

RESOLUTION FOR PLAN REVISION FOR NEW LAND DEVELOPMENT

WHT RESOLUTION 10-22

RESOLUTION OF THE (SUPERVISORS) (COMMISSIONERS) (COUNCILMEN) of West Hempfield
(TOWNSHIP) (BOROUGH) (CITY), Lancaster COUNTY, PENNSYLVANIA (hereinafter "the municipality").

WHEREAS Section 5 of the Act of January 24, 1966, P.L. 1535, No. 537, known as the *Pennsylvania Sewage Facilities Act*, as Amended, and the rules and Regulations of the Pennsylvania Department of Environmental Protection (DEP) adopted thereunder, Chapter 71 of Title 25 of the Pennsylvania Code, require the municipality to adopt an Official Sewage Facilities Plan providing for sewage services adequate to prevent contamination of waters of the Commonwealth and/or environmental health hazards from sewage wastes, and to revise said plan whenever it is necessary to determine whether a proposed method of sewage disposal for a new land development conforms to a comprehensive program of pollution control and water quality management, and

WHEREAS 620 Sycamore Drive Associates has proposed the development of a parcel of land identified as
land developer

620 Sycamore Drive, and described in the attached Sewage Facilities Planning Module, and
name of subdivision

proposes that such subdivision be served by: (check all that apply), sewer tap-ins, sewer extension, new treatment facility, individual onlot systems, community onlot systems, spray irrigation, retaining tanks, other, (please specify) Pump Station/Force Main

WHEREAS, West Hempfield Township finds that the subdivision described in the attached
municipality

Sewage Facilities Planning Module conforms to applicable sewage related zoning and other sewage related municipal ordinances and plans, and to a comprehensive program of pollution control and water quality management.

NOW, THEREFORE, BE IT RESOLVED that the (Supervisors) (Commissioners) (Councilmen) of the (Township)

(Borough) (City) of West Hempfield hereby adopt and submit to DEP for its approval as a revision to the "Official Sewage Facilities Plan" of the municipality the above referenced Sewage Facilities Planning Module which is attached hereto.

I Adh B. St, Secretary, West Hempfield
(Signature)

Township Board of Supervisors (~~Borough Council~~) (~~City Councilmen~~), hereby certify that the foregoing is a true copy of the Township (Borough) (City) Resolution # 10-22, adopted, 4-5, 20 22.

Municipal Address:

3476 Marietta Avenue

Lancaster, PA 17601

Telephone 717-285-5554





COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

SEWAGE FACILITIES PLANNING MODULE

Component 3. Sewage Collection and Treatment Facilities

(Return completed module package to appropriate municipality)

DEP USE ONLY

DEP CODE #	CLIENT ID #	SITE ID #	APS ID #	AUTH ID #
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This planning module component is used to fulfill the planning requirements of Act 537 for the following types of projects: (1) a subdivision to be served by sewage collection, conveyance or treatment facilities, (2) a tap-in to an existing collection system with flows on a lot of 2 EDU's or more, or (3) the construction of, or modification to, wastewater collection, conveyance or treatment facilities that will require DEP to issue or modify a Clean Streams Law permit. Planning for any project that will require DEP to issue or modify a permit cannot be processed by a delegated agency. Delegated agencies must send their projects to DEP for final planning approval.

This component, along with any other documents specified in the cover letter, must be completed and submitted to the municipality with jurisdiction over the project site for review and approval. All required documentation must be attached for the Sewage Facilities Planning Module to be complete. Refer to the instructions for help in completing this component.

REVIEW FEES: Amendments to the Sewage Facilities Act established fees to be paid by the developer for review of planning modules for land development. These fees may vary depending on the approving agency for the project (DEP or delegated local agency). Please see section R and the instructions for more information on these fees.

NOTE: All projects must complete Sections A through I, and Sections O through R. Complete Sections J, K, L, M and/or N if applicable or marked .

A. PROJECT INFORMATION (See Section A of instructions)

1. Project Name 620 Sycamore Drive

2. Brief Project Description Subdivision and development of 100 single family residential lots with two open space lots and one lot for the proposed pump station. Gravity sewer running to an on-site sanitary sewer pump station which flows via force main to an existing manhole.

B. CLIENT (MUNICIPALITY) INFORMATION (See Section B of instructions)

Municipality Name	County	City	Boro	Twp
West Hempfield	Lancaster	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Municipality Contact Individual - Last Name	First Name	MI	Suffix	Title
Stern	Andrew			Township Manager
Additional Individual Last Name	First Name	MI	Suffix	Title

Municipality Mailing Address Line 1	Mailing Address Line 2
West Hempfield Township	3476 Marietta Avenue
Address Last Line -- City	State ZIP+4
Lancaster	PA 17601

Area Code + Phone + Ext.	FAX (optional)	Email (optional)
717-285-5554 ex.138		manager@westhempfield.org

C. SITE INFORMATION (See Section C of instructions)

Site (Land Development or Project) Name

620 Sycamore Drive

Site Location Line 1

620 Sycamore Drive

Site Location Line 2

Site Location Last Line -- City

Columbia

State

Pa

ZIP+4

17512

Latitude

40.05527

Longitude

-76.45483

Detailed Written Directions to Site From US-30 take the Prospect Rd. exit and head north for approximately 1 mile. Turn right onto Concordia Road, then after 0.4 mile turn left onto Vista Road. After 0.1 mile turn left onto Sycamore Drive and the destination will be straight ahead before Sycamore Drive turns to the right.

