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.1	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.2	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.3	Will this coal mining project involve coal preparation/processing activities in which thermal coal dryers or pneumatic coal cleaners will be used?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.5	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.2	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.3	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)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<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		211.68		
4.0.2	Will the project discharge or drain to a special protection water (EV or HQ) or an EV wetland?	<input type="checkbox"/>	Yes	<input checked="" 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	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.4	Is your project an interstate transmission natural gas pipeline?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.5	Does your project consist of linear construction activities which result in earth disturbance in two or more DEP regions AND three or more counties?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.6	Does your project utilize Floodplain Restoration as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.7	Does your project utilize Class V Gravity / Injection Wells as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
6.0	Will the project involve discharge of construction related stormwater to a dry swale, surface water, ground water or separate storm water system?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.1	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	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.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	8.0.1 Estimated Proposed Flow (gal/day)				
9.0	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	9.0.1 Was Act 537 sewage facilities planning submitted and approved by DEP? If “Yes” attach the approval letter. Approval required prior to 105/NPDES approval.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.0	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).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	10.0.1 Gallons Per Year (residential septage)	_____			
	10.0.2 Dry Tons Per Year (biosolids)	_____			

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

19.0	<p>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.</p>	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
19.0.1	Type & Amount	Hydrostatic Test Discharge Water from the Muddy Run Reservoir, 2.1 Million gallons			
20.0	<p>Will your project involve the removal of coal, minerals, contaminated media, or solid waste as part of any earth disturbance activities?</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0	<p>Does your project involve installation of a field constructed underground storage tank? If "Yes," list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<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	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<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	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<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	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
24.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
<p>NOTE: 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 www.dep.pa.gov search term storage tanks</p>					
25.0	<p>Will the intended activity involve the use of a radiation source?</p>	<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 Ben Virts

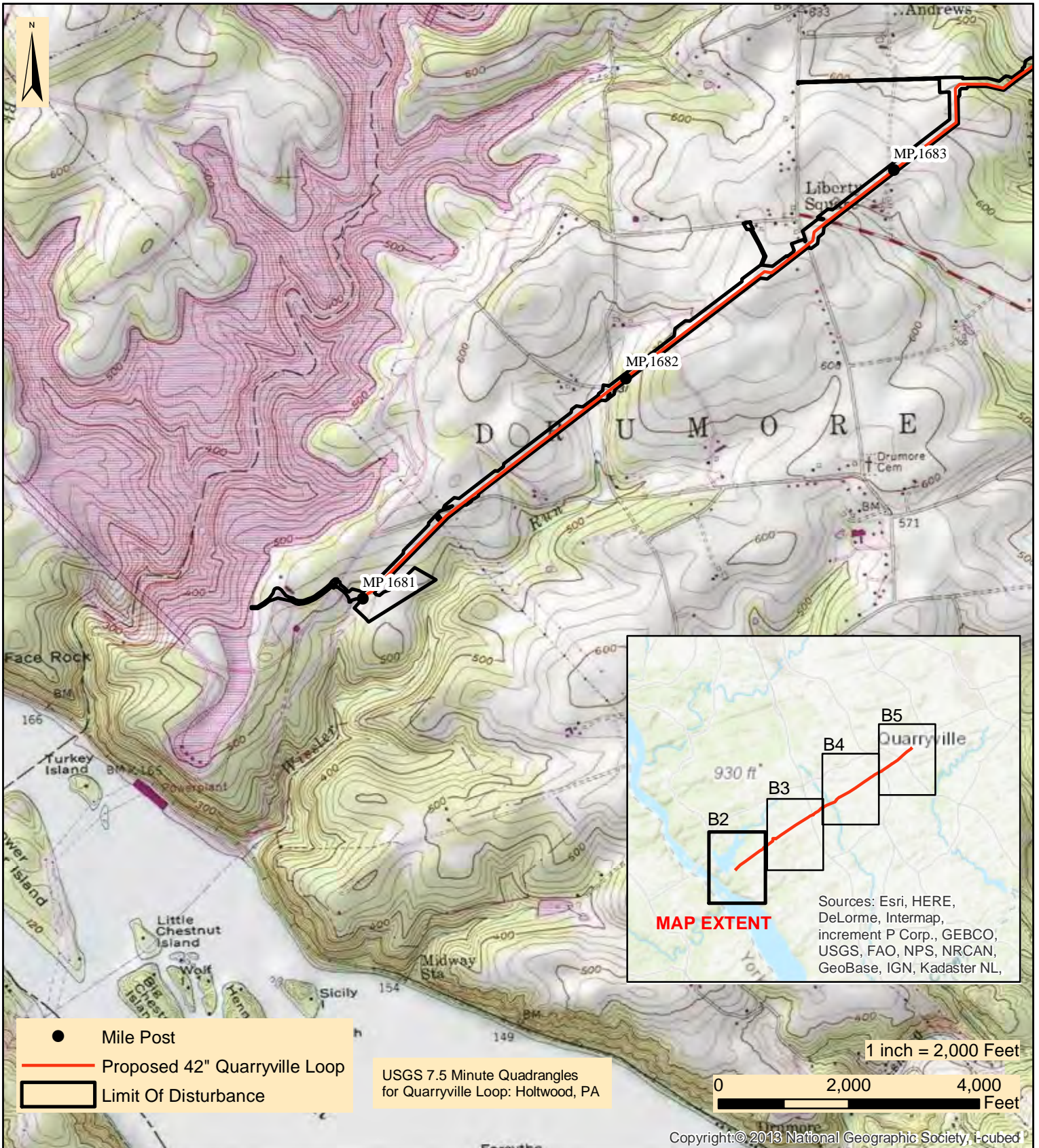
Sr. Environmental Scientist

6/13/25

Signature

Title

Date



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC
 NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP
 PROJECT LOCATION MAP

LANCASTER COUNTY

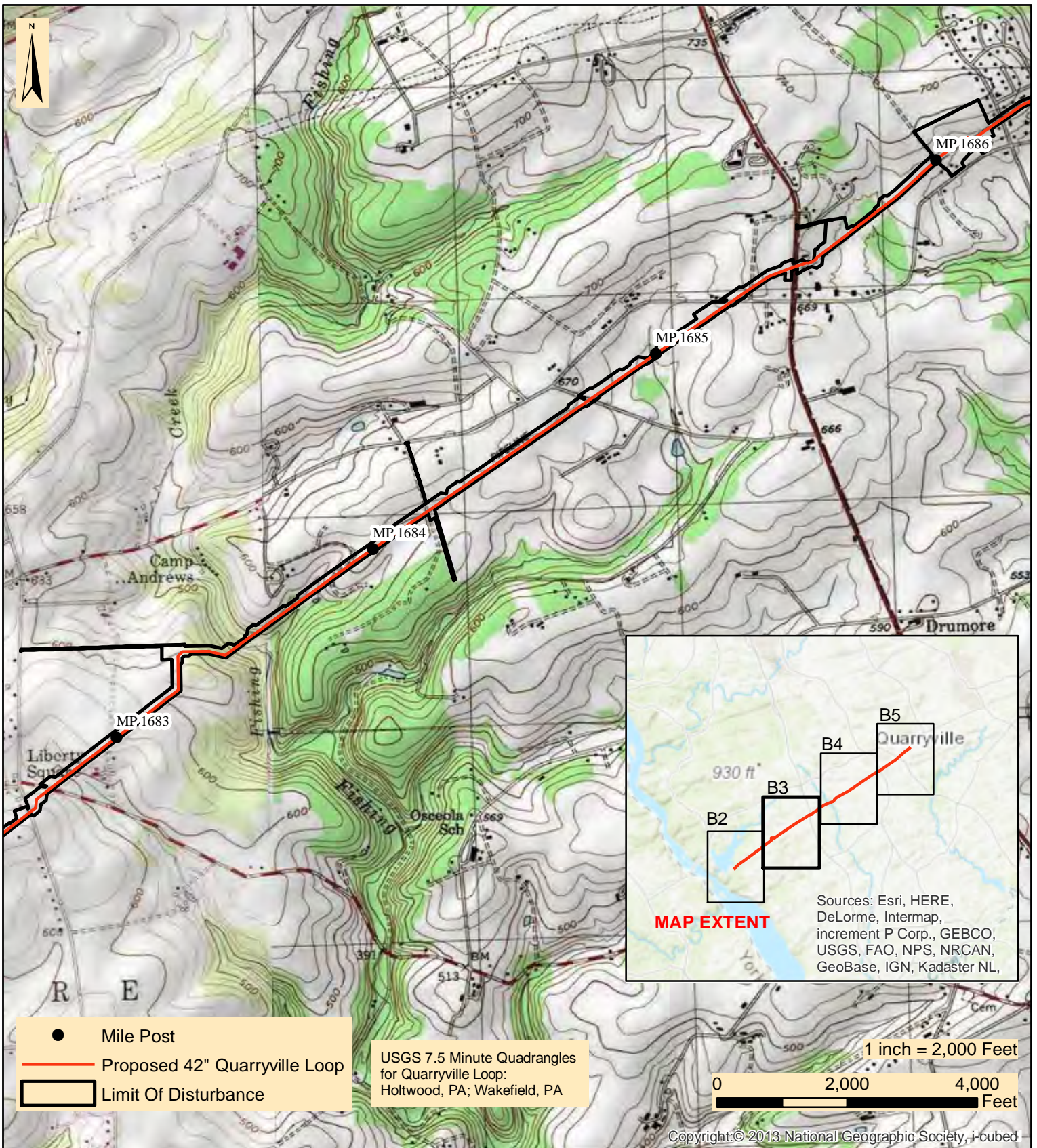
PENNSYLVANIA

Date: 09/25/17

Drawn By: BWH

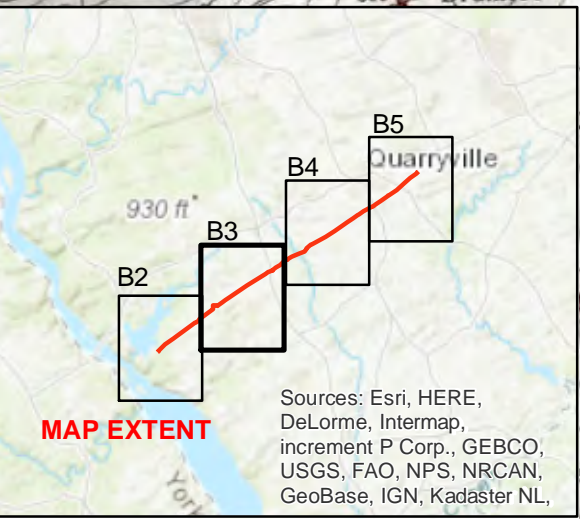
Figure Number: B2

Copyright:© 2013 National Geographic Society, i-cubed

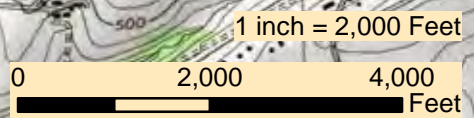


- Mile Post
- Proposed 42" Quarryville Loop
- ▭ Limit Of Disturbance

USGS 7.5 Minute Quadrangles for Quarryville Loop:
Holtwood, PA; Wakefield, PA



Sources: Esri, HERE, DeLorme, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL,



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC
 NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP
 PROJECT LOCATION MAP

