



COMMONWEALTH OF PENNSYLVANIA
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 BUREAU OF WATER QUALITY PROTECTION

OFFICIAL USE ONLY
 PA _____

**INDIVIDUAL NPDES PERMIT APPLICATION FOR
 AQUACULTURE PRODUCTION OPERATIONS**

SECTION A. APPLICANT IDENTIFIER

FACILITY OWNER: NAME: _____ MAILING ADDRESS: _____ CITY, ST, ZIP _____ TELEPHONE NO.: _____ FAX: _____	OPERATOR (If different from owner): NAME _____ MAILING ADDRESS: _____ CITY, ST, ZIP _____ TELEPHONE NO.: _____ FAX: _____
LOCATION OF AQUACULTURE PRODUCTION OPERATIONS: Municipality: _____ County: _____ Latitude: _____ Longitude: _____ NAME OF WATERSHED _____	

SECTION B. DESCRIPTION OF PROPOSED OR EXISTING OPERATIONS: Provide complete information

New Facility
 Existing Facility
 Expansion of Existing Operation

1. List all aquatic animals on site

Aquatic Species	Weight by Species Type
_____	_____
_____	_____
_____	_____
_____	_____
	Total Weight _____

2. Is the facility located in a High Quality or Exceptional Value watershed? Yes No

If facility is located in a High Quality or Exceptional Value watershed, the General Permit may still be used.

3. Number of days discharge will occur or is expected to occur in a year. _____ days

4. Amount of food to be fed during any calendar month of maximum production. _____ pounds

SECTION C. OTHER APPLICABLE REQUIREMENTS

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Has a Preparedness, Prevention and Contingency (PPC) Plan been prepared?
<input type="checkbox"/>	<input type="checkbox"/>	Has a Pennsylvania Registered Professional Engineers Report or Certification for construction of facilities been prepared?

DESCRIPTION OF LEAKS OR SPILLS: Summarize any significant leaks or spills of chemicals or pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released. In addition, describe the steps taken to avoid such leaks or spill in the future. Use separate sheets as necessary.

SECTION F. FACILITY IMPROVEMENTS/EXPANSIONS:

Summarize any facility improvements or expansions currently underway, and/or planned, and give an estimated schedule of completion. Use separate sheets as necessary

SECTION G. COMPLIANCE HISTORY REVIEW

Does the facility operator have or require additional environmental permits from the Department? If yes, list each permit and the compliance status of the permitted facility or operation. By checking "no" in this block, the applicant certifies that no other environmental permits are required from the Department. Use additional sheets to provide similar information on each permit/approval or authorization from the Department.

	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>

Permit Program: _____
 Permit Number: _____
 Brief Description: _____
 Compliance Status: _____

If the operator is not in compliance with any requirement of a DEP regulation or DEP permit, provide a narrative description of how the operator will achieve compliance with the permit requirement including the schedule for achieving compliance with appropriate milestones.

SECTION I. CERTIFICATION AND SIGNATURE OF APPLICANT

1. Applicant Certification for NPDES

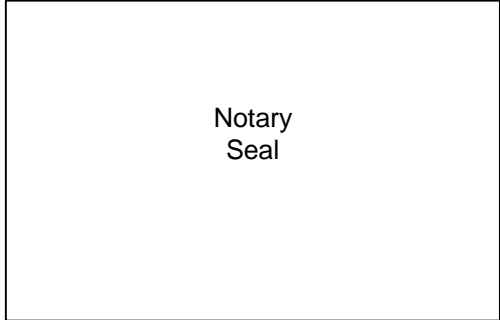
I certify under penalty of law that this application and all related attachments were prepared by me or under my direction or supervision by qualified personnel to properly gather and evaluate the information submitted. Based on my own knowledge and on inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment or both for known violations.

Print Name and Title of Person Signing

(_____)
Telephone Number of Person Signing

Signature of Applicant

Date of Application Signed



Please note below the name, address and telephone number of the individual that should be contacted in the event additional information is required.

Name: _____

Address: _____

Telephone: (_____) _____ FAX: (_____) _____

SECTION I. CERTIFICATION AND SIGNATURE OF THE APPLICANT

2. Applicant Certification for other Permits/Approval (Complete this Only if it is Applicable)

If a proprietorship, the proprietor must sign. For a partnership, the general partner must sign.. For a Corporation, the president, vice president or other responsible official is required to sign. For a Political Subdivision, signatures of a chief officer or other responsible official empowered to sign is required with the seal affixed and attested by the clerk. For Commonwealth departments, boards, commissions, receivers, trustees and authorities, a department head, bureau director, executive director, chairman, commissioner or other responsible official is required to sign. Signatures other than above must be accompanied by a power of attorney or other notarized legal documentation indicating authorization to sign on behalf of the applicant.

Application is hereby made for a permit to authorize the activities described herein. I certify I am familiar with the information contained in this application, and to the best of my knowledge and belief, such information is true, complete and accurate. I further certify I possess the authority to undertake the proposed activities.

I grant permission to the agencies responsible for authorization of this work, or their duly authorized representative, to enter the project site for inspection purposes during working hours. I will abide by all conditions of the permits and licenses if issued and will not begin work without the appropriate authorization.

BY: _____
(PRINT NAME)

(SIGNATURE) (DATE)

SEAL

(TITLE)

WITNESS: _____



COMMONWEALTH OF PENNSYLVANIA
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 WATER MANAGEMENT PROGRAM

**INDIVIDUAL NPDES PERMIT APPLICATION FOR
 AQUACULTURE PRODUCTION OPERATIONS
 CHECKLIST**

APPLICANT'S ✓ CHECKLIST

Please check the following list to make sure that you have included all the required information. Place a checkmark in the column provided for all items completed and/or provided.

Failure to provide all of the requested information will delay the processing of the application and may result in the application being placed **ON HOLD** with **NO ACTION**, or will be considered withdrawn and the application file closed.

	Item	Check ✓ If Included
	Submit three copies of all accompanying materials and documentation	<input type="checkbox"/>
1.	Completed General Information Form (GIF) (0130-PM-DPC0001)	<input type="checkbox"/>
2.	Completed Notice of Intent for Coverage Under General NPDES Permit (Notice of Intent must be properly signed and notarized)	<input type="checkbox"/>
3.	Additional information (list) _____	<input type="checkbox"/>
4.	Application Fee.	<input type="checkbox"/>
5.	Engineer's Report (if construction of new facility).	<input type="checkbox"/>
6.	PPC plan has been completed and kept on site.	<input type="checkbox"/>
7.	Proof municipal/county notifications for Act 14 compliance.	

MODULE A

APPLICATION FOR AN INDIVIDUAL NPDES PERMIT FOR DISCHARGES OF STORMWATER ASSOCIATED WITH CONSTRUCTION ACTIVITIES

Before completing this form, read the step-by-step instructions provided in this application for an Individual NPDES Permit for Discharges of Stormwater Associated with Construction Activities.