Description of Site 620 Sycamore Drive is a wooded site with a portion of Mud Lake nestled at the bottom of the slope. The proposed project will add two roads, one connecting Sycamore Drive and Pitney Road. 100 Single family lots will be subdivided and developed on the site. One lot will contain the proposed pump station and two open space lots will remain on the site. A pump station to service the new lots will be added to the east portion of the site.

Site Contact (Developer/Owner)

Last Name

Clark

First Name

Gabe

MI Suffix

Phone

717-779-5120

Ext.

Site Contact Title

Site Contact Firm (if none, leave blank)

620 Sycamore Drive, LLC

FAX

Email

gclark@catacomm.com

Mailing Address Line 1

One Tower Bridge

Mailing Address Line 2

100 Front Street, Suite 560

Mailing Address Last Line -- City

West Conshohocken

State

Pa

ZIP+4

19428

D. PROJECT CONSULTANT INFORMATION (See Section D of instructions)

Last Name

Helwig

First Name

Christopher

MI Suffix

Title

Project Landscape Architect

Consulting Firm Name

RGS Associates

Mailing Address Line 1

221 West Philadelphia Street

Mailing Address Line 2

Suite 108E

Address Last Line -- City

York

State

PA

ZIP+4

17401

Country

United States

Email

chelwig@rgsassociates.com

Area Code + Phone

717-854-3910

Ext.

Area Code + FAX

E. AVAILABILITY OF DRINKING WATER SUPPLY

The project will be provided with drinking water from the following source: (Check appropriate box)

- Individual wells or cisterns.
- A proposed public water supply.
- An existing public water supply.

If existing public water supply is to be used, provide the name of the water company and attach documentation from the water company stating that it will serve the project.

Name of water company: Columbia Water

F. PROJECT NARRATIVE (See Section F of instructions)

- A narrative has been prepared as described in Section F of the instructions and is attached.

The applicant may choose to include additional information beyond that required by Section F of the

instructions.

G. PROPOSED WASTEWATER DISPOSAL FACILITIES (See Section G of instructions)

Check all boxes that apply, and provide information on collection, conveyance and treatment facilities and EDU's served. This information will be used to determine consistency with Chapter 93 (relating to wastewater treatment requirements).

1. COLLECTION SYSTEM

a. Check appropriate box concerning collection system

- New collection system Pump Station Force Main
 Grinder pump(s) Extension to existing collection system Expansion of existing facility

Clean Streams Law Permit Number _____

b. Answer questions below on collection system

Number of EDU's and proposed connections to be served by collection system. EDU's 100

Connections 1

Name of:

existing collection or conveyance system Existing Manhole in Horizon Drive

owner LASA

existing interceptor Mountville Interceptor

owner LASA

2. WASTEWATER TREATMENT FACILITY

Check all boxes that apply, and provide information on collection, conveyance and treatment facilities and EDU's served. This information will be used to determine consistency with Chapter(s) 91 (relating to general provisions), 92 (relating to national Pollution Discharge Elimination System permitting, monitoring and compliance) and 93 (relating to water quality standards).

a. Check appropriate box and provide requested information concerning the treatment facility

- New facility Existing facility Upgrade of existing facility Expansion of existing facility

Name of existing facility Susquehanna Water Pollution Control Facility

NPDES Permit Number for existing facility PA0042269

Clean Streams Law Permit Number _____

Location of discharge point for a new facility. Latitude _____ Longitude _____

b. The following certification statement must be completed and signed by the wastewater treatment facility permittee or their representative.

As an authorized representative of the permittee, I confirm that the Susquehanna Water Pollution Control Facility

(Name from above) sewage treatment facilities can accept sewage flows from this project without adversely affecting the facility's ability to achieve all applicable technology and water quality based effluent limits (see Section I) and conditions contained in the NPDES permit identified above.

Name of Permittee Agency, Authority, Municipality Lancaster Area Sewer Authority

Name of Responsible Agent _____

Agent Signature _____ Date _____

(Also see Section I. 4.)

G. PROPOSED WASTEWATER DISPOSAL FACILITIES (Continued)

3. PLOT PLAN

The following information is to be submitted on a plot plan of the proposed subdivision.