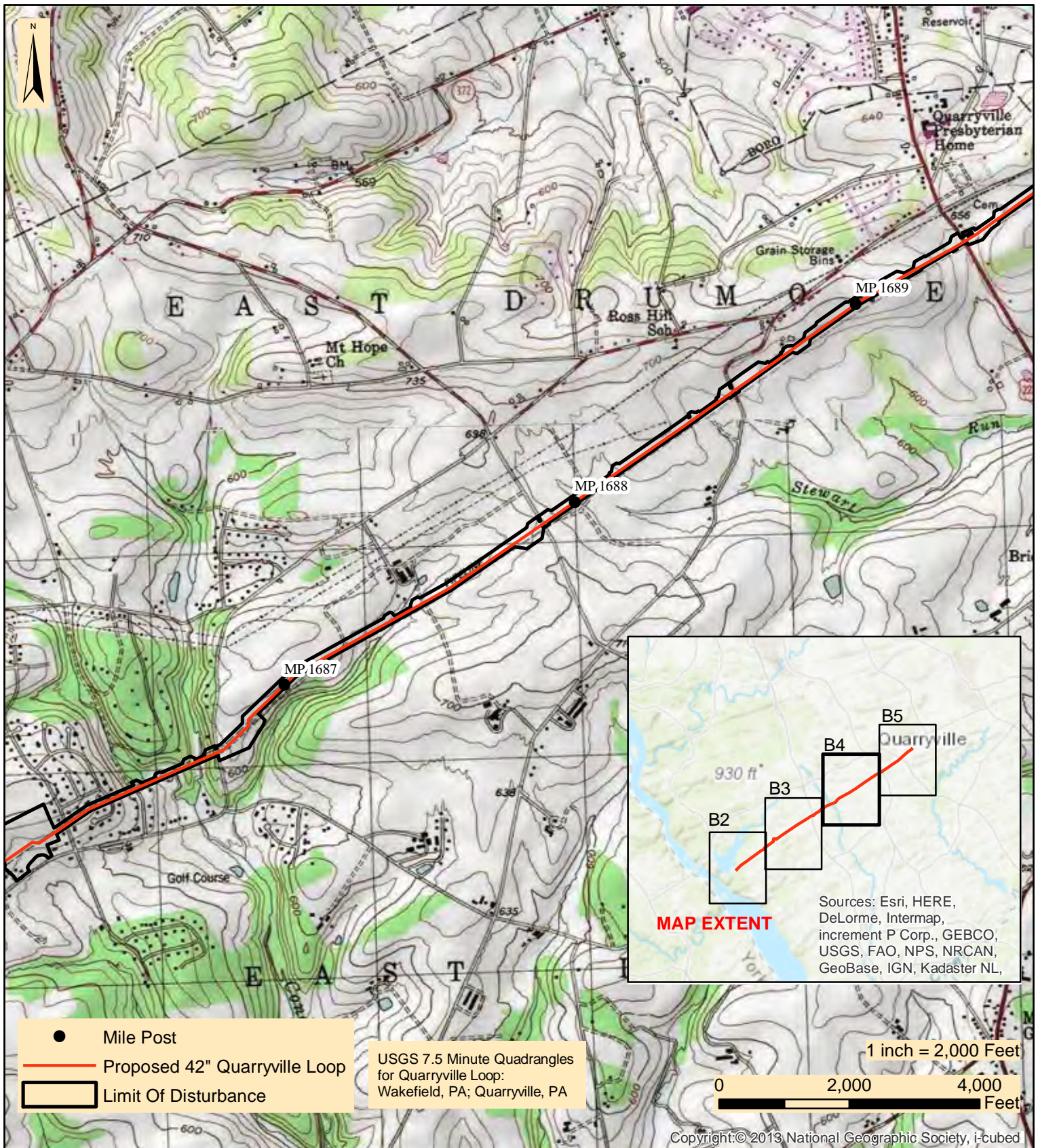
LANCASTER COUNTY

PENNSYLVANIA

Date:
09/25/17

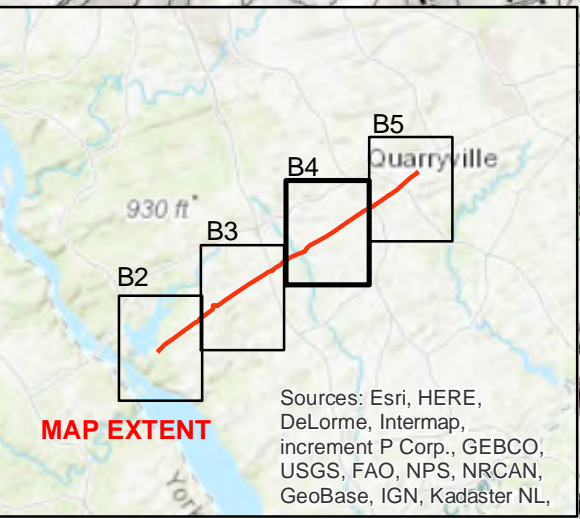
Drawn By:
BWH

Figure Number:
B3



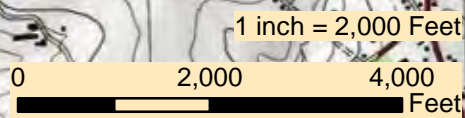
- Mile Post
- Proposed 42" Quarryville Loop
- ▭ Limit Of Disturbance

USGS 7.5 Minute Quadrangles
for Quarryville Loop:
Wakefield, PA; Quarryville, PA



MAP EXTENT

Sources: Esri, HERE, DeLorme, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL,



Copyright © 2013 National Geographic Society, i-cubed

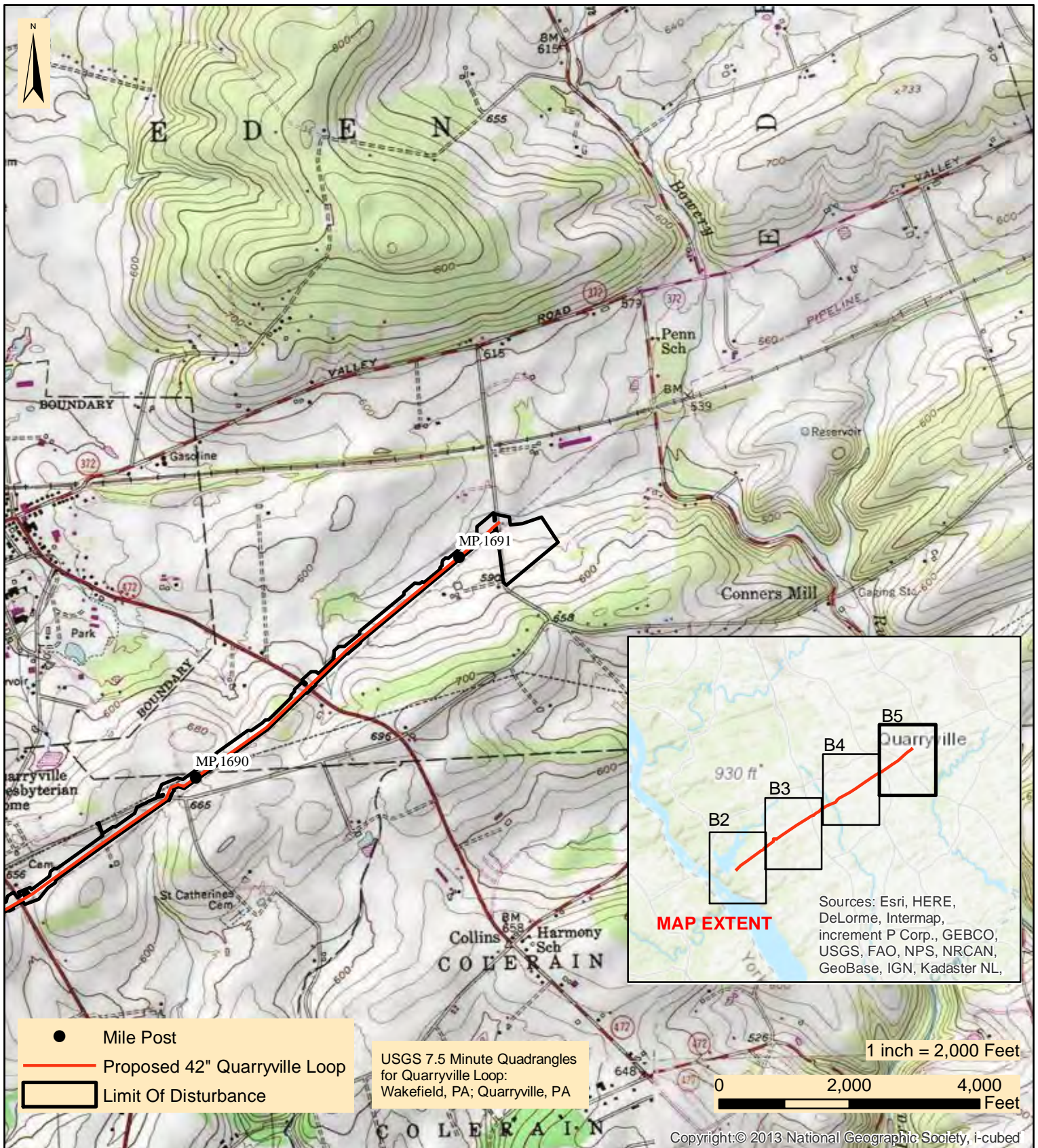


TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC
 NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP
 PROJECT LOCATION MAP

LANCASTER COUNTY

PENNSYLVANIA

Date:	09/25/17
Drawn By:	BWH
Figure Number:	B4



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

LANCASTER COUNTY

PENNSYLVANIA

Date:

09/25/17

Drawn By:

BWH

Figure Number:

B5

**APPENDIX C
SAMPLE COUNTY LAND USE LETTER**

Date: _____

To: Pennsylvania Department of Environmental Protection
 _____ Regional Office or District Mining Office

From: _____ County Planning Agency/Commission

Re: _____ (Name of DEP Permittee)

The County of _____ states that it:

_____ has adopted a county or multi-county comprehensive plan.

If yes, please provide date of adoption:

_____ has not adopted a county or multi-county comprehensive plan.

If applicable:

The above referenced project:

_____ is consistent with the adopted county or multi-county comprehensive plan.

_____ is not consistent with the adopted county or multi-county comprehensive plan.

Additional Comments (attach additional sheets if necessary):

Submitted By:

Name	
Title	
Contact Information (Address & Phone)	
Signature	
Date	

ORIGIN ID: PRIA (609) 512-3500
CLARA TRUEBLOOD
WSP USA INC.
2000 LENOX DRIVE, 3RD FLOOR
LAWRENCEVILLE, NJ 08648
UNITED STATES US

SHIP DATE: 12JUN25
ACTWGT: 1.00 LB
CAD: 252204618|NET4535

BILL SENDER

TO **DRUMORE TOWNSHIP SUPERVISORS**

1675 FURNISS RD

DRUMORE PA 17518

(609) 512-3500 REF: JIMMY SWEENEY/CLARA TRUEBLOOD
INV: US000866
PO: 100

58GJ5/0E74/59F2

DEPT: US0044392.4002



FRI - 13 JUN 12:00P

PRIORITY OVERNIGHT

ASR

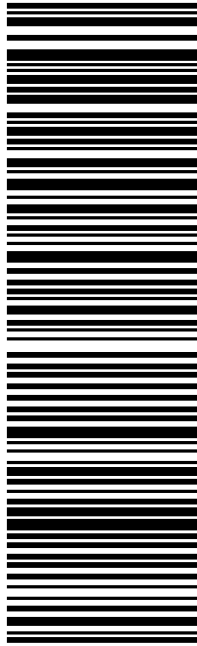
17518

PA-US MDT

TRK# **8819 8556 5423**

020T

EN LNSA



After printing this label:
1. Fold the printed page along the horizontal line.
2. Place label in shipping pouch and affix it to your shipment.

CONSIGNEE COPY - PLEASE PLACE IN FRONT OF POUCH

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.

June 12, 2025

FedEx Tracking 881985762165

East Drumore Township Supervisors
925 Robert Fulton Hwy
Quarryville, PA 17566

Re: Northeast Supply Enhancement Project
Quarryville Loop
Lancaster County
Pennsylvania Acts 14, 67, 68, and 127 Notification

Dear East Drumore Township Supervisors:

In accordance with Section 1905-A of the Commonwealth Administrative Code, as amended by Act 14, written notification of proposed construction activities must be provided to all applicable municipalities and counties at least 30 days prior to the issuance of Pennsylvania Department of Environmental Protection (PADEP) permits; therefore, the purpose of this letter is to inform the Supervisors that WSP, Inc. (WSP) intends to submit a Joint Permit Application for US Army Corps of Engineers Section 404 and a Chapter 105 Water Obstruction and Encroachment Permit (Chapter 105) to the PADEP on behalf of Transcontinental Gas Pipe Line Company, LLC (Transco), a subsidiary of Williams Partners L.P. (Williams) for the above referenced Project..

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. The Chapter 105 application will be submitted in June 2025.

The Quarryville Loop (Project), located in Lancaster County, Pennsylvania, is proposed as part of the overall Northeast Supply Enhancement (NESE) Project, an interstate natural gas pipeline. NESE is proposed 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. Unavoidable impacts to aquatic resources are proposed as part of the Project.

If FERC reissues the Certificate for the Project and Transco obtains the applicable permits and authorizations, Transco anticipates that construction of the Project will begin in the 4th quarter of 2025 and be in-service by the 4th quarter 2026.

Applicant Contact: Joseph Dean
Williams
2800 Post Oak Blvd., Suite 600 – Office 1135
Houston, Texas 77056
(281) 433-8046

Please submit any comments concerning the land use aspects of the Chapter 105 application for portions of the Project located in your township within 30 days from the date of receipt of this letter to the Regional Permit Coordination Office at the following address:

Kevin White, P.E., Director
Regional Permit Coordination Office
Pennsylvania Department of Environmental Protection
400 Market Street
Rachel Carson State Office Building – 10th Floor
Harrisburg, Pennsylvania 17101

Enclosed is the General Information Form (GIF) (Enclosure 1) for the permit application, a Project location map (Enclosure 2), and a Municipal Land Use letter (Enclosure 3) that is to be submitted with the permit application to PADEP.

Please complete the Municipal Land Use Letter (Enclosure 3) and return **within 30 days** of the receipt of this letter to:

Ben Virts
WSP, Inc
277 Bendix Road, Suite 300
Virginia Beach, VA 23452

Please do not send the Municipal Land Use letter to the PADEP. Should you have any questions or concerns regarding this notification, please contact Ben Virts at (585) 410-1203 or via email at Benjamin.Virts@wsp.com.

Sincerely,

Benjamin.Virts@wsp.com
Digitally signed by
Benjamin.Virts@wsp.com
DN: cn=Benjamin.Virts@wsp.com
Date: 2025.06.12 14:42:34 -04'00'

Ben Virts
Senior Project Manager

Enclosures: (1) PADEP GIF Form (unsigned)
(2) Project Location Map
(3) Sample Land Use Letter



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	First Name	MI	Suffix
Additional Individual Last Name	First Name	MI	Suffix
Mailing Address Line 1 2800 Post Oak Blvd, Level 11		Mailing Address Line 2	
Address Last Line – City Houston	State TX	ZIP+4 77056	Country USA
Client Contact Last Name Dean	First Name Joseph	MI	Suffix
Client Contact Title Manager, Permitting	Phone 281-433-8046	Ext	Cell Phone
Email Address Joseph.Dean@williams.com	FAX		

SITE INFORMATION

DEP Site ID#	Site Name Northeast Supply Enhancement Project- Quarryville Loop				
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.					
Tax Parcel ID(s):					
County Name(s) Lancaster	Municipality(ies) Drumore, East Drumore, Eden	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input checked="" type="checkbox"/>	State

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Site Location Line 1

Eastern Terminus: 39.898013, -76.132475

Site Location Line 2

Western Terminus: 39.815498, -76.287820

Site Location Last Line – City

Quarryville

State ZIP+4

PA 17566

Detailed Written Directions to Site

To Western Terminus: 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.