SECTION A - APPLICANT IDENTIFIER - <input type="checkbox"/> Department General Information Form (GIF) Attached					
Applicant Name		<i>APPLICANT STATUS:</i> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner/Operator <input type="checkbox"/>			
Applicant Name		<i>APPLICANT STATUS:</i> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner/Operator <input type="checkbox"/>			
Site Name					
SECTION B - PROJECT INFORMATION					
1. Latitude: _____ / _____ / _____		Longitude: _____ / _____ / _____			
2. U.S.G.S. Quad Map Name:					
3. Total Project Acres: _____			Total Disturbed Acres: _____		
4. Existing and Previous Uses of the Land Proposed for Construction (use separate sheet if necessary):					
5. Quantitative Data (Submit all existing data, use separate sheet if necessary):					
Pollutant	Concentration w/Units	Source	Sample Type	Date(s) / Number of Samples	
(1)					
(2)					
6. Estimated Timetable for Major Construction Activities:					
Phase No. or Name	Description	Total Acres	Disturbed Acres	Start Date	End Date

SECTION B – PROJECT INFORMATION (continued)

7. Runoff coefficient after construction is completed: Increase in Impervious Area (%):

8. Description of any Fill Materials:

9. Summary of BMPs and Control Measures:

SECTION C - PROJECT DISCHARGE

1. Stormwater Discharges to:

Waters of the Commonwealth Municipal Separate Storm Sewer Private Storm Sewer

Receiving Water/Watershed Name

Name of Municipal Storm Sewer Operator:

Name of Private Storm Sewer Operator:

Chapter 93 Receiving Water Classification:

Secondary Water:

Other:

SECTION D - OTHER POLLUTANTS; PREPAREDNESS PREVENTION AND CONTINGENCY PLANS

1. Will you use and/or store chemicals, solvents, other hazardous waste or materials with the potential to cause accidental pollution during earthmoving or other construction activities:

Yes No **(If yes, a PPC Plan is required in accordance with 25 Pa. Code §91.34)****SECTION E - EROSION AND SEDIMENT (E&S) CONTROL PLAN PREPARER**

1. Preparation of E&S Control Plan(s)

Name of Preparer:

Qualification:

Title:

Affiliation:

Address:

Telephone No.

Checklist



**EROSION AND SEDIMENT POLLUTION CONTROL PROGRAM
INDIVIDUAL NPDES PERMIT FOR DISCHARGES OF STORMWATER
ASSOCIATED WITH CONSTRUCTION ACTIVITIES
CHECKLIST**

Please check the following list to make sure that you have included all the required information. Place a check mark in the column provided for all items completed and/or provided.

Failure to provide all of the requested information will delay the processing of the application and may result in the application being placed **ON HOLD** with **NO ACTION**, or being considered withdrawn and the application file closed.

ENCLOSE THIS CHECKLIST WITH YOUR APPLICATION FORM.

INDIVIDUAL NPDES STORMWATER PERMIT (CONSTRUCTION ACTIVITIES)

	Requirement	Check <input type="checkbox"/> If Included
1.	Fully completed, properly signed and notarized Individual Permit Application (3 copies, including one Permit Application - General Information Form)	<input type="checkbox"/>
2.	Complete Erosion and Sediment Control Plans (3 copies).	<input type="checkbox"/>
	Location: Drawings (D), Narrative (N).	
	a. Topographic features Location: _____ Page: _____	<input type="checkbox"/>
	b. Soils information Location: _____ Page: _____	<input type="checkbox"/>
	c. Proposed alteration Location: _____ Page: _____	<input type="checkbox"/>
	d. Amount of runoff Location: _____ Page: _____	<input type="checkbox"/>
	e. Staging of earthmoving activities Location: _____ Page: _____	<input type="checkbox"/>
	f. Temporary control measures/ facilities Location: _____ Page: _____	<input type="checkbox"/>
	g. Permanent control measures/facilities Location: _____ Page: _____	<input type="checkbox"/>
	h. Maintenance Location: _____ Page: _____	<input type="checkbox"/>
3.	Location Map: USGS of scale 1:24,000 indicating project location and boundaries (3 copies).	<input type="checkbox"/>
4.	Complete Act 14 notifications to the local municipality and county governments that specify that application is for an NPDES stormwater discharge permit authorizing construction activities.	<input type="checkbox"/>
5.	Proof of receipt of Act 14 notifications; copies of certified mail receipts or acknowledgment letters from the local municipality and county government.	<input type="checkbox"/>
6.	Copy of Cultural Resources Notice (0120-PM-PY0003) including PHMC reply or certified mail receipt.	<input type="checkbox"/>
7.	PNDI Supplement #1, (3630-FM-WQ0037)	<input type="checkbox"/>



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
CULTURAL RESOURCE NOTICE

Before completing this form, read the step-by-step instructions provided with this form

SECTION A. APPLICANT IDENTIFIER

Applicant Name _____

_____ Street Address _____ Telephone Number _____

_____ City _____ State _____ Zip _____

Project Title _____

SECTION B. LOCATION OF PROJECT

Municipality _____	County Name _____ DEP County Code _____
--------------------	--

SECTION C. PERMITS OR APPROVALS

Name of Specific DEP Permit or Approval Requested: _____

Anticipated federal permits:

Surface Mining _____

Army Corps of Engineers _____

401 Water Quality Certification _____

404 Water Quality Permit _____

Federal Energy Regulatory Commission _____

SECTION D. FUNDING SOURCES

Local: _____ %

State: _____ %

Federal: _____ %

Other: _____ %

SECTION E. RESPONSIBLE DEP REGIONAL, CENTRAL, DISTRICT MINING or OIL AND GAS MANAGEMENT OFFICE

DEP Regional Office Responsible for Review of Permit Application <input type="checkbox"/> Southeast Regional Office (Conshohocken) <input type="checkbox"/> Southcentral Regional Office (Harrisburg) <input type="checkbox"/> Southwest Regional Office (Pittsburgh) <input type="checkbox"/> District Mining Office: _____	<input type="checkbox"/> Central Office (Harrisburg) <input type="checkbox"/> Northeast Regional Office (Wilkes-Barre) <input type="checkbox"/> Northcentral Regional Office (Williamsport) <input type="checkbox"/> Northwest Regional Office (Meadville) <input type="checkbox"/> Oil and Gas Office: _____
--	---

SECTION F. RESPONSIBLE COUNTY CONSERVATION DISTRICT, if applicable.

_____ County Conservation District _____ Telephone Number, if known _____

SECTION G. CONSULTANT

Consultant, if applicable

Street Address

City, State, Zip

Telephone Number

SECTION H. PROJECT BOUNDARIES AND DESCRIPTION

REQUIRED

Indicate the total acres in the property under review. Of this acreage, indicate the total acres of earth disturbance for the proposed activity

Attach a 7.5' U.S.G.S. Map indicating the defined boundary of the proposed activity.

Attach photographs of any building any 50 years old. Indicate what is to be done to all buildings in the project area.

Attach a narrative description of the proposed activity.

Attach the return receipt of delivery of this notice to the Pennsylvania Historical and Museum Commission.

REQUESTED

Attach photographs of any building over 40 years old

Attach site map, if available.