- a. Existing and proposed buildings.
- b. Lot lines and lot sizes.
- c. Adjacent lots.
- d. Remainder of tract.
- e. Existing and proposed sewerage facilities. Plot location of discharge point, land application field, spray field, COLDS, or LVCOLDS if a new facility is proposed.
- f. Show tap-in or extension to the point of connection to existing collection system (if applicable).
- g. Existing and proposed water supplies and surface water (wells, springs, ponds, streams, etc.)
- h. Existing and proposed rights-of-way.
- i. Existing and proposed buildings, streets, roadways, access roads, etc.
- j. Any designated recreational or open space area.
- k. Wetlands - from National Wetland Inventory Mapping and USGS Hydric Soils Mapping.
- l. Flood plains or Flood prone areas, floodways, (Federal Flood Insurance Mapping)
- m. Prime Agricultural Land.
- n. Any other facilities (pipelines, power lines, etc.)
- o. Orientation to north.
- p. Locations of all site testing activities (soil profile test pits, slope measurements, permeability test sites, background sampling, etc. (if applicable).
- q. Soils types and boundaries when a land based system is proposed.
- r. Topographic lines with elevations when a land based system is proposed

4. WETLAND PROTECTION

YES NO

- a. Are there wetlands in the project area? If yes, ensure these areas appear on the plot plan as shown in the mapping or through on-site delineation.
- b. Are there any construction activities (encroachments, or obstructions) proposed in, along, or through the wetlands? If yes, identify any proposed encroachments on wetlands and identify whether a General Permit or a full encroachment permit will be required. If a full permit is required, address time and cost impacts on the project. Note that wetland encroachments should be avoided where feasible. Also note that a feasible alternative **MUST BE SELECTED** to an identified encroachment on an exceptional value wetland as defined in Chapter 105. Identify any project impacts on streams classified as HQ or EV and address impacts of the permitting requirements of said encroachments on the project.

5. PRIME AGRICULTURAL LAND PROTECTION

YES NO

- Will the project involve the disturbance of prime agricultural lands?
If yes, coordinate with local officials to resolve any conflicts with the local prime agricultural land protection program. The project must be consistent with such municipal programs before the sewage facilities planning module package may be submitted to DEP.
If no, prime agricultural land protection is not a factor to this project.
- Have prime agricultural land protection issues been settled?

6. HISTORIC PRESERVATION ACT

YES NO

- Sufficient documentation is attached to confirm that this project is consistent with DEP Technical Guidance 012-0700-001 *Implementation of the PA State History Code* (available online at the DEP website at www.dep.state.pa.us, select "subject" then select "technical guidance"). As a minimum this includes copies of the completed Cultural Resources Notice

(CRN), a return receipt for its submission to the PHMC and the PHMC review letter.

7. PROTECTION OF RARE, ENDANGERED OR THREATENED SPECIES

Check one:

- The "Pennsylvania Natural Diversity Inventory (PNDI) Project Environmental Review Receipt" resulting from my search of the PNDI database and all supporting documentation from jurisdictional agencies (when necessary) is/are attached.
- A completed "Pennsylvania Natural Diversity Inventory (PNDI) Project Planning & Environmental Review Form," (PNDI Form) available at www.naturalheritage.state.pa.us , and all required supporting documentation is attached. I request DEP staff to complete the required PNDI search for my project. I realize that my planning module will be considered incomplete upon submission to the Department and that the DEP review will not begin, and that processing of my planning module will be delayed, until a "PNDI Project Environmental Review Receipt" and all supporting documentation from jurisdictional agencies (when necessary) is/are received by DEP.

Applicant or Consultant Initials _____.

H. ALTERNATIVE SEWAGE FACILITIES ANALYSIS (See Section H of instructions)

- An alternative sewage facilities analysis has been prepared as described in Section H of the attached instructions and is attached to this component.
The applicant may choose to include additional information beyond that required by Section H of the attached instructions.

I. COMPLIANCE WITH WATER QUALITY STANDARDS AND EFFLUENT LIMITATIONS (See Section I of instructions) (Check and complete all that apply.)

1. Waters designated for Special Protection

- The proposed project will result in a new or increased discharge into special protection waters as identified in Title 25, Pennsylvania Code, Chapter 93. The Social or Economic Justification (SEJ) required by Section 93.4c. is attached.

2. Pennsylvania Waters Designated As Impaired

- The proposed project will result in a new or increased discharge of a pollutant into waters that DEP has identified as being impaired by that pollutant. A pre-planning meeting was held with the appropriate DEP regional office staff to discuss water quality based discharge limitations.

3. Interstate and International Waters

- The proposed project will result in a new or increased discharge into interstate or international waters. A pre-planning meeting was held with the appropriate DEP regional office staff to discuss effluent limitations necessary to meet the requirements of the interstate or international compact.

4. Tributaries To The Chesapeake Bay

- The proposed project result in a new or increased discharge of sewage into a tributary to the Chesapeake Bay. This proposal for a new sewage treatment facility or new flows to an existing facility includes total nitrogen and total phosphorus in the following amounts: _____ pounds of TN per year, and _____ pounds of TP per year. Based on the process design and effluent limits, the total nitrogen treatment capacity of the wastewater treatment facility is _____ pounds per year and the total phosphorus capacity is _____ pounds per year as determined by the wastewater treatment facility permittee. The permittee has determined that the additional TN and TP to be contributed by this project (as modified by credits