Site Contact Last Name

Olson

First Name

Karen

MI

Suffix

Site Contact Title

Environmental Specialist

Site Contact Firm

Transcontinental Gas Pipe Line Company, LLC

Mailing Address Line 1

2800 Post Oak Blvd. - Level 11

Mailing Address Line 2

Mailing Address Last Line – City

Houston

State ZIP+4

TX 77056

Phone

713-215-4232

Ext

FAX

Email Address

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 type="checkbox"/> Oil & Gas Location	_____
<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)	_____	<input type="checkbox"/> Water Pollution Control Facility	_____
<input type="checkbox"/> Erosion & Sediment Control Facility	_____	<input type="checkbox"/> Water Resource	_____

Explosive Storage Location

Other:

Latitude/Longitude Point of Origin	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	39	51	43	76	11	58
Horizontal Accuracy Measure	Feet	--or--		Meters		
Horizontal Reference Datum Code	<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				
Horizontal Collection Method Code	GISDR					
Reference Point Code	CNTAR					
Altitude	Feet	600	--or--		Meters	
Altitude Datum Name	<input type="checkbox"/>	The National Geodetic Vertical Datum of 1929				
	<input checked="" type="checkbox"/>	The North American Vertical Datum of 1988 (NAVD88)				
Altitude (Vertical) Location Datum Collection Method Code	TOPO					
Geometric Type Code	POINT					
Data Collection Date	12/05/2016					
Source Map Scale Number	1	Inch(es)	=	24,000	Feet	
	--or--	Centimeter(s)	=	Meters		

PROJECT INFORMATION

Project Name			
Northeast Supply Enhancement Project - Quarryville Loop			
Project Description			
Installation and operation of an approximately 10.17 mile long, 42" natural gas pipeline loop in Lancaster County, PA			
Project Consultant Last Name	First Name	MI	Suffix
Virts	Ben	B	
Project Consultant Title	Consulting Firm		
Sr. Environmental Scientist	WSP USA		
Mailing Address Line 1	Mailing Address Line 2		
277 Bendix Rd	Suite 300		
Address Last Line – City	State	ZIP+4	
Virginia Beach	VA	23452	
Phone	Ext	FAX	Email Address
585-410-1203			benjamin.virts@wsp.com
Time Schedules	Project Milestone (Optional)		
October 1, 2025	Start of Construction		

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: Notification Letters

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.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.1	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.2	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.3	Will this coal mining project involve coal preparation/processing activities in which thermal coal dryers or pneumatic coal cleaners will be used?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.5	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.2	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.3	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)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<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				211.68
4.0.2	Will the project discharge or drain to a special protection water (EV or HQ) or an EV wetland?	<input type="checkbox"/>	Yes	<input checked="" 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	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.4	Is your project an interstate transmission natural gas pipeline?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.5	Does your project consist of linear construction activities which result in earth disturbance in two or more DEP regions AND three or more counties?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.6	Does your project utilize Floodplain Restoration as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.7	Does your project utilize Class V Gravity / Injection Wells as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
6.0	Will the project involve discharge of construction related stormwater to a dry swale, surface water, ground water or separate storm water system?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.1	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	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.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	8.0.1 Estimated Proposed Flow (gal/day)				
9.0	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	9.0.1 Was Act 537 sewage facilities planning submitted and approved by DEP? If “Yes” attach the approval letter. Approval required prior to 105/NPDES approval.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.0	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).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	10.0.1 Gallons Per Year (residential septage)	_____			
	10.0.2 Dry Tons Per Year (biosolids)	_____			

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

19.0	<p>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.</p>	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
19.0.1	Type & Amount	Hydrostatic Test Discharge Water from the Muddy Run Reservoir, 2.1 Million gallons			
20.0	<p>Will your project involve the removal of coal, minerals, contaminated media, or solid waste as part of any earth disturbance activities?</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0	<p>Does your project involve installation of a field constructed underground storage tank? If “Yes,” list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<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	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<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	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<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	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
24.0.1	Enter all substances & capacity of each; separate each set with semicolons.				
<p>NOTE: 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 www.dep.pa.gov search term storage tanks</p>					
25.0	<p>Will the intended activity involve the use of a radiation source?</p>	<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 Ben Virts

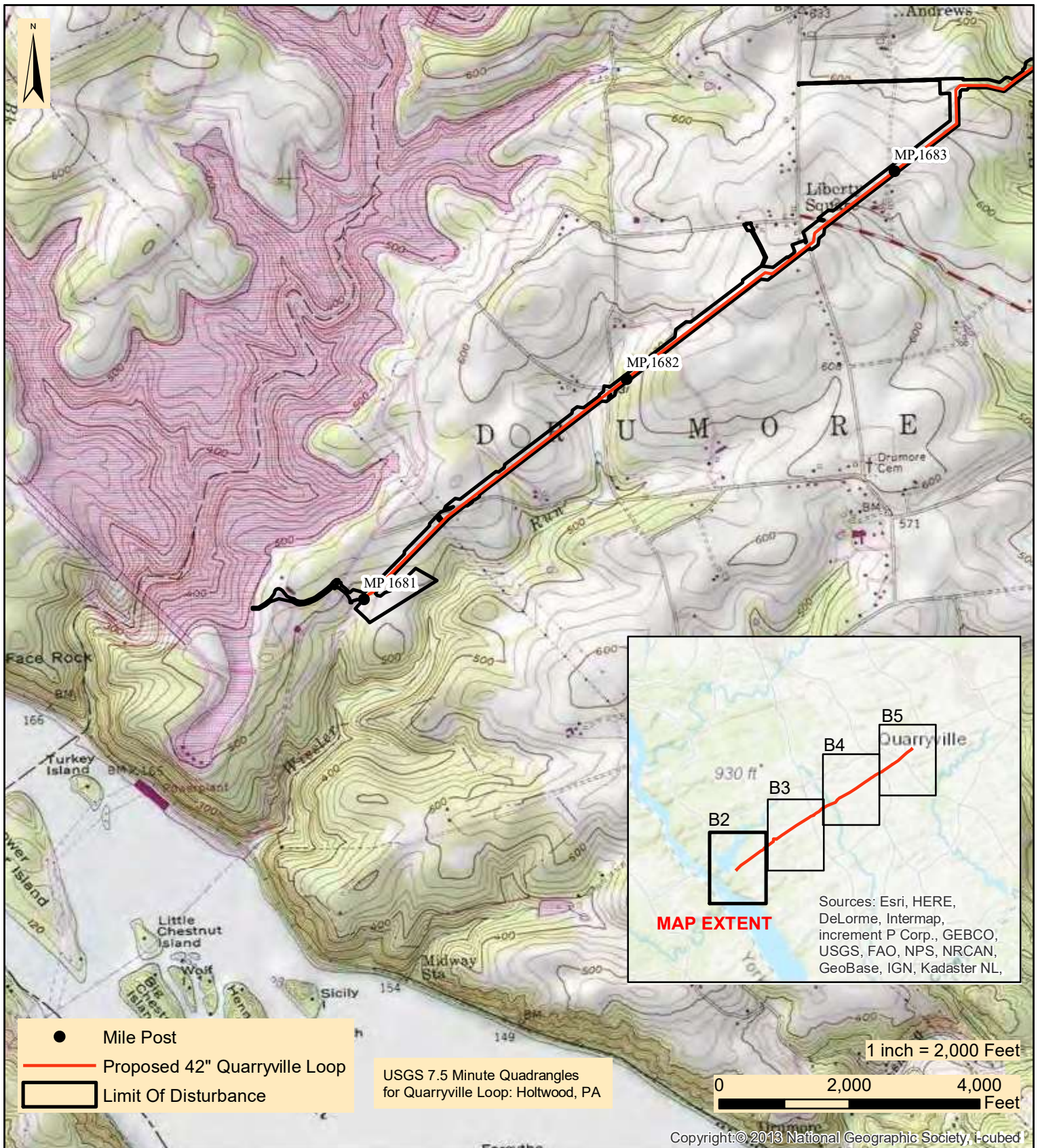
Sr. Environmental Scientist

6/13/25

Signature

Title

Date



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC
 NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

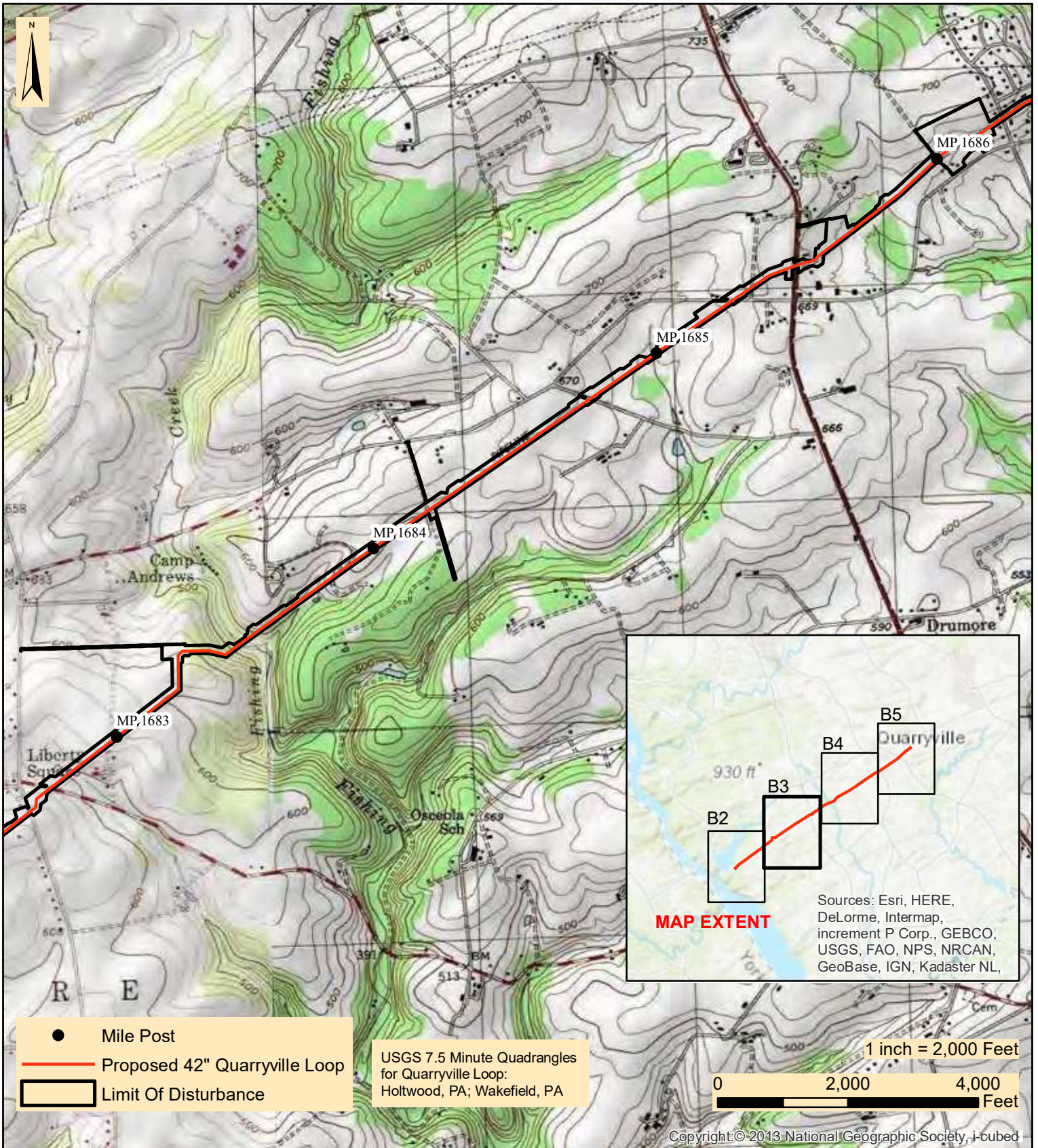
LANCASTER COUNTY

PENNSYLVANIA

Date:
09/25/17

Drawn By:
BWH

Figure Number:
B2



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

LANCASTER COUNTY

PENNSYLVANIA

Date:

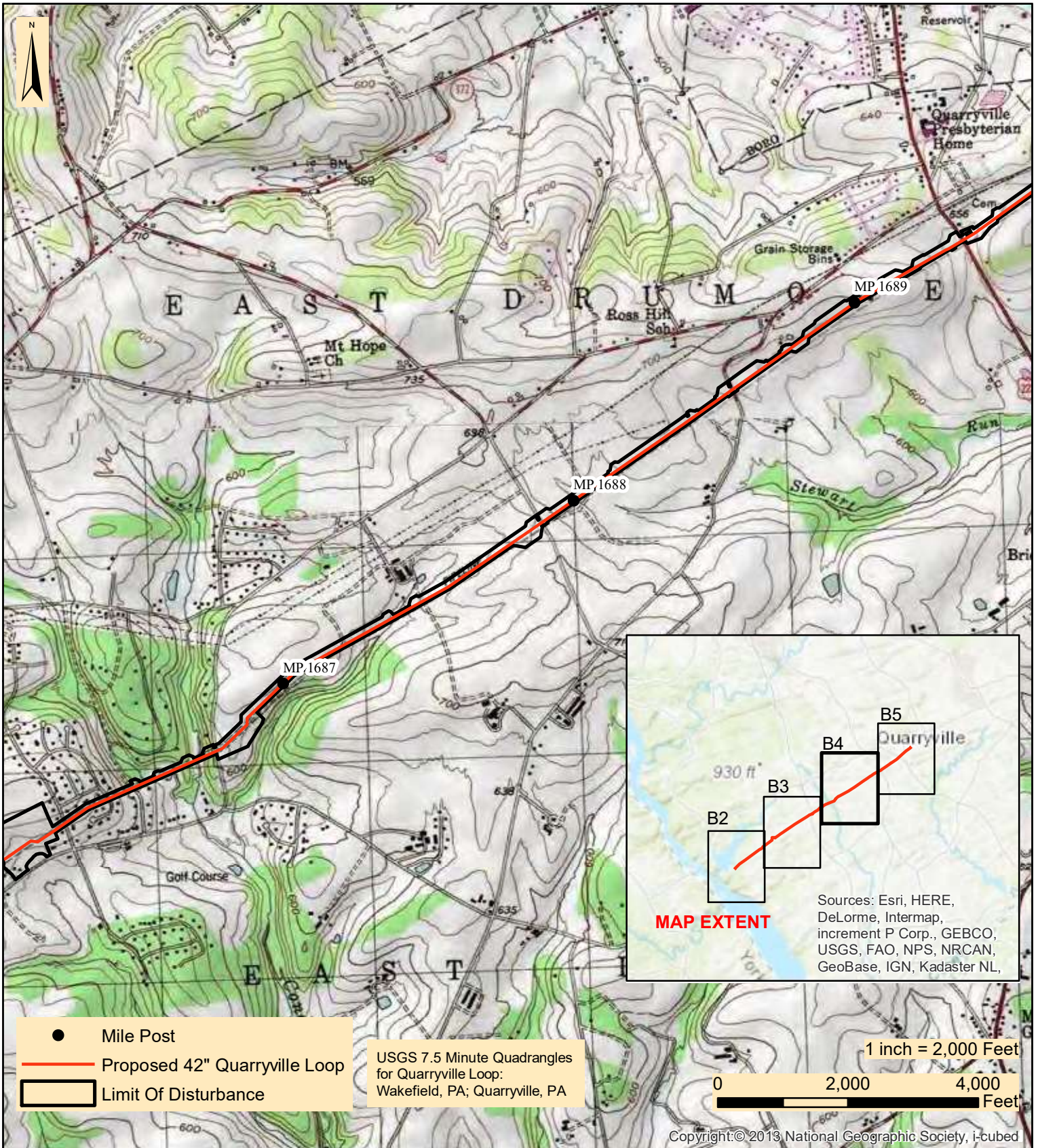
09/25/17

Drawn By:

BWH

Figure Number:

B3



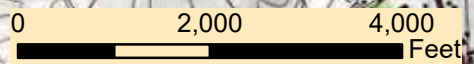
- Mile Post
- Proposed 42" Quarryville Loop
- ▭ Limit Of Disturbance

USGS 7.5 Minute Quadrangles for Quarryville Loop:
Wakefield, PA; Quarryville, PA

MAP EXTENT

Sources: Esri, HERE, DeLorme, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL,

1 inch = 2,000 Feet



Copyright © 2013 National Geographic Society, i-cubed



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

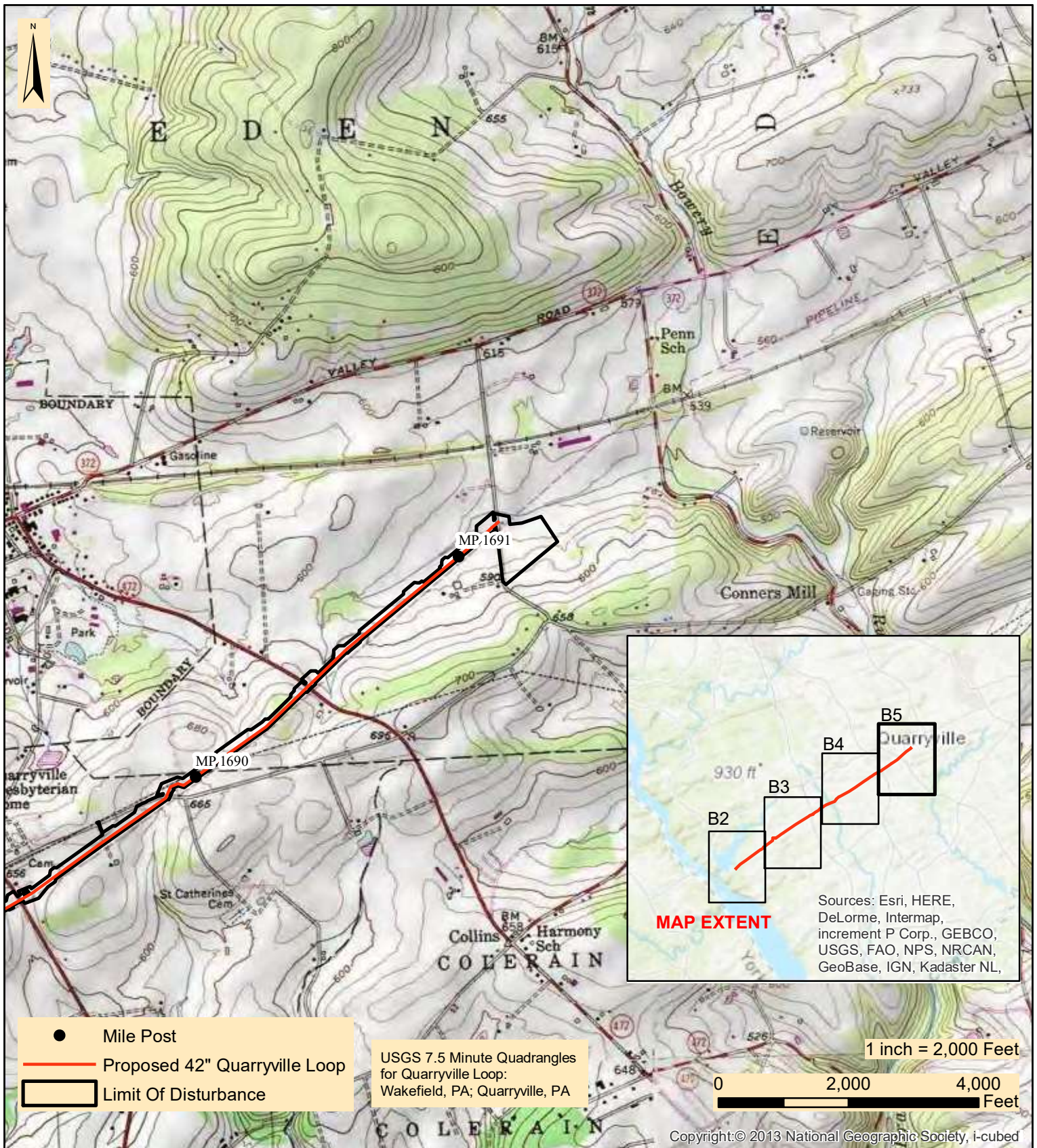
LANCASTER COUNTY

PENNSYLVANIA

Date:
09/25/17

Drawn By:
BWH

Figure Number:
B4



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

LANCASTER COUNTY

PENNSYLVANIA

Date:

09/25/17

Drawn By:

BWH

Figure Number:

B5

**APPENDIX C
SAMPLE COUNTY LAND USE LETTER**

Date: _____

To: Pennsylvania Department of Environmental Protection
 _____ Regional Office or District Mining Office

From: _____ County Planning Agency/Commission

Re: _____ (Name of DEP Permittee)

The County of _____ states that it:

_____ has adopted a county or multi-county comprehensive plan.

If yes, please provide date of adoption:

_____ has not adopted a county or multi-county comprehensive plan.

If applicable:

The above referenced project:

_____ is consistent with the adopted county or multi-county comprehensive plan.

_____ is not consistent with the adopted county or multi-county comprehensive plan.

Additional Comments (attach additional sheets if necessary):

Submitted By:

Name	
Title	
Contact Information (Address & Phone)	
Signature	
Date	

ORIGIN ID: PRIA (609) 512-3500
CLARA TRUEBLOOD
WSP USA INC.
2000 LENOX DRIVE, 3RD FLOOR
LAWRENCEVILLE, NJ 08648
UNITED STATES US

SHIP DATE: 12JUN25
ACTWGT: 1.00 LB
CAD: 252204618|NET4535

BILL SENDER

TO EAST DRUMORE TOWNSHIP SUPERVISORS

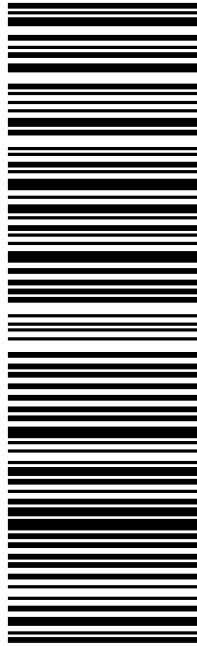
925 ROBER FULTON HWY

QUARRYVILLE PA 17566
REF: JIMMY SWEENEY/CLARA TRUEBLOOD
(609) 512-3500
INV: US000866
PO: 100

DEPT: US0043924002



TRK# 8819 8576 2165
0201
FRI - 13 JUN 12:00P
PRIORITY OVERNIGHT
ASR
17566
EN LNSA
PA-US MDT



After printing this label:
1. Fold the printed page along the horizontal line.
2. Place label in shipping pouch and affix it to your shipment.

CONSIGNEE COPY - PLEASE PLACE IN FRONT OF POUCH

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.



June 13, 2025

Dear Customer,

The following is the proof-of-delivery for tracking number: 881985762165

Delivery Information:

Status:	Delivered	Delivered To:	Shipping/Receiving
Signed for by:	A.Kreixer	Delivery Location:	
Service type:	FedEx Priority Overnight		
Special Handling:	Deliver Weekday; Adult Signature Required		QUARRYVILLE, PA,
		Delivery date:	Jun 13, 2025 10:25

Shipping Information:

Tracking number:	881985762165	Ship Date:	Jun 12, 2025
		Weight:	1.0 LB/0.45 KG
Recipient:		Shipper:	
QUARRYVILLE, PA, US,		Lawrenceville, NJ, US,	

Reference	JIMMY SWEENEY/CLARA TRUEBLOOD
Purchase Order	100
Invoice	US000866
Department Number	US0044392.4002

FedEx Express proof-of-delivery details appear below; however, no signature is currently available for this shipment. Please check again later for a signature.

Thank you for choosing FedEx

June 12, 2025

FedEx Tracking 881986014425

Eden Township Supervisors
489 Story Hill Rd
Quarryville, PA 17566

Re: Northeast Supply Enhancement Project
Quarryville Loop
Lancaster County
Pennsylvania Acts 14, 67, 68, and 127 Notification

Dear Eden Township Supervisors:

In accordance with Section 1905-A of the Commonwealth Administrative Code, as amended by Act 14, written notification of proposed construction activities must be provided to all applicable municipalities and counties at least 30 days prior to the issuance of Pennsylvania Department of Environmental Protection (PADEP) permits; therefore, the purpose of this letter is to inform the Supervisors that WSP, Inc. (WSP) intends to submit a Joint Permit Application for US Army Corps of Engineers Section 404 and a Chapter 105 Water Obstruction and Encroachment Permit (Chapter 105) to the PADEP on behalf of Transcontinental Gas Pipe Line Company, LLC (Transco), a subsidiary of Williams Partners L.P. (Williams) for the above referenced Project..

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. The Chapter 105 application will be submitted in June 2025.

The Quarryville Loop (Project), located in Lancaster County, Pennsylvania, is proposed as part of the overall Northeast Supply Enhancement (NESE) Project, an interstate natural gas pipeline. NESE is proposed 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. Unavoidable impacts to aquatic resources are proposed as part of the Project.

If FERC reissues the Certificate for the Project and Transco obtains the applicable permits and authorizations, Transco anticipates that construction of the Project will begin in the 4th quarter of 2025 and be in-service by the 4th quarter 2026.

Applicant Contact: Joseph Dean
Williams
2800 Post Oak Blvd., Suite 600 – Office 1135
Houston, Texas 77056
(281) 433-8046

Please submit any comments concerning the land use aspects of the Chapter 105 application for portions of the Project located in your township within 30 days from the date of receipt of this letter to the Regional Permit Coordination Office at the following address:

Kevin White, P.E., Director
Regional Permit Coordination Office
Pennsylvania Department of Environmental Protection
400 Market Street
Rachel Carson State Office Building – 10th Floor
Harrisburg, Pennsylvania 17101

Enclosed is the General Information Form (GIF) (Enclosure 1) for the permit application, a Project location map (Enclosure 2), and a Municipal Land Use letter (Enclosure 3) that is to be submitted with the permit application to PADEP.

Please complete the Municipal Land Use Letter (Enclosure 3) and return **within 30 days** of the receipt of this letter to:

Ben Virts
WSP, Inc
277 Bendix Road, Suite 300
Virginia Beach, VA 23452

Please do not send the Municipal Land Use letter to the PADEP. Should you have any questions or concerns regarding this notification, please contact Ben Virts at (585) 410-1203 or via email at Benjamin.Virts@wsp.com.