SECTION I. SIGNATURE BLOCK

Date of Submission of Notice to PHMC

Applicant's Signature



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION

CULTURAL RESOURCE NOTICE

APPLICANT'S ✓ CHECKLIST

Please check the following list to make sure that you have included all the required information. Place a checkmark in the column provided for all items completed and/or provided.

Failure to provide all of the requested information will delay the processing of the application and may result in the application being placed on hold with no action, or will be considered withdrawn and the application filed closed.

	Requirement	Check ✓ If Included
1.	Attachments, where appropriate, are included.)	<input type="checkbox"/>
	a) Section B - Additional municipality information.	<input type="checkbox"/>
	b) Section B - Additional county information.	<input type="checkbox"/>
	c) Section G - 7.5' USGS Map (with defined boundaries of proposed activity).	<input type="checkbox"/>
	d) Section G - Narrative description of proposed activity.	<input type="checkbox"/>
	e) Section G - Photographs of any buildings over 50 years old, Indicate what is to be done to all buildings in the project area.	<input type="checkbox"/>
	f) Section G - Total acres in property under review. Of this acreage, total acres of earth disturbance for the proposed activity.	<input type="checkbox"/>
	h) Return receipt of delivery of Cultural Resource Notice to the Pennsylvania Historical and Museum Commission	<input type="checkbox"/>
2.	Mailings	<input type="checkbox"/>
	a) Notice mailed to PHMC on _____ .	<input type="checkbox"/>
	b) Received Returned Receipt from PHMC on _____ .	<input type="checkbox"/>
	c) Submitted application to DEP Regional, Central, District Mining or Oil and Gas Mgmt. Office on _____ with copy of Returned Receipt from PHMC as proof of submittal. or	<input type="checkbox"/>
	d) Submitted application to County Conservation District Office _____ with copy of return receipt from PHMC as proof as submittal.	<input type="checkbox"/> <input type="checkbox"/>
	Requests	Check ✓ If Included
3.	Attachments requested, where appropriate, are included	<input type="checkbox"/>
	a) Section G - Photographs of any buildings over 40 years old.	<input type="checkbox"/>
	b) Section G - Site maps of the proposed activity, if available.	<input type="checkbox"/>

**DEP/PHMC POLICIES AND PROCEDURES
IMPLEMENTATION OF THE HISTORY CODE
LIST OF EXEMPTIONS
August 1997**

These DEP Permits are Exempt...	...Unless these qualifying conditions apply.
FOR ALL BUREAUS	Permitted activities which may affect Historic Resources on the National Register of Historic Places are not exempt regardless of size.
A. BUREAU OF AIR QUALITY Air Quality Plan Air Quality Operating Permit	If more than 10 acres of earth disturbance will be involved.
B. BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT Projects which do not involve earth disturbance Projects where earth has previously been disturbed. C. BUREAU OF RADIATION PROTECTION Naturally Occurring and Accelerator Produced Radioactive Materials (NARM) Licenses	
D. BUREAU OF OIL AND GAS MANAGEMENT Individual Well Permits (normally only ½ to 1½ acre in size) DEP contracts for plugging wells Well registration Pillar Permits Underground Injection Control Permit NGPA Gas Well Classification Determinations Clean Streams Law Part II Permits for disposal wells and treatment facilities	If more than 10 acres of earth disturbance will be involved.

**DEP/PHMC POLICIES AND PROCEDURES
IMPLEMENTATION OF THE HISTORY CODE
LIST OF EXEMPTIONS
August 1997**

These DEP Permits are Exempt...	...Unless these qualifying conditions apply.
<p>G. BUREAU OF WATERSHED CONSERVATION</p> <p>Storage Tank and Spill Prevention Act Permits</p> <ul style="list-style-type: none"> • tank or facility installation • tank or facility modification • tank replacement • tank removal 	
<p>H. BUREAU OF MINING AND RECLAMATION</p> <p>Permit Renewals/Transfers</p> <p>General Permits for Small Non-Coal Mining (less than 2,000 tons per year)</p> <p>Coal/Non-Coal Exploration Notices</p> <p>Deep Mine Provisions</p> <p>Bonding authorizations within an approved Surface Mining Permit</p>	
<p>I. BUREAU OF ABANDONED MINE RECLAMATION (March 31, 1993 memo between Bureau and BHP of PHMC)</p> <p>Strip mine reclamation using on-site previously disturbed material</p> <p>Backfilling or flushing deep mines</p> <p>Backfilling or capping vertical mine openings</p> <p>Portals without permanent linings or facings</p> <p>Exploratory drilling or well drilling</p> <p>Abandoned mine refuse pile grading or fire extinguishment</p> <p>Abandoned deep mine dangerous gas venting projects</p> <p>Drainage control work in previously disturbed areas</p> <p>Abandoned coal refuse piles</p>	



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WATER QUALITY PROTECTION
BUREAU OF WATERWAYS ENGINEERING

FOR OFFICIAL USE ONLY
PNDI Screening
Reviewer _____
Date _____
Phone No. _____

**SUPPLEMENT NO. 1
PENNSYLVANIA NATURAL DIVERSITY INVENTORY SEARCH FORM**

This form provides site information necessary to perform a computer screening for species of special concern listed under the Endangered Species Act of 1973, the Wild Resource Conservation Act, the Pennsylvania Fish and Boat Code or the PA Game and Wildlife Code. Records regarding species of special concern are maintained by PA DCNR in a computer data base called the "Pennsylvania Natural Diversity Inventory" (PNDI). Results from this search are not intended to be a conclusive compilation of all potential special concern resources located within a proposed project site. On-site biological surveys may be recommended to provide a definitive statement on the presence or absence, or degree of natural integrity of any project site. Results of this PNDI search are valid for one year.

Please complete the information below, attach an 8½" x 11" photocopy (DO NOT REDUCE) of the portion of the U.S.G.S. Quadrangle Map that identifies the project location and outlines the approximate boundaries of the project and mail to the appropriate DEP regional office or delegated County Conservation District prior to completing a Chapter 105 environmental assessment or any other DEP permit application. (SEE REVERSE SIDE FOR LIST OF OFFICES AND ADDRESSES).

NAME: _____

ADDRESS: _____

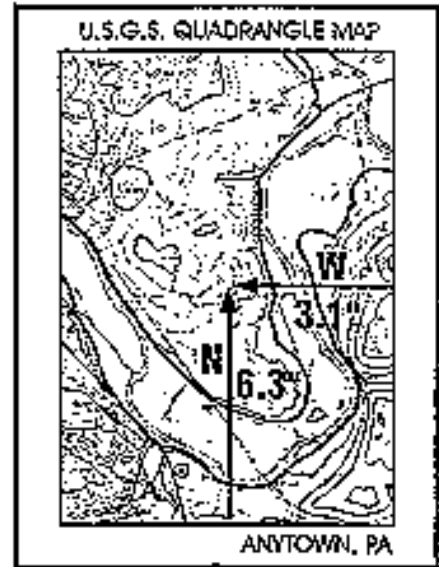
PHONE: (____) _____

COUNTY: _____

TWP./MUNICIPALITY: _____

U.S.G.S. 7½ Minute Quadrangle

PROJECT DESCRIPTION AND SIZE (Briefly describe entire area relevant to your project, including acreage.)