Sincerely,

Benjamin.Virts@wsp.com  Digitally signed by
Benjamin.Virts@wsp.com
DN: cn=Benjamin.Virts@wsp.com
Date: 2025.06.12 14:43:33 -04'00'

Ben Virts
Senior Project Manager

Enclosures: (1) PADEP GIF Form (unsigned)
(2) Project Location Map
(3) Sample Land Use Letter



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	First Name	MI	Suffix
Additional Individual Last Name	First Name	MI	Suffix
Mailing Address Line 1 2800 Post Oak Blvd, Level 11		Mailing Address Line 2	
Address Last Line – City Houston	State TX	ZIP+4 77056	Country USA
Client Contact Last Name Dean	First Name Joseph	MI	Suffix
Client Contact Title Manager, Permitting	Phone 281-433-8046	Ext	Cell Phone
Email Address Joseph.Dean@williams.com	FAX		

SITE INFORMATION

DEP Site ID#	Site Name Northeast Supply Enhancement Project- Quarryville Loop				
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.					
Tax Parcel ID(s):					
County Name(s) Lancaster	Municipality(ies) Drumore, East Drumore, Eden	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input checked="" type="checkbox"/>	State

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Site Location Line 1

Eastern Terminus: 39.898013, -76.132475

Site Location Line 2

Western Terminus: 39.815498, -76.287820

Site Location Last Line – City

Quarryville

State ZIP+4

PA 17566

Detailed Written Directions to Site

To Western Terminus: 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.

Site Contact Last Name

Olson

First Name

Karen

MI

Suffix

Site Contact Title

Environmental Specialist

Site Contact Firm

Transcontinental Gas Pipe Line Company, LLC

Mailing Address Line 1

2800 Post Oak Blvd. - Level 11

Mailing Address Line 2

Mailing Address Last Line – City

Houston

State ZIP+4

TX 77056

Phone

713-215-4232

Ext

FAX

Email Address

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? Yes No

2. Will this project involve an addition to an existing facility, system, or activity? Yes No

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 type="checkbox"/> Oil & Gas Location	_____
<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)	_____	<input type="checkbox"/> Water Pollution Control Facility	_____
<input type="checkbox"/> Erosion & Sediment Control Facility	_____	<input type="checkbox"/> Water Resource	_____

Explosive Storage Location

Other:

Latitude/Longitude Point of Origin	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	39	51	43	76	11	58
Horizontal Accuracy Measure	Feet	--or--		Meters		
Horizontal Reference Datum Code	<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				
Horizontal Collection Method Code	GISDR					
Reference Point Code	CNTAR					
Altitude	Feet	600	--or--		Meters	
Altitude Datum Name	<input type="checkbox"/>	The National Geodetic Vertical Datum of 1929				
	<input checked="" type="checkbox"/>	The North American Vertical Datum of 1988 (NAVD88)				
Altitude (Vertical) Location Datum Collection Method Code	TOPO					
Geometric Type Code	POINT					
Data Collection Date	12/05/2016					
Source Map Scale Number	1	Inch(es)	=	24,000	Feet	
	--or--	Centimeter(s)	=	Meters		

PROJECT INFORMATION

Project Name

Northeast Supply Enhancement Project - Quarryville Loop

Project Description

Installation and operation of an approximately 10.17 mile long, 42" natural gas pipeline loop in Lancaster County, PA

Project Consultant Last Name	First Name	MI	Suffix
Virts	Ben	B	
Project Consultant Title	Consulting Firm		
Sr. Environmental Scientist	WSP USA		
Mailing Address Line 1	Mailing Address Line 2		
277 Bendix Rd	Suite 300		
Address Last Line – City	State	ZIP+4	
Virginia Beach	VA	23452	
Phone	Ext	FAX	Email Address
585-410-1203			benjamin.virts@wsp.com
Time Schedules	Project Milestone (Optional)		
October 1, 2025	Start of Construction		

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: Notification Letters

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.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.1	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.2	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.3	Will this coal mining project involve coal preparation/processing activities in which thermal coal dryers or pneumatic coal cleaners will be used?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.5	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.2	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.3	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)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<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 211.68				
4.0.2	Will the project discharge or drain to a special protection water (EV or HQ) or an EV wetland?	<input type="checkbox"/>	Yes	<input checked="" 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	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.4	Is your project an interstate transmission natural gas pipeline?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.5	Does your project consist of linear construction activities which result in earth disturbance in two or more DEP regions AND three or more counties?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.6	Does your project utilize Floodplain Restoration as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.7	Does your project utilize Class V Gravity / Injection Wells as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
6.0	Will the project involve discharge of construction related stormwater to a dry swale, surface water, ground water or separate storm water system?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.1	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	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.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	8.0.1 Estimated Proposed Flow (gal/day)				
9.0	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	9.0.1 Was Act 537 sewage facilities planning submitted and approved by DEP? If “Yes” attach the approval letter. Approval required prior to 105/NPDES approval.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.0	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).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	10.0.1 Gallons Per Year (residential septage)	_____			
	10.0.2 Dry Tons Per Year (biosolids)	_____			

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

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 checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
19.0.1	Type & Amount	Hydrostatic Test Discharge Water from the Muddy Run Reservoir, 2.1 Million gallons			
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. Note: 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. Note: 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. Note: 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. Note: 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.				
NOTE: 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 www.dep.pa.gov 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 Ben Virts

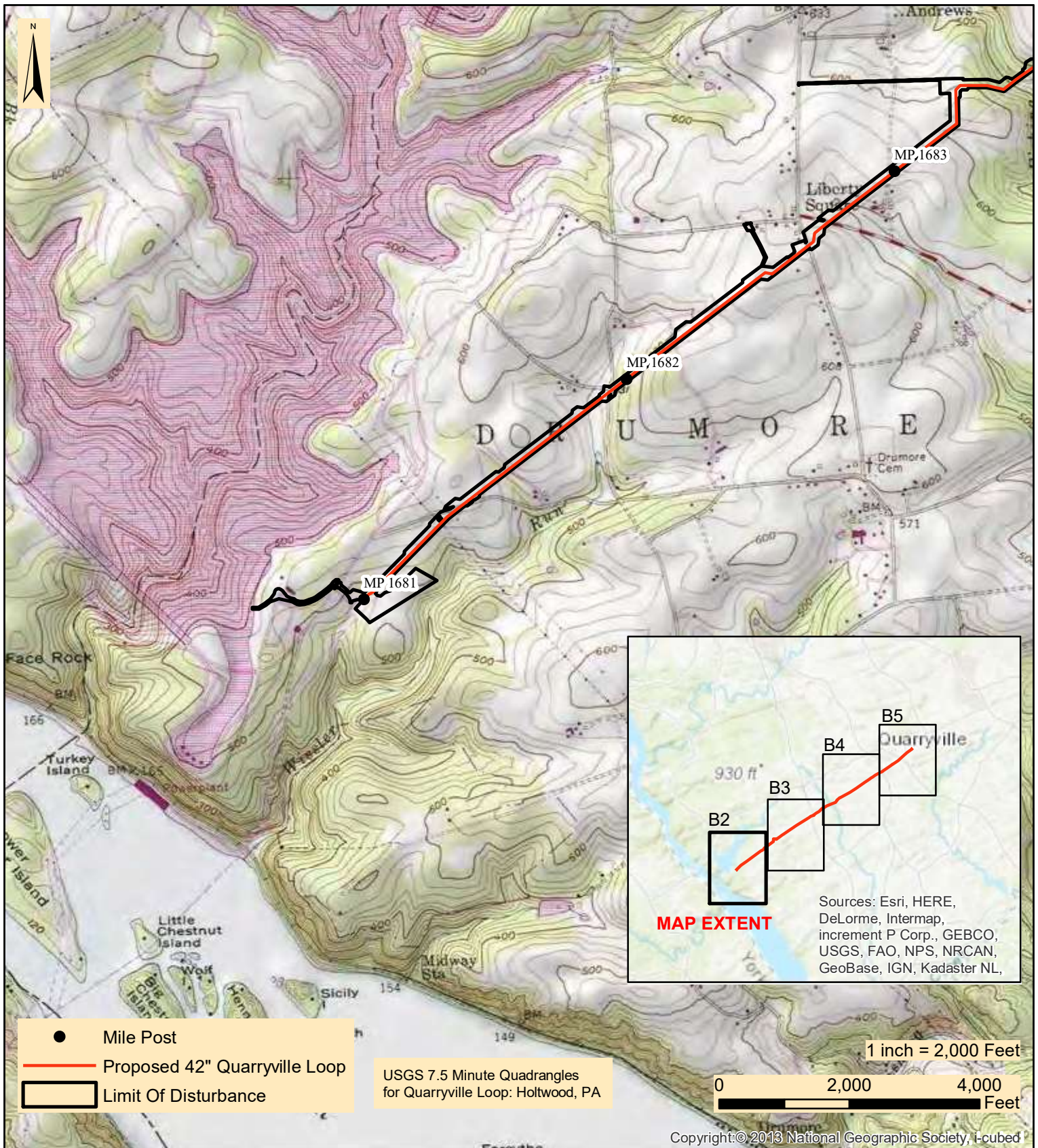
Sr. Environmental Scientist

6/13/25

Signature

Title

Date



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC
 NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

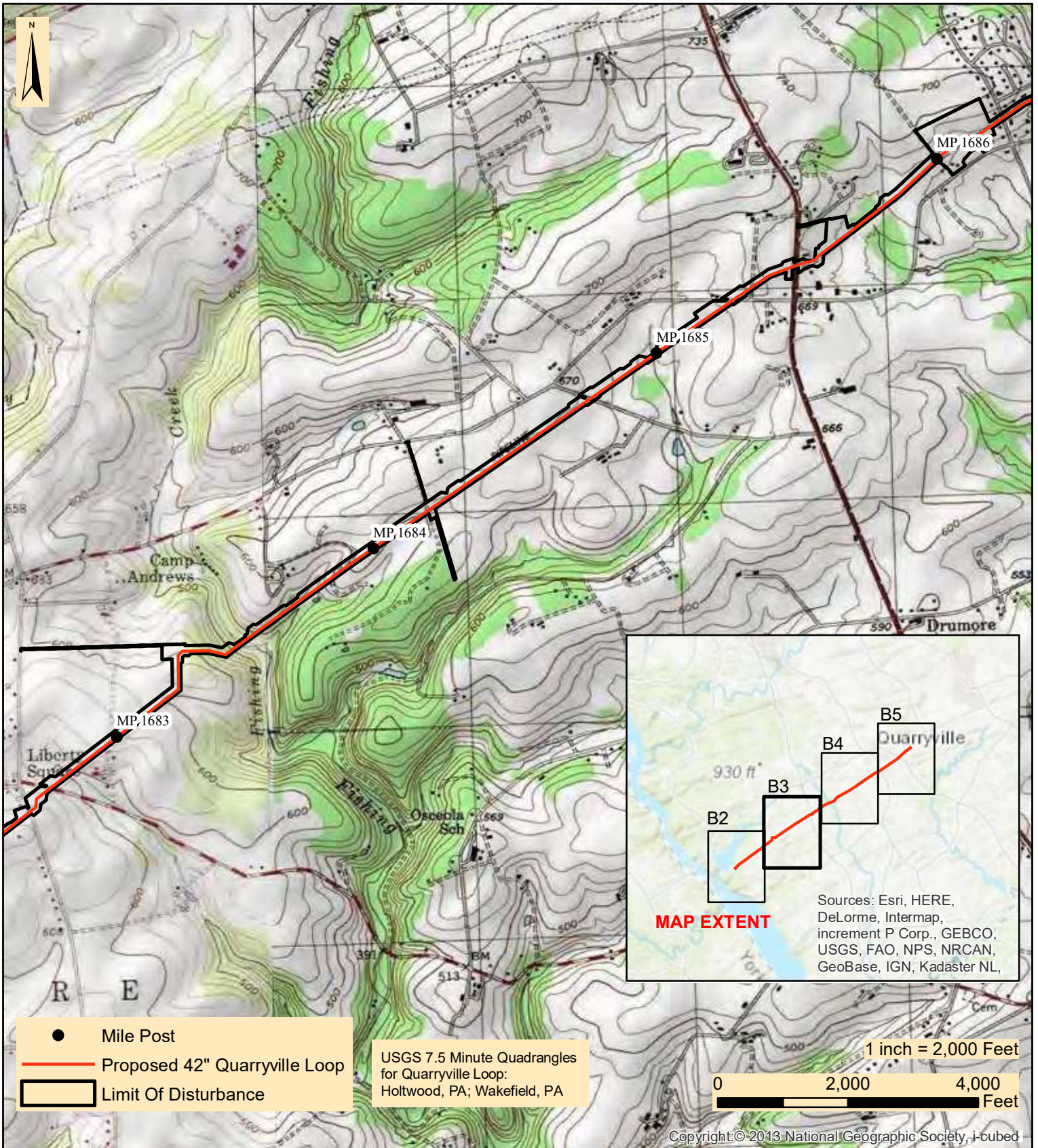
LANCASTER COUNTY

PENNSYLVANIA

Date:
09/25/17

Drawn By:
BWH

Figure Number:
B2



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

LANCASTER COUNTY

PENNSYLVANIA

Date:

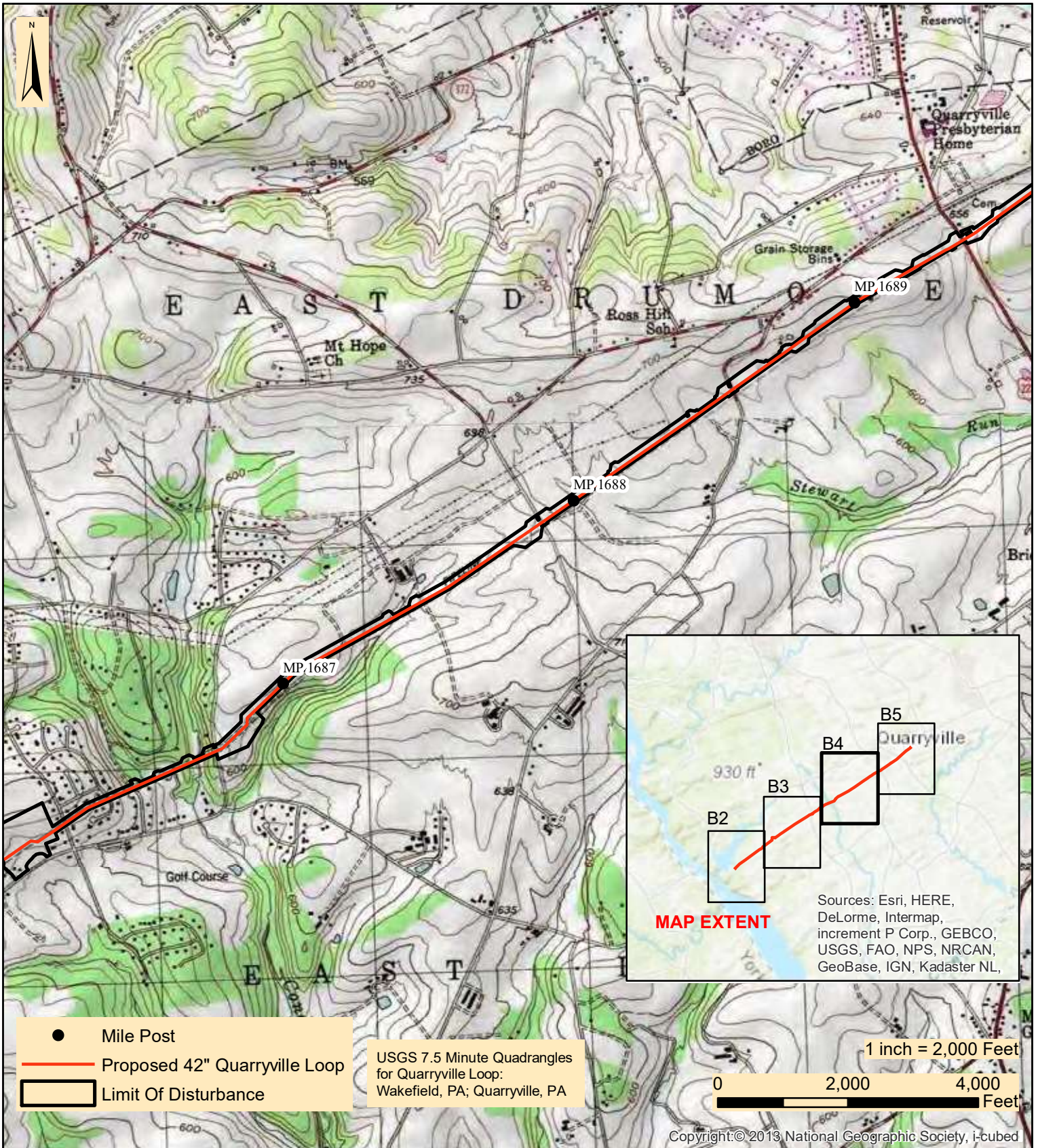
09/25/17

Drawn By:

BWH

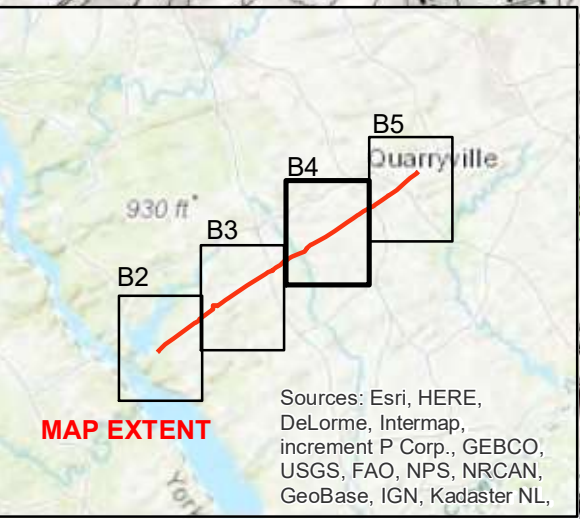
Figure Number:

B3



- Mile Post
- Proposed 42" Quarryville Loop
- ▭ Limit Of Disturbance

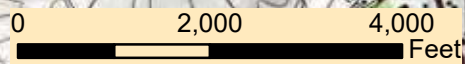
USGS 7.5 Minute Quadrangles
for Quarryville Loop:
Wakefield, PA; Quarryville, PA



MAP EXTENT

Sources: Esri, HERE, DeLorme, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL,

1 inch = 2,000 Feet



Copyright © 2013 National Geographic Society, i-cubed



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

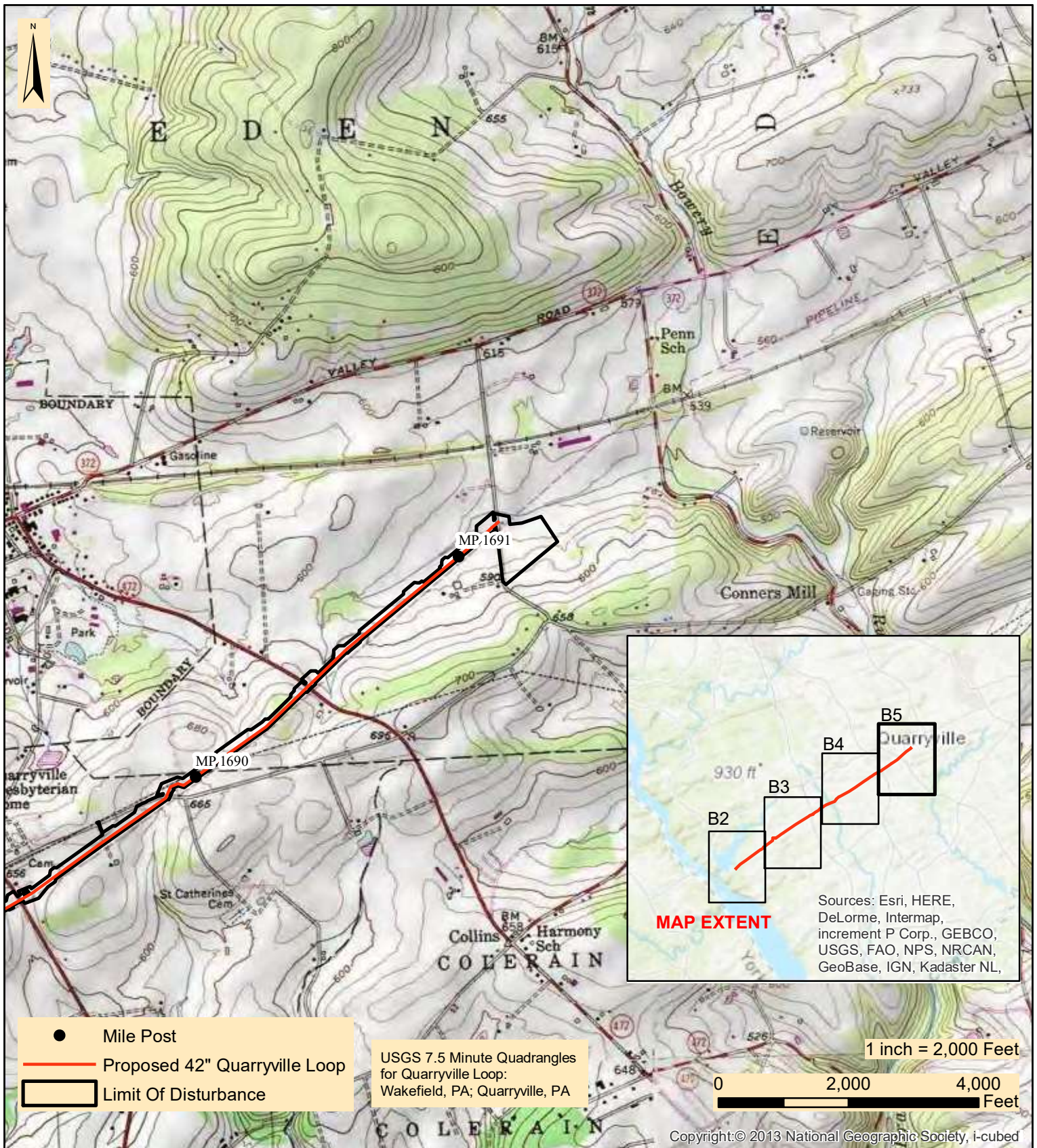
LANCASTER COUNTY

PENNSYLVANIA

Date:
09/25/17

Drawn By:
BWH

Figure Number:
B4



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

LANCASTER COUNTY

PENNSYLVANIA

Date:

09/25/17

Drawn By:

BWH

Figure Number:

B5

**APPENDIX C
SAMPLE COUNTY LAND USE LETTER**

Date: _____

To: Pennsylvania Department of Environmental Protection
 _____ Regional Office or District Mining Office

From: _____ County Planning Agency/Commission

Re: _____ (Name of DEP Permittee)

The County of _____ states that it:

_____ has adopted a county or multi-county comprehensive plan.

If yes, please provide date of adoption:

_____ has not adopted a county or multi-county comprehensive plan.

If applicable:

The above referenced project:

_____ is consistent with the adopted county or multi-county comprehensive plan.

_____ is not consistent with the adopted county or multi-county comprehensive plan.

Additional Comments (attach additional sheets if necessary):

Submitted By:

Name	
Title	
Contact Information (Address & Phone)	
Signature	
Date	

ORIGIN ID: PRIA (609) 512-3500
CLARA TRUEBLOOD
WSP USA INC.
2000 LENOX DRIVE, 3RD FLOOR
LAWRENCEVILLE, NJ 08648
UNITED STATES US

SHIP DATE: 12JUN25
ACTWGT: 1.00 LB
CAD: 2522046181NET4535

BILL SENDER

TO EDEN TOWNSHIP SUPERVISORS

489 STORY HILL RD

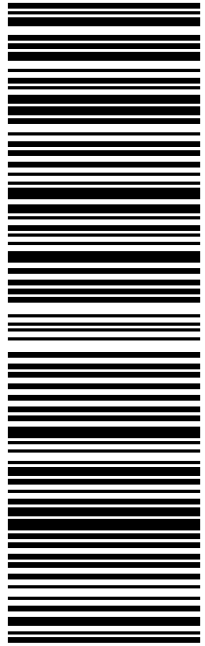
QUARRYVILLE PA 17566

REF: JIMMY SWEENEY/CLARA TRUEBLOOD
(609) 512-3500
INV: US000866
PO: 100

DEPT: US0044392.4002



TRK# 8819 8601 4425
0201
EN LNSA
PA-US MDT
FRI - 13 JUN 12:00P
PRIORITY OVERNIGHT
ASR
17566



After printing this label:
1. Fold the printed page along the horizontal line.
2. Place label in shipping pouch and affix it to your shipment.

CONSIGNEE COPY - PLEASE PLACE IN FRONT OF POUCH

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.

June 12, 2025

FedEx Tracking 881986242486

Lancaster County Supervisors
150 N. Queen St. 7th FL, Suite 715
Lancaster, PA 17603

Re: Northeast Supply Enhancement Project
Quarryville Loop
Lancaster County
Pennsylvania Acts 14, 67, 68, and 127 Notification

Dear Lancaster County Supervisors:

In accordance with Section 1905-A of the Commonwealth Administrative Code, as amended by Act 14, written notification of proposed construction activities must be provided to all applicable municipalities and counties at least 30 days prior to the issuance of Pennsylvania Department of Environmental Protection (PADEP) permits; therefore, the purpose of this letter is to inform the Supervisors that WSP, Inc. (WSP) intends to submit a Joint Permit Application for US Army Corps of Engineers Section 404 and a Chapter 105 Water Obstruction and Encroachment Permit (Chapter 105) to the PADEP on behalf of Transcontinental Gas Pipe Line Company, LLC (Transco), a subsidiary of Williams Partners L.P. (Williams) for the above referenced Project..

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. The Chapter 105 application will be submitted in June 2025.

The Quarryville Loop (Project), located in Lancaster County, Pennsylvania, is proposed as part of the overall Northeast Supply Enhancement (NESE) Project, an interstate natural gas pipeline. NESE is proposed 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. Unavoidable impacts to aquatic resources are proposed as part of the Project.

If FERC reissues the Certificate for the Project and Transco obtains the applicable permits and authorizations, Transco anticipates that construction of the Project will begin in the 4th quarter of 2025 and be in-service by the 4th quarter 2026.