North (Up) _____ inches

West (to the left) _____ inches

INDICATE PROJECT LOCATION TO THE NEAREST ONE TENTH INCH MEASURING FROM THE EDGE OF THE MAP IMAGE FROM THE LOWER RIGHT CORNER.

FOR OFFICIAL USE ONLY

SCREENING RESULTS - Follow the directions of the checked block.

- No potential conflicts were encountered during the PNDI inquiry. Include this form and the PNDI receipt with your Chapter 105 environmental assessment or other DEP permit application submissions.
- Potential conflicts must be resolved by contacting the natural resource agencies listed on the PNDI receipt. Please provide a copy of this form and the PNDI receipt along with a brief description of your project to the listed agency for consultation and recommendations. Include this form, the printed PNDI search results and the natural resource agency's written recommendation with your Chapter 105 environmental assessment or other DEP permit application submissions.

DELEGATED COUNTY CONSERVATION DISTRICTS

- ◆ Adams County
- 57 N. Fifth Street
Gettysburg, PA 17325
- Allegheny County
Lexington Technology Park
Bldg #1, Suite 102
400 N. Lexington Ave.
Pittsburgh, PA 15208
- Armstrong Co.
Armsdale Admin. Bldg.
RR 8 Box 294
Kittanning, PA 16201
- Beaver County
1000 Third St., Ste 202
Beaver, PA 15009-2026
- Bedford County
◆ Fairlawn Court, Suite 4
702 W. Pitt Street
Bedford, PA 15522
- Berks County
◆ Agricultural Center
1238 County Welfare Rd.
P.O. Box 520
Leesport, PA 19533-0520
- Blair County
1407 Blair Street
Hollidaysburg, PA 16648
- Bradford County
◆ RR 5, Box 5030-C
Stoll Nature Res. Center
Towanda, PA 18848
- Bucks County
924 Town Center
New Britain, PA 18901-5182
- Butler County
◆ 122 McCune Drive
Butler, PA 16001-6501
- Cambria County
◆ 401 Candlelight Dr., Ste. 221
Ebensburg, PA 15931
- Carbon County
5664 Interchange Rd.
Lehighton, PA 18235-5114
- Centre County
◆ Suite 4
414 Holmes Ave.
Belleville, PA 16823
- Chester County
P.O. Box 2747
601 Westtown Rd., Ste. 240
West Chester, PA 19380-0990
- ◆ **Delegated Programs**
- ◆ **Chapter 105**
- * **GP6 and GP9 only**
- **NPDES and Chapter 102**
- # **Chapter 102 only**
- # Clarion County
RR 3, Box 265
Clarion, PA 16214
- Clearfield County
◆ 650 Leonard Street
Clearfield, PA 16830
- Clinton County
◆ 36 Spring Run Rd., Rm. 104
Mill Hall, PA 17751-9543
- Columbia County
◆ 702 Sawmill Rd., Suite 204
Bloomsburg, PA 17815
- Crawford County
◆ 1012 Water St., Suite 18
Meadville, PA 16335
- Cumberland County
◆ 43 Brookwood Ave., Suite 4
Carlisle, PA 17013-9172
- Dauphin County
◆ 1451 Peters Mountain Road
Dauphin, PA 17018
- Delaware County
Rose Tree Park-Hunt Club
◆ 1521 N. Providence Rd.
Media, PA 19063
- Elk County
◆ P.O. Box 448
300 Center St.
Ridgway, PA 15853
- Erie County
◆ 12723 Rte. 19
P.O. Box 801
Waterford, PA 16441
- # Fayette County
10 Nickman Plaza
Lemont Furnace, PA 15456
- # Forest County
Courthouse Annex
P.O. Box 456
Tionesta, PA 16353
- Franklin County
◆ Administrative Annex
218 N. Second Street
Chambersburg, PA 17201
- Fulton County
◆ 216 North Second Street
McConnellsburg, PA 17233
- * Greene County
- Greene County Office Building
◆ 93 E. High Street, Room 215
Waynesburg, PA 15370-1839
- Huntingdon County
◆ RR 1, Box 7C
Huntingdon, PA 16652-9603
- Indiana County
◆ Ag Service Ctr.
251 Route 286 North, Ste. 103
Indiana, PA 15701-9203
- Jefferson County
◆ 180 Main Street
Brookville, PA 15825
- Juniata County
◆ RR 3, Box 302
Mifflintown, PA 17059-9609
- Lackawanna County
1300 Old Plank Rd.
Mayfield, PA 18433
- Lancaster County
◆ 1383 Arcadia Road, Room 6
Farm & Home Center
Lancaster, PA 17601
- Lawrence County
430 Court St.
New Castle, PA 16101
- Lebanon County
2120 Cornwall Rd., Ste. 5
Lebanon, PA 17042-9788
- Lehigh County
Lehigh Ag. Ctr, Ste 102
4184 Dorney Park Rd.
Allentown, PA 18104-5728
- Luzerne County
485 Smith Pond Rd.
P.O. Box 250
Lehman, PA 18627-0250
- Lycoming County
542 County Farm Rd., Ste. 202
Montoursville, PA 17754
- # McKean County
P.O. Box E
Custer City, PA 16725
- Mercer County
◆ 747 Greenville Rd.
Mercer, PA 16137
- Mifflin County
◆ 20 Windmill Hill #4
Burnham, PA 17009
- Monroe County
◆ 8050 Running Valley Road
Stroudsburg, PA 18360-0917
- Montgomery County
1015 Bridge Rd., Ste. B
Collegetown, PA 19426
- ◆ Montour County
112 Woodbine Lane, Ste. 2
Danville, PA 17821
- Northampton County
Greystone Bldg.
Gracedale Complex
Nazareth, PA 18064-9211
- Northumberland County
◆ RR 3, Box 238C
Sunbury, PA 17801
- Perry County
◆ 31 W. Main Street,
P.O. Box 36
New Bloomfield, PA 17068
- Pike County
◆ HC6, Box 6770
Hawley, PA 18428
- Potter County
◆ 107 Market Street
Coudersport, PA 16915
- Schuylkill County
1206 Ag. Center Dr.
Pottsville, PA 17901
- Snyder County
◆ 403 West Market Street
Middleburg, PA 17842
- Somerset County
N. Ridge Bldg., Ste 103
1590 N. Ctr. Ave.
Somerset, PA 15501
- Sullivan County
◆ RR 4, Box 4181
Dushore, PA 18614
- # Susquehanna County
◆ County Office Building
31 Public Avenue
Montrose, PA 18801
- Tioga County
◆ 29 East Avenue
Wellsboro, PA 16901
- Union County
◆ 60 N. Bull Run Crossing
Lewisburg, PA 17837-9700
- Venango County
◆ RR 5, Box 320
Franklin, PA 16323
- Warren County
◆ 609 Rouse Ave., Ste. 203
Youngsville, PA 16371
- * Washington County
- 100 W. Beau Street, Ste. 602
◆ Washington, PA 15301
- Wayne County
◆ 470 Sunrise Ave.
Honesdale, PA 18431
- Westmoreland County
◆ Donohoe Center
RR 12, Box 202B
Greensburg, PA 15601
- Wyoming County
◆ 1 Hollowcrest Complex
Tunkhannock, PA 18657
- York County
118 Pleasant Acres Rd.
York, PA 17402