Applicant Contact: Joseph Dean
Williams
2800 Post Oak Blvd., Suite 600 – Office 1135
Houston, Texas 77056
(281) 433-8046

Please submit any comments concerning the land use aspects of the Chapter 105 application for portions of the Project located in your township within 30 days from the date of receipt of this letter to the Regional Permit Coordination Office at the following address:

Kevin White, P.E., Director
Regional Permit Coordination Office
Pennsylvania Department of Environmental Protection
400 Market Street
Rachel Carson State Office Building – 10th Floor
Harrisburg, Pennsylvania 17101

Enclosed is the General Information Form (GIF) (Enclosure 1) for the permit application, a Project location map (Enclosure 2), and a Municipal Land Use letter (Enclosure 3) that is to be submitted with the permit application to PADEP.

Please complete the Municipal Land Use Letter (Enclosure 3) and return **within 30 days** of the receipt of this letter to:

Ben Virts
WSP, Inc
277 Bendix Road, Suite 300
Virginia Beach, VA 23452

Please do not send the Municipal Land Use letter to the PADEP. Should you have any questions or concerns regarding this notification, please contact Ben Virts at (585) 410-1203 or via email at Benjamin.Virts@wsp.com.

Sincerely,

Benjamin.Virts@wsp.com
Digitally signed by
Benjamin.Virts@wsp.com
DN: cn=Benjamin.Virts@wsp.com
Date: 2025.06.12 14:44:07 -04'00'

Ben Virts
Senior Project Manager

Enclosures: (1) PADEP GIF Form (unsigned)
(2) Project Location Map
(3) Sample Land Use Letter



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	First Name	MI	Suffix
Additional Individual Last Name	First Name	MI	Suffix
Mailing Address Line 1 2800 Post Oak Blvd, Level 11		Mailing Address Line 2	
Address Last Line – City Houston	State TX	ZIP+4 77056	Country USA
Client Contact Last Name Dean	First Name Joseph	MI	Suffix
Client Contact Title Manager, Permitting	Phone 281-433-8046	Ext	Cell Phone
Email Address Joseph.Dean@williams.com	FAX		

SITE INFORMATION

DEP Site ID#	Site Name Northeast Supply Enhancement Project- Quarryville Loop				
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.					
Tax Parcel ID(s):					
County Name(s) Lancaster	Municipality(ies) Drumore, East Drumore, Eden	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input checked="" type="checkbox"/>	State

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Site Location Line 1

Eastern Terminus: 39.898013, -76.132475

Site Location Line 2

Western Terminus: 39.815498, -76.287820

Site Location Last Line – City

Quarryville

State ZIP+4

PA 17566

Detailed Written Directions to Site

To Western Terminus: 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.

Site Contact Last Name

Olson

First Name

Karen

MI

Suffix

Site Contact Title

Environmental Specialist

Site Contact Firm

Transcontinental Gas Pipe Line Company, LLC

Mailing Address Line 1

2800 Post Oak Blvd. - Level 11

Mailing Address Line 2

Mailing Address Last Line – City

Houston

State ZIP+4

TX 77056

Phone

713-215-4232

Ext

FAX

Email Address

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 type="checkbox"/> Oil & Gas Location	_____
<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)	_____	<input type="checkbox"/> Water Pollution Control Facility	_____
<input type="checkbox"/> Erosion & Sediment Control Facility	_____	<input type="checkbox"/> Water Resource	_____

Explosive Storage Location

Other:

Latitude/Longitude Point of Origin	Latitude			Longitude		
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
	39	51	43	76	11	58
Horizontal Accuracy Measure	Feet	--or--		Meters		
Horizontal Reference Datum Code	<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				
Horizontal Collection Method Code	GISDR					
Reference Point Code	CNTAR					
Altitude	Feet	600	--or--		Meters	
Altitude Datum Name	<input type="checkbox"/>	The National Geodetic Vertical Datum of 1929				
	<input checked="" type="checkbox"/>	The North American Vertical Datum of 1988 (NAVD88)				
Altitude (Vertical) Location Datum Collection Method Code	TOPO					
Geometric Type Code	POINT					
Data Collection Date	12/05/2016					
Source Map Scale Number	1	Inch(es)	=	24,000	Feet	
	--or--	Centimeter(s)	=	Meters		

PROJECT INFORMATION

Project Name

Northeast Supply Enhancement Project - Quarryville Loop

Project Description

Installation and operation of an approximately 10.17 mile long, 42" natural gas pipeline loop in Lancaster County, PA

Project Consultant Last Name	First Name	MI	Suffix
Virts	Ben	B	
Project Consultant Title	Consulting Firm		
Sr. Environmental Scientist	WSP USA		
Mailing Address Line 1	Mailing Address Line 2		
277 Bendix Rd	Suite 300		
Address Last Line – City	State	ZIP+4	
Virginia Beach	VA	23452	
Phone	Ext	FAX	Email Address
585-410-1203			benjamin.virts@wsp.com
Time Schedules	Project Milestone (Optional)		
October 1, 2025	Start of Construction		

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: Notification Letters

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? Yes No
If zoning approval has been received, attach documentation.

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.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
1.1	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.2	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.3	Will this coal mining project involve coal preparation/processing activities in which thermal coal dryers or pneumatic coal cleaners will be used?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.5	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.2	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?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.3	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)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	<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		211.68		
4.0.2	Will the project discharge or drain to a special protection water (EV or HQ) or an EV wetland?	<input type="checkbox"/>	Yes	<input checked="" 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	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.4	Is your project an interstate transmission natural gas pipeline?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.5	Does your project consist of linear construction activities which result in earth disturbance in two or more DEP regions AND three or more counties?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.6	Does your project utilize Floodplain Restoration as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
5.7	Does your project utilize Class V Gravity / Injection Wells as a best management practice for Post Construction Stormwater Management?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
6.0	Will the project involve discharge of construction related stormwater to a dry swale, surface water, ground water or separate storm water system?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.1	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
8.0	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.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	8.0.1 Estimated Proposed Flow (gal/day)				
9.0	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?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	9.0.1 Was Act 537 sewage facilities planning submitted and approved by DEP? If “Yes” attach the approval letter. Approval required prior to 105/NPDES approval.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.0	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).	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
	10.0.1 Gallons Per Year (residential septage)	_____			
	10.0.2 Dry Tons Per Year (biosolids)	_____			

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

19.0	<p>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.</p>	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No
19.0.1	Type & Amount	Hydrostatic Test Discharge Water from the Muddy Run Reservoir, 2.1 Million gallons			
20.0	<p>Will your project involve the removal of coal, minerals, contaminated media, or solid waste as part of any earth disturbance activities?</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0	<p>Does your project involve installation of a field constructed underground storage tank? If "Yes," list each Substance & its Capacity. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
21.0.1	<p>Enter all substances & capacity of each; separate each set with semicolons.</p>				
22.0	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
22.0.1	<p>Enter all substances & capacity of each; separate each set with semicolons.</p>				
23.0	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
23.0.1	<p>Enter all substances & capacity of each; separate each set with semicolons.</p>				
24.0	<p>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. Note: Applicant may need a Storage Tank Site Specific Installation Permit.</p>	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
24.0.1	<p>Enter all substances & capacity of each; separate each set with semicolons.</p>				
<p>NOTE: 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 www.dep.pa.gov search term storage tanks</p>					
25.0	<p>Will the intended activity involve the use of a radiation source?</p>	<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 Ben Virts

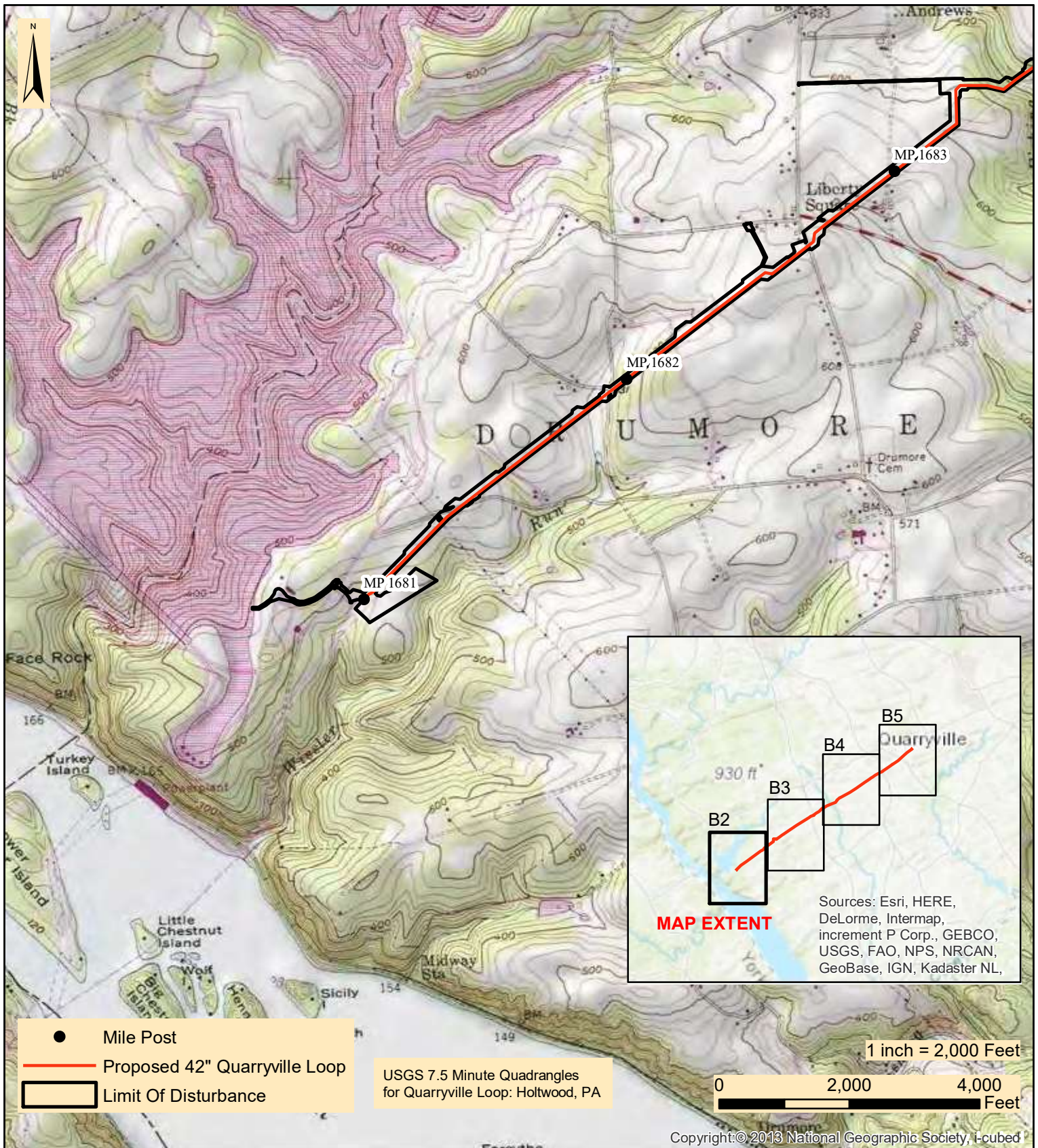
Sr. Environmental Scientist

6/13/25

Signature

Title

Date



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC
 NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

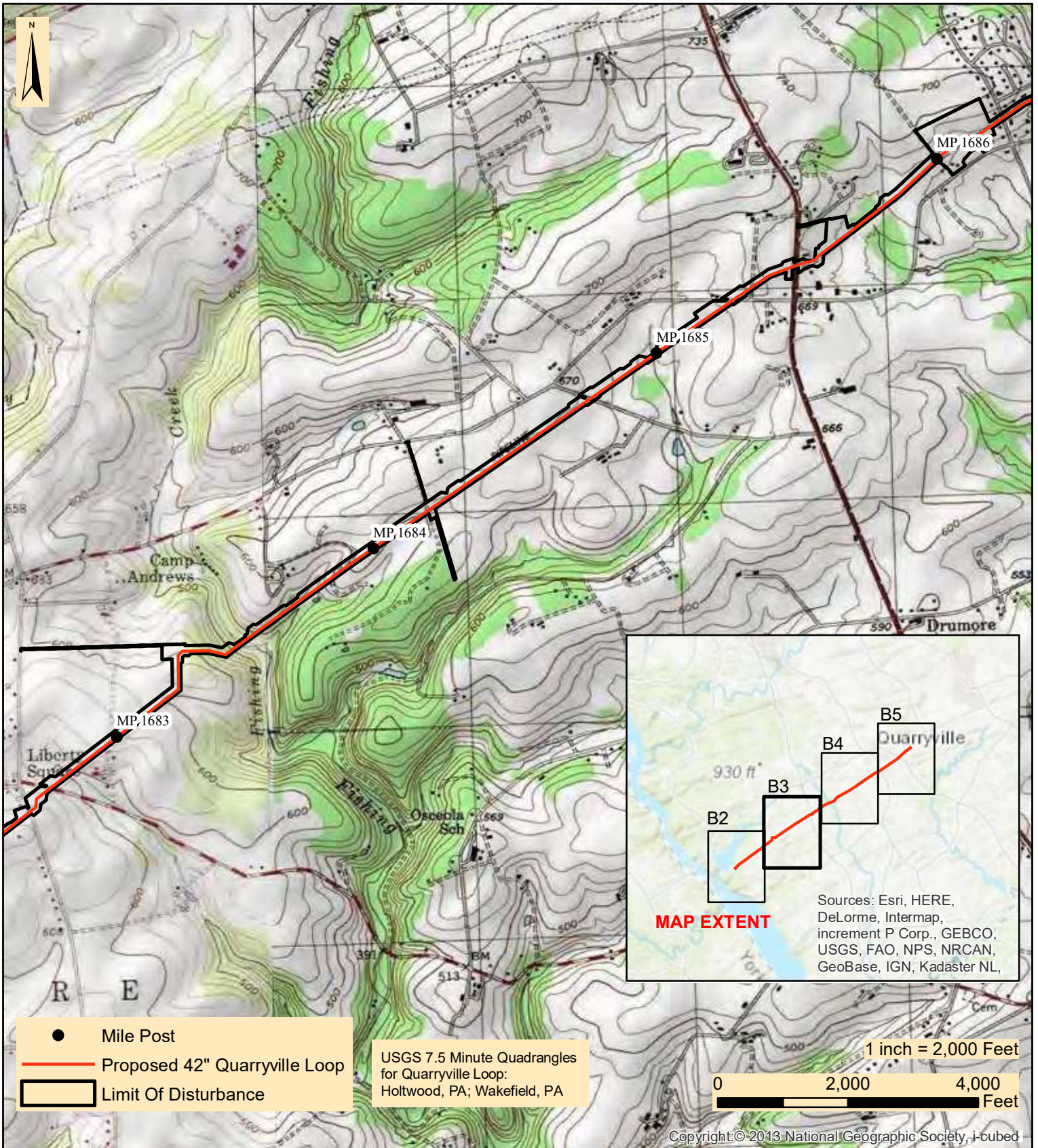
LANCASTER COUNTY

PENNSYLVANIA

Date:
09/25/17

Drawn By:
BWH

Figure Number:
B2



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

LANCASTER COUNTY

PENNSYLVANIA

Date:

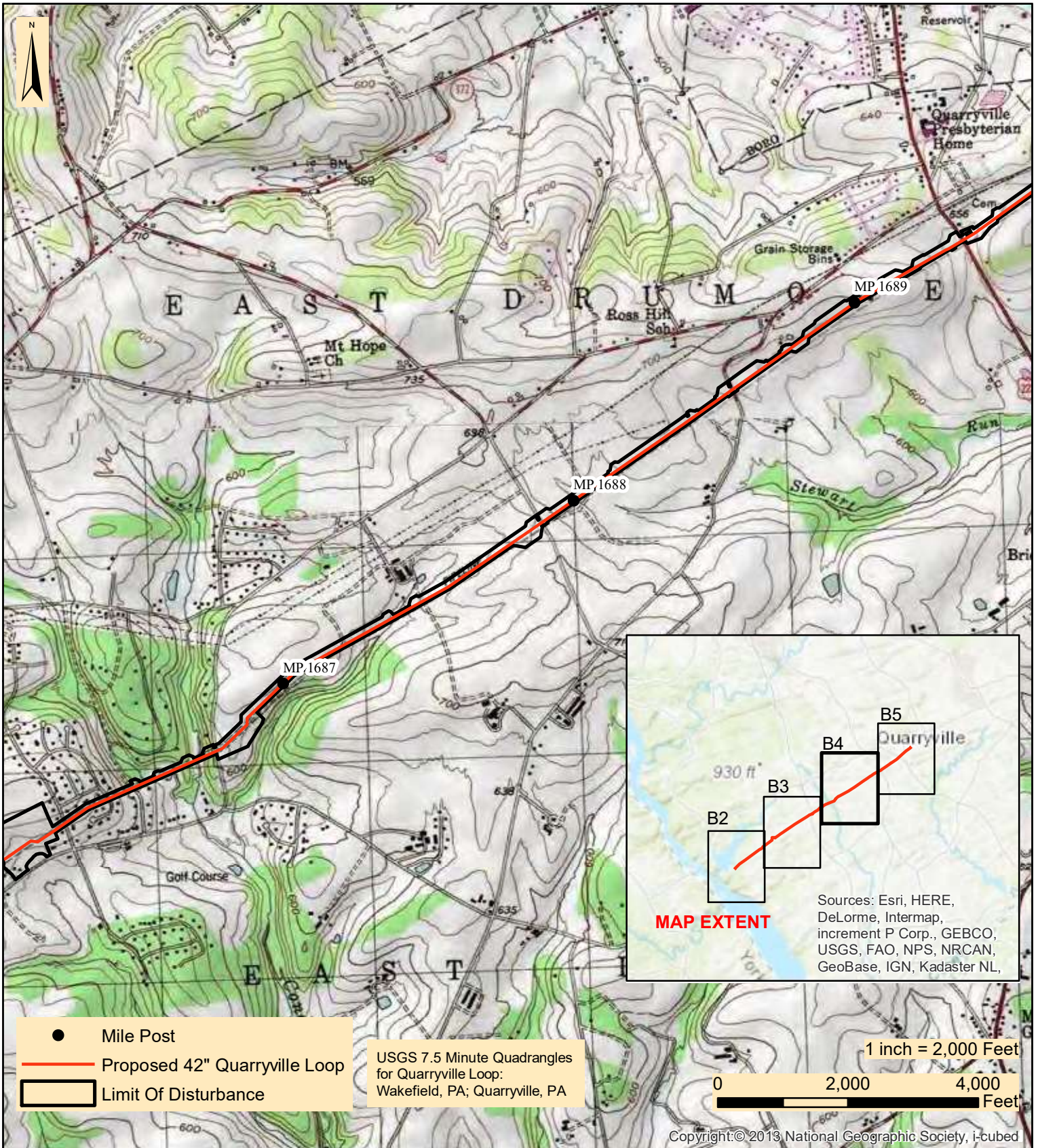
09/25/17

Drawn By:

BWH

Figure Number:

B3



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

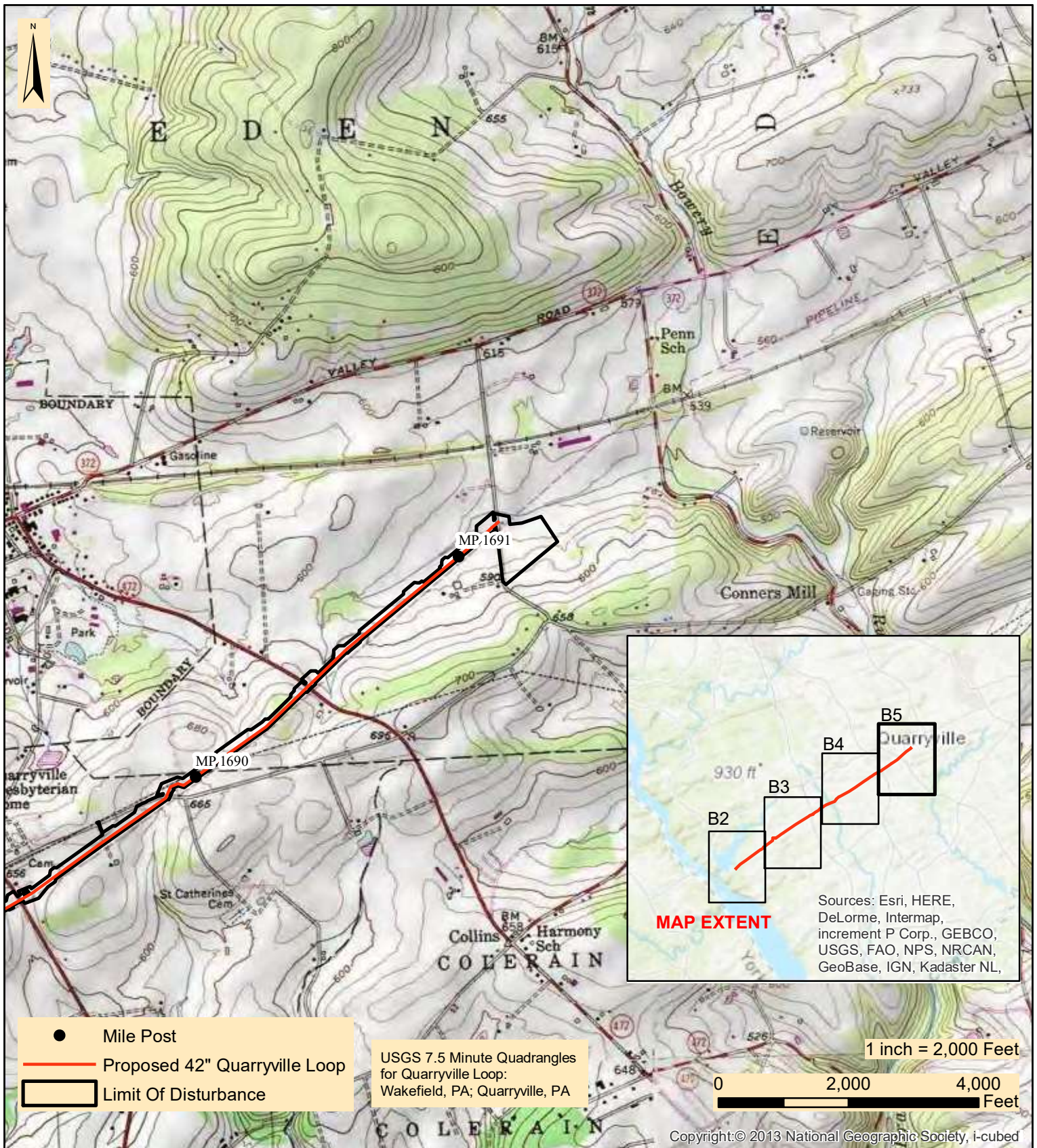
LANCASTER COUNTY

PENNSYLVANIA

Date:
09/25/17

Drawn By:
BWH

Figure Number:
B4



TRANSCONTINENTAL GAS PIPE LINE COMPANY, LLC

NORTHEAST SUPPLY ENHANCEMENT PROJECT - QUARRYVILLE LOOP

PROJECT LOCATION MAP

LANCASTER COUNTY

PENNSYLVANIA

Date:

09/25/17

Drawn By:

BWH

Figure Number:

B5

**APPENDIX C
SAMPLE COUNTY LAND USE LETTER**

Date: _____

To: Pennsylvania Department of Environmental Protection
 _____ Regional Office or District Mining Office

From: _____ County Planning Agency/Commission

Re: _____ (Name of DEP Permittee)

The County of _____ states that it:

_____ has adopted a county or multi-county comprehensive plan.
 If yes, please provide date of adoption:

_____ has not adopted a county or multi-county comprehensive plan.

If applicable:

The above referenced project:

_____ is consistent with the adopted county or multi-county comprehensive plan.
 _____ is not consistent with the adopted county or multi-county comprehensive plan.

Additional Comments (attach additional sheets if necessary):

Submitted By:

Name	
Title	
Contact Information (Address & Phone)	
Signature	
Date	

ORIGIN ID: PRIA (609) 512-3509
CLARA RUEBL OOD
2000 LENOX DRIVE, 3RD FLOOR
LAWRENCEVILLE, NJ 08648
UNITED STATES US

SHIP DATE: 12 JUN 25
ACT WGT: 1.00 LB
CAD: 252204618/NET 4820

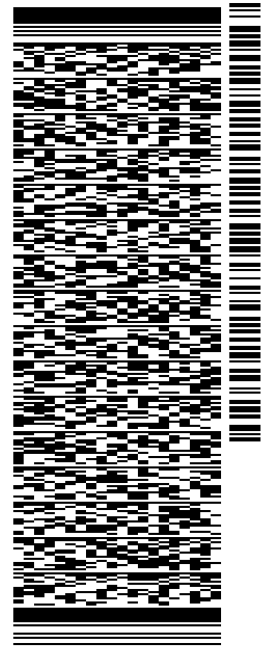
BILL SENDER

TO LANCASTER COUNTY COMMISSIONERS

150 N. QUEEN ST
SEVENTH FLOOR, SUITE 715
LANCASTER PA 17603

(609) 512-3500 REF: JIMMY SWEENEY
INV: US000866 DEPT: US0044392.4002
PO: 100

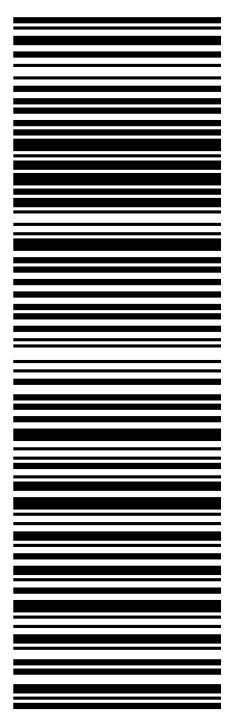
58GJ5J0E7459F2



J252025040801uv

TRK# 8819 8624 2486
0201
FRI - 13 JUN 10:30A
PRIORITY OVERNIGHT

EN LNSA
PA-US 17603
MDT



After printing this label:

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number.

Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on fedex.com. FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.



June 13, 2025

Dear Customer,

The following is the proof-of-delivery for tracking number: 881986242486

Delivery Information:

Status:	Delivered	Delivered To:	Shipping/Receiving
Signed for by:	C.Cody	Delivery Location:	
Service type:	FedEx Priority Overnight		
Special Handling:	Deliver Weekday		LANCASTER, PA,
		Delivery date:	Jun 13, 2025 09:59

Shipping Information:

Tracking number:	881986242486	Ship Date:	Jun 12, 2025
		Weight:	0.5 LB/0.23 KG
Recipient:		Shipper:	
LANCASTER, PA, US,		Lawrenceville, NJ, US,	

Reference	JIMMY SWEENEY
Purchase Order	100
Invoice	US000866
Department Number	US0044392.4002

FedEx Express proof-of-delivery details appear below; however, no signature is currently available for this shipment. Please check again later for a signature.

Thank you for choosing FedEx