DEPARTMENT OF ENVIRONMENTAL PROTECTION

<u>Soils and Waterways Office</u>	<u>County Responsibility</u>	<u>Soils and Waterways Office</u>	<u>County Responsibility</u>
Northcentral Regional Office 208 W. Third St., Suite 101 Williamsport, PA 17701 (570) 327-3574	Bradford, Cameron, Centre, Clearfield, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, and Union	Southcentral Regional Office 909 Elmerton Avenue, Second Floor Harrisburg, PA 17110 (717) 705-4707	Adams, Bedford, Berks, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, and York
Northeast Regional Office 2 Public Square Wilkes-Barre, PA 18711-0790 (570) 826-5485	Carbon, Lackawanna, Lehigh, Luzerne, Monroe, Northampton, Pike, Schuylkill, Susquehanna, Wayne, and Wyoming	Southeast Regional Office Lee Park, Suite 6010, 555 North Lane Conshohocken, PA 19428 (610) 832-6130	Bucks, Chester, Delaware, Montgomery, and Philadelphia
Northwest Regional Office 230 Chestnut Street Meadville, PA 16335 (814) 332-6942	Butler, Clarion, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, and Warren	Southwest Regional Office 400 Waterfront Drive Pittsburgh, PA 15222-4745 (412) 442-4000	Allegheny, Armstrong, Beaver, Cambria, Fayette, Greene, Indiana, Somerset, Washington, and Westmoreland

MODULE B

APPLICATION FOR WATER QUALITY MANAGEMENT PART II PERMIT - INDUSTRIAL WASTE

Before completing this form, read the step-by-step instructions provided with this Part II form.

SECTION A. APPLICANT IDENTIFIER

Applicant Name: _____

Application for:

Industrial Wastewater Treatment Facility

Other _____

Discharging to:

Surface Water

Groundwater

SECTION B. SIC CODES

	SIC CODE	Corresponding SIC Description
1st	____ _	_____
2nd	____ _	_____
3rd	____ _	_____
4th	____ _	_____

SECTION C. GENERAL DESCRIPTION AND NATURE OF BUSINESS

SECTION D. LIST OF PERMITS (List all NPDES and Part II Water Quality Management Permits presently held for this facility.)

SECTION E. CERTIFICATION AND SIGNATURE

A. Professional Engineer

This section to be completed by the registered professional engineer who prepares this application, accompanying report and supporting documentation.

Name of Professional Engineer _____

Firm: _____

Mailing Address: _____

Telephone: () _____

PROFESSIONAL
SEAL

Signature of Professional Engineer

TABLE 1

**CODES FOR TREATMENT UNITS
(to be used to complete Section F)**

PHYSICAL TREATMENT PROCESSES		
1-A Ammonia Stripping	1-N..... Microstraining	
1-B Dialysis	1-O..... Mixing	
1-C Diatomaceous Earth Filtration	1-P Moving Bed Filters	
1-D Distillation	1-Q..... Multimedia Filtration	
1-E Electrodialysis	1-R..... Rapid Sand Filtration	
1-F..... Evaporation	1-S..... Reverse Osmosis (Hyperfiltration)	
1-G Flocculation	1-T Screening	
1-H Flotation	1-U..... Sedimentation	
1-I..... Foam Fractionation	1-V Slow Sand Filtration	
1-J..... Freezing	1-W Solvent Extraction	
1-K Gas-Phase Separation (air stripping)	1-X..... Sorption (not carbon)	
1-L..... Grinding (Comminutors)	1-Y Equalization	
1-M..... Grit Removal	1-Z Intermittent Sand Filters	
OTHER PROCESSES		
4-A Discharge to Surface Water	4-F Temperature Control (cooling)	
4-B Ocean Discharge Through Outfall	4-G..... Eutectic Freezing	
4-C Reuse/Recycle of Treated Outfall	4-H..... Oil & Grease Removal, Including Skimming & Separators	
4-D Underground Injection		
4-E Reuse or Sale of Wastewater or Raw Material for Other Processes		
BIOLOGICAL TREATMENT PROCESSES	CHEMICAL TREATMENT PROCESSES	SLUDGE HANDLING AND DISPOSAL PROCESSES
3-A Activated Sludge	1-A Carbon Adsorption	5-A Aerobic Digestion
3-B Aerated Lagoons	2-B Chemical Oxidation	5-B Anaerobic Digestion
3-C Anaerobic Treatment	2-C Chemical Precipitation	5-C Belt Filtration
3-D Nitrification-Denitrification	2-D Coagulation	5-D Centrifugation
3-E Pre-Aeration	2-E Dechlorination	5-E Chemical Conditioning
3-F..... Spray Irrigation/Land Application	2-F Disinfection (Chlorine)	5-F Chlorine Treatment
3-G Stabilization Ponds	2-G Disinfection (Ozone)	5-G Composting
3-H Trickling Filtration	2-H Disinfection (Other)	5-H Drying Beds
3-I..... Rotating Biological Contractors	2-I Electrochemical Treatment	5-I..... Elutriation
3-J..... Polishing Lagoons	2-J..... Ion Exchange	5-J..... Flotation Thickening
3-K Biological Hydrolysis	2-K Neutralization	5-K Freezing
3-L..... Post Aeration	2-L Reduction	5-L..... Gravity Thickening
3-M..... Treatment by Plain Aeration	2-M Odor Control	5-M..... Heat Drying
3-N Holding or Detention Pond	2-N..... Chemical Hydrolysis	5-N Heat Treatment
3-O Ridge & Furrow Irrigation		5-O Incineration
3-P Sheet or Overland Flow Irrigation		5-P Land Application
3-Q Surface/Subsurface Injection		5-Q Landfill
3-R Sequence Batch Reactor		5-R Pressure Filtration
3-S Artificial Wetlands		5-S Pyrolysis
3-T..... Oxidation		5-T Sludge Lagoons
		5-U Vacuum Filtration
		5-V Vibration
		5-W Wet Oxidation

SECTION F. SUMMARY OF FLOW, WASTEWATER SOURCES AND TREATMENT UNIT INFORMATION

Please see instructions and use additional sheets as necessary.	1. Source of Waste _____ _____ 2. Outfall No. _____	1. Source of Waste _____ _____ 2. Outfall No. _____																																																																																																		
3. Type(s) of Waste (i.e., Sanitary, Process)																																																																																																				
4. Waste Flow Pattern	<input type="checkbox"/> Continuous From _____ (am) To _____ (pm) <input type="checkbox"/> Intermittent _____ <input type="checkbox"/> Batch _____	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent _____ <input type="checkbox"/> Batch _____																																																																																																		
5. Daily Waste Volume <div style="text-align: right;">TOTAL</div>	_____ Batches/day _____ Gallons/batch _____ Gallons/day	_____ _____ _____																																																																																																		
6. Design Flow <div style="text-align: right;"> AVERAGE MAXIMUM </div> General Sequence of Treatment Units (See Code List - Table 1) ⁽¹⁾ ⁽¹⁾ If impoundments are proposed, and the wastewater entering the impoundment meets the definition of Residual Waste at 25 PA Code Chapter 287, the design must be in accordance with 25 PA Code Chapter 299.144.	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;"></th> <th style="width:15%; text-align: center;">_____ MGD _____ MGD Unit ⁽¹⁾</th> <th style="width:15%; text-align: center;">(Check) Existing</th> <th style="width:15%; text-align: center;">(Check) Proposed</th> <th style="width:15%; text-align: center;">Code</th> <th style="width:15%;"></th> <th style="width:15%;"></th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		_____ MGD _____ MGD Unit ⁽¹⁾	(Check) Existing	(Check) Proposed	Code					<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"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>				<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;"></th> <th style="width:15%; text-align: center;">_____ MGD _____ MGD Unit ⁽¹⁾</th> <th style="width:15%;"></th> <th style="width:15%;"></th> <th style="width:15%;"></th> <th style="width:15%;"></th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td style="text-align: center;">(C E)</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		_____ MGD _____ MGD Unit ⁽¹⁾										(C E)																														
	_____ MGD _____ MGD Unit ⁽¹⁾	(Check) Existing	(Check) Proposed	Code																																																																																																
		<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"/>	<input type="checkbox"/>																																																																																																	
		<input type="checkbox"/>	<input type="checkbox"/>																																																																																																	
		<input type="checkbox"/>	<input type="checkbox"/>																																																																																																	
	_____ MGD _____ MGD Unit ⁽¹⁾																																																																																																			
					(C E)																																																																																															

***Use Additional Sheets If Necessary**

Checklist



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
WATER MANAGEMENT PROGRAM

WATER QUALITY MANAGEMENT PART II - INDUSTRIAL WASTE APPLICATION CHECKLIST FOR SUBMITTAL

APPLICANT'S ✓ CHECKLIST

Please check the following list to make sure that you have included all the required information. Place a checkmark in the column provided for all items completed and/or provided.

Failure to provide all of the requested information will delay the processing of the application and may result in the application being placed **ON HOLD** with **NO ACTION**, or will be considered withdrawn and the application file closed.

ENCLOSE THIS CHECKLIST WITH YOUR APPLICATION.

	Requirement	Check ✓ If Included
	Accompanying materials and documentation (See General Instructions)	<input type="checkbox"/>
1.	\$500.00 application fee (less than 15 days old)	<input type="checkbox"/>
2.	Five (5) copies of application, design engineer's report, and accompanying drawings and plans. a. Affidavit and proper signatures b. Engineer's professional seal	<input type="checkbox"/>
3.	Proof of Public Notice (Non-NPDES Cases)	<input type="checkbox"/>
4.	Supplemental Information: - General Layout Diagram - Sizes, Capacities, & Dimensions Diagram	<input type="checkbox"/>
5.	Topographic map with appropriate details	<input type="checkbox"/>
6.	Soil Erosion and Sedimentation Control Plan a. County Conservation District Comments	<input type="checkbox"/>
7.	Preparedness Prevention and Contingency (PPC) Plan	<input type="checkbox"/>
8.	Act 14 Notification	<input type="checkbox"/>
9.	Other (specify):	<input type="checkbox"/>

MODULE C

COMMONWEALTH OF PENNSYLVANIA
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 and
 DEPARTMENT OF ARMY CORPS OF ENGINEERS
 (Baltimore, Philadelphia, and Pittsburgh Districts)

**JOINT APPLICATION FOR
 U.S. ARMY CORPS OF ENGINEERS SECTION 404 PERMIT AND
 PENNSYLVANIA WATER OBSTRUCTION AND ENCROACHMENT PERMIT**

**Before completing this form, read the step-by-step instructions
 provided with this Joint Permit package.**

AGENCY USE ONLY		
Application ID# (Assigned by DEP) _____	RECEIVED DATE _____	CHECK NO. _____
Program Application No. _____	REQUIRED APP. FEE _____	AMOUNT \$ _____

SECTION A. APPLICATION TYPE: STANDARD SMALL PROJECTS

SECTION B. APPLICANT IDENTIFIER

Applicant Name _____

SECTION C. PROJECT LOCATION DATA

Name of stream and/or body of water. _____

Corps District where project will occur.

Baltimore Philadelphia Pittsburgh

Name of the U.S.G.S. 7 1/2 Minute Quadrangle Map where project is located: _____

Indicate location of project on this map by measuring (in inches) from the lower right corner:

North (up) _____ inches; West (to the left) _____ inches; Latitude _____ ; Longitude _____

Project type, purpose and need: _____

SECTION D. PROJECT STATUS

HAS ANY PORTION OF PROPOSED PROJECT BEEN COMPLETED? yes no _____date completed

If yes, attach description of those portions of the project that have been completed and identify dates of completion.

SECTION E. OTHER APPROVALS

LIST APPROVALS, CERTIFICATIONS, DENIALS OR NOTICES OF VIOLATION RECEIVED FROM FEDERAL, INTERSTATE, STATE OR LOCAL AGENCIES FOR STRUCTURES, CONSTRUCTION, DISCHARGES OR OTHER ACTIVITIES DESCRIBED IN THIS APPLICATION.

SECTION F. APPLICATION COMPLETENESS CHECKLIST

(Applicant must place an entry - Y = Yes, N = No, N/A = Not Applicable - in each left side column space. See Section 105.13 for additional details. If you are applying under the Small Projects Application format, place an entry in only those comments prefixed by an asterisk (*).

REQUIREMENT	Applicant Entry	DEP Use Only
a. Permit application properly signed, sealed and witnessed	*	
b. Application Fee enclosed (see Section G.)	*	
c. Copies and proof of receipt - Act 14 notification	*	
d. Determination of historic/archeological sites	*	
e. Completed and approved Supplement No. 1 Form (PNDI search)	*	
f. Site Plan (including cross sections)	*	
g. Project description narrative	*	
h. Color photographs with map showing location taken	*	
i. Environmental Assessment form	*	
j. Erosion and Sedimentation Control Plan and approval letter		
k. Hydrologic and hydraulic analysis		
l. Stormwater Management Analysis w/consistency letter		
m. Floodplain Management Analysis w/consistency letter		
n. Risk Assessment		
o. Professional engineer's seal and certification		
p. Analysis of practicable alternatives		
q. Mitigation plan		

SECTION G. DETERMINATION OF APPLICATION FEES (DEP FEES ONLY)

Types of Water Obstructions and Encroachments	Number of Units	Fee Per Unit	Subtotal Amount
Types of Water Obstructions and Encroachments	Number of Units	Fee Per Unit	Subtotal Amount
Stream enclosures		\$350.00	\$ 0.00
Channel changes		\$300.00	\$ 0.00
Commercial dredging		\$300.00	\$ 0.00
Peat extraction		\$750.00	\$ 0.00
Fills, levees, floodwalls		\$350.00	\$ 0.00
Bridges and other water obstructions and encroachments		\$200.00	\$ 0.00
Small projects		\$100.00	\$ 0.00
TOTAL FEE			\$ 0.00

List each type and number of water obstructions and encroachments that are included in this application and indicate subtotal and total fee amounts.

FAILURE TO PROVIDE ALL OF THE REQUESTED INFORMATION WILL DELAY THE PROCESSING OF THE APPLICATION AND MAY RESULT IN THE APPLICATION BEING PLACED **ON HOLD WITH NO ACTION**, OR IT MAY BE CONSIDERED WITHDRAWN AND THE FILE CLOSED.

SECTION H. ADJOINING PROPERTY OWNERS

Please list the name and address of all property owners whose land adjoins the project property.

NAME

ADDRESS

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

MODULE D

ENVIRONMENTAL ASSESSMENT FORM (E.A. Form)

PART 1 - RESOURCE IDENTIFICATION

1. Indicate water resources which exist on the project site.

Name of streams(s) and/or body of water (including wetlands) _____

Size of body of water (in acres)

Wetland - If wetlands are present at the project site, provide the following information relative to the person(s) or organization performing the wetland identification, delineation and related work:

Name

Organization/Company

Address

Telephone

QUALIFICATIONS

If wetlands are present, attach a copy of the wetland delineation report identified and labeled as **Enclosure A**. Include all field data sheets, denote the size (in acres) of the wetland. If this information details any physical information or features not shown in the "site plan" please attach additional plans which illustrate these features.

Enclosure A

PART 1 - RESOURCE IDENTIFICATION (continued)	YES	NO	
2. Is the site located within or adjacent to any of the following? Please mark either the "yes" or "no" column for each question.			
A. National, state or local park, forest or recreation area	<input type="checkbox"/>	<input type="checkbox"/>	
B. Natural, wild, or wilderness area	<input type="checkbox"/>	<input type="checkbox"/>	
C. National natural landmark	<input type="checkbox"/>	<input type="checkbox"/>	
D. National wildlife refuge, or Federal, state, local or private wildlife or plant sanctuaries	<input type="checkbox"/>	<input type="checkbox"/>	
E. State Game Lands	<input type="checkbox"/>	<input type="checkbox"/>	
F. Areas identified as prime farmland	<input type="checkbox"/>	<input type="checkbox"/>	
If not included in the permit application package, please attach a map (e.g. 1:2400 scale or greater) indicating the location of the project, all water resources and the features identified above. Label the map as <u>Enclosure B</u> .	ENCLOSURE B		
3. Is the water resource listed as stocked waters by the Pennsylvania Fish and Boat Commission?	<input type="checkbox"/>	<input type="checkbox"/>	
4. Is the water resource designated as a wild trout stream by the Pennsylvania Fish and Boat Commission?	<input type="checkbox"/>	<input type="checkbox"/>	
5. Is the water resource classified as High Quality or Exceptional Value pursuant to Title 25 Pa. Code Chapter 93?	<input type="checkbox"/>	<input type="checkbox"/>	
Indicate the stream classification pursuant to Chapter 93. Classification _____			
6. Is the water resource designated as a National Wild or Scenic River or as part of the Commonwealth's Scenic Rivers System or classified as priority 1-A for inclusion in the system?	<input type="checkbox"/>	<input type="checkbox"/>	
7. Is the water resource part of or located along a private or public water supply?	<input type="checkbox"/>	<input type="checkbox"/>	
(IF COMPLETING A SMALL PROJECT APPLICATION ADVANCE TO PART 3)			
8. Provide a written narrative, identified and labeled as " <u>Enclosure C - Description of Aquatic Habitat,</u> " discussing the following ecological functions:	E N C L O S U R E C		
A. Aquatic habitats including:			
(1) Food chain production			
(2) General habitat a. Nesting e. Migration b. Spawning f. Feeding c. Rearing g. Escape Cover d. Resting h. Other			
(3) Habitat for threatened and endangered plant and animal species (Discuss results of Supplement Form #1)			
(4) Environmental Study Areas a. Sanctuaries b. Refuges			
(5) If project proposes a stream relocation, a stream enclosure, or dredging, provide a description of the instream macroinvertebrate community.			

PART 1 - RESOURCE IDENTIFICATION (continued)		E N C L O S U R E C Description of Aquatic Habitat
B. Water Quantity and Streamflow		
(1) Natural drainage patterns		
(2) Flushing characteristics		
(3) Current patterns		
(4) Groundwater discharge for baseflow		
(5) Natural recharge area for ground and surface waters		
(6) Storm and floodwater storage and control		
C. Water Quality		
(1) Preventing Pollution		
(2) Sedimentation control and patterns		
(3) Salinity distribution		
(4) Natural water filtration		
D. Recreation		
(1) Game Species		
(2) Non Game Species		
(3) Fishing		
(4) Hiking		
(5) Observation (plant/wildlife)		
(6) Other		
E. Upstream and Downstream Property		
F. Other Environmental Factors Determined by Site Investigation		
PART 2 - PROJECT DESCRIPTION		
9. <u>Project Impacts</u> For impacts to regulated waters of the Commonwealth, answer fully, completely and in detail the following questions; attach and label as <u>Enclosure D</u> .		E N C L O S U R E D
A. Discuss the impacts on:		
(1) National, state or local park, forest or recreation area		
(2) Natural, wild, or wilderness area		
(3) National, state, or local historic site		
(4) National natural landmark		
(5) National wildlife refuge		
(6) Cultural or archaeological landmarks		
(7) State Game Lands		

PART 2 - PROJECT DESCRIPTION (continued)		E N C L O S U R E D Project Impacts
(8)	Federal, state, local or private plant or wildlife sanctuaries	
(9)	Areas identified as prime farmland	
B.	Discuss the environmental impacts on:	
(1)	Aquatic habitats including:	
a.	Food Chain production	
b.	General habitat	
(1)	Nesting	
(2)	Spawning	
(3)	Rearing	
(4)	Resting	
(5)	Migration	
(6)	Feeding	
(7)	Escape Cover	
(8)	Other	
c.	Habitat for threatened and endangered plant and animal species	
d.	Environmental Study Areas	
(1)	Sanctuaries	
(2)	Refuges	
(2)	Water Quantity and Streamflow	
a.	Natural drainage patterns	
b.	Flushing characteristics	
c.	Current patterns	
d.	Groundwater discharge for baseflow	
e.	Natural recharge area for ground and surface waters	
f.	Storm and floodwater storage and control	
(3)	Water Quality	
a.	Preventing Pollution	
b.	Sedimentation control and patterns	
c.	Salinity distribution	
d.	Natural water filtration	
(4)	Recreation	
a.	Game Species	
b.	Non Game Species	
c.	Fishing	
d.	Hiking	
e.	Observation (wildlife)	
f.	Other	
(5)	Upstream and downstream property	
(6)	Other Environmental Factors	

PART 2 - PROJECT DESCRIPTION (continued)		E N C L O S U R E D
C.	Identify all environmental impacts on other adjacent land and water resources associated with the construction, modification or operation of the dam, reservoir, water obstruction, or encroachment in the area of the project.	
D.	Identify and evaluate the potential cumulative environmental impacts of this project and other potential or existing projects like it, and the impacts that may result through numerous piecemeal changes to the resource.	
E.	Identify and describe all other dams, water obstructions or encroachments which may or will be needed, in addition to those described in this Application, to fulfill the purpose of the current project.	

PART 3 - CERTIFICATION

I certify that the above statements, attachments including those labeled and identified as Enclosures, and all conclusions are true, correct, and based upon current environmental principles and science, to the best of my knowledge and belief.

Signature of Person Completing
the Environmental Assessment Form

Date

The Department may waive a specific information requirement in writing, at the request of the Applicant, during the pre-application review process if the Department determines that specific information is not necessary to review the application.

ENVIRONMENTAL ASSESSMENT INFORMATION SHEET

Before completing this form, read the step-by-step instructions provided with this Environmental Assessment package.

AGENCY USE ONLY

Environmental Assessment No. _____
 Received Date: _____ Acceptance Date: _____

SECTION A. OWNER INFORMATION

Owner: _____ Contact Person: _____
(Individual , Corporation, Company who has primary responsibility)

(Street/P.O. Box)

(City) (State) Zip Code + 4 (Telephone Number)

SECTION B. AGENT/PREPARER INFORMATION

Check box if same section A.
 Firm Name: _____ Contact Person: _____
 Mailing Address: _____
(Street/P.O. Box)

(City) (State) Zip Code + 4 (Telephone Number)

SECTION C. PROJECT LOCATION DATA

Name of stream and/or body of water. _____
 Corps District where project will occur.
 Baltimore Philadelphia Pittsburgh
 Name of the U.S.G.S. 7½ Minute Quadrangle Map where project is located: _____
 Indicate location of project on this map by measuring (in inches) from the lower left corner:
 North:(up) _____ inches; East (to the right) _____ inches; Latitude: _____ Longitude: _____
 Project purpose and need.: _____

SECTION D. PROJECT DATA

Drainage Area to dam _____ (acres) or (square miles) Maximum Depth to Top of Dam _____ feet
 Crest Length _____ feet
 Impoundment Surface Area:
 at normal pool _____ acres Storage Volume: at normal pool _____ acre feet
 at top of dam _____ acres at top of dam _____ acre feet
 Size and Hazard Classification _____
 Justification for Hazard Classification _____

SECTION E. INFORMATION COMPLETENESS CHECKLIST		
Owner must place an entry - Y = Yes, N = No, N/A = Not Applicable - in each left side column space. See Sections 105.13, 105.14, and 105.15 for additional details.		
REQUIREMENT	Applicant Entry	DEP Use Only
a. Location Map		
b. Determination of historic/archaeological sites		
c. Completed and approved Supplement No. 1 Form (PNDI search)		
d. Site Plan (including cross sections)		
e. Project description narrative		
f. Color photographs with map showing location taken		
g. Environmental Assessment forms		
h. Mitigation plan		
i. Alternatives Analysis		
FOR NON-JURISDICTIONAL DAMS LOCATED IN AN EXCEPTIONAL VALUE WATERSHED SUBMIT THE FOLLOWING ADDITIONAL INFORMATION		
j. The mean depth and maximum depth of the stream at the location of the dam.		
k. Description of the release structure.		
l. The rate of a conservation release		
m. The design of bypass structures		
n. The use of the dam.		
o. The material used for dam construction.		
FAILURE TO PROVIDE ALL OF THE REQUESTED INFORMATION WILL DELAY THE DEPARTMENT'S REVIEW		

MODULE E

APPLICATION FOR A DAM PERMIT

Before completing this form, read the step-by-step instructions provided with this Environmental Assessment package.

AGENCY USE ONLY

Application ID# (Assigned by DEP) _____ RECEIVED DATE _____ CHECK NO. _____
 Program Application No. _____ REQUIRED APP. FEE _____ AMOUNT _____
 \$ _____

SECTION A. APPLICANT IDENTIFIER

Applicant Name: _____

SECTION B. PROJECT LOCATION DATA

Name of stream and/or body of water. _____

Corps District where project will occur.

Baltimore Philadelphia Pittsburgh

Name of the U.S.G.S. 7½ Minute Quadrangle Map where project is located: _____

Indicate location of project on this map by measuring (in inches) from the lower left corner:

North:(up) _____ inches; East (to the right) _____ inches; Latitude: _____ Longitude: _____

Project purpose and need.: _____

SECTION C. PROJECT DATA

Drainage Area to dam _____ (acres) or (square miles) Maximum Depth to Top of Dam _____ feet
 Crest Length _____ feet

Impoundment Surface Area:

at normal pool _____ acres Storage Volume: at normal pool _____ acre feet
 at top of dam _____ acres at top of dam _____ acre feet

Size and Hazard Classification _____

Justification for Hazard Classification _____

SECTION D. DETERMINATION OF APPLICATION FEES (DEP FEES ONLY)

Size Classification Schedule	Number of Units	Fees Per Unit	Subtotal Amount
Class A		\$3,000	
Class B		\$2,500	
Class C		\$1,500	
TOTAL FEE			

SECTION E. APPLICATION COMPLETENESS CHECKLIST

(Applicant must place an entry - Y = Yes, N = No, N/A = Not Applicable - in each left side column space. See Sections 105.13, 105.14, and 105.15 for additional details.

REQUIREMENT	Applicant Entry	DEP Use Only
1. Permit application properly signed, sealed and witnessed		
2. Completed Permit Application General Information Form		
3. Application Fee enclosed (see Section D)		
4. Copies and proof of receipt - Act 14 notification		
5. Determination of historic/archaeological sites		
6. Completed and approved Supplement No. 1 Form (PNDI search)		
7. Site Plan (including cross sections and location maps)		
8. Project description narrative		
9. Color photographs with map showing locations taken		
10. Erosion and Sedimentation Control Plan and approval letter		
11. Hydrologic and hydraulic analysis		
12. Stormwater Management Analysis w/consistency letter		
13. Floodplain Management Analysis w/consistency letter		
14. Risk Assessment		
15. Environmental Assessment form		
16. Alternatives Analysis		
17. Mitigation plan		
18. Proof of title or adequate flowage easements		
19. Data on site and construction materials		
20. Design drawings, reports and technical construction specifications		
21. Emergency Action Plan		
22. Instrument performance monitoring plan		
23. Proof of financial responsibility		
24. Data on chemical content, viscosity and other characteristics		
25. Operation and Maintenance Manual		
26. Copies of most recent inspection reports		
27. Professional engineer's seal and certification		
28. Proposed time for commencement and anticipated start of construction		

FAILURE TO PROVIDE ALL THE REQUESTED INFORMATION WILL DELAY THE PROCESSING OF THE APPLICATION AND MAY RESULT IN THE APPLICATION BEING PLACED **ON HOLD** WITH **NO ACTION**, OR IT MAY BE CONSIDERED WITHDRAWN AND THE FILE CLOSED.

SECTION F. OTHER APPROVALS

LIST APPLICATIONS MADE AND APPROVALS, CERTIFICATIONS, DENIALS OR NOTICES OF VIOLATION RECEIVED FROM FEDERAL, INTERSTATE, STATE OR LOCAL AGENCIES FOR STRUCTURES, CONSTRUCTION DISCHARGES OR OTHER ACTIVITIES DESCRIBED IN THIS APPLICATION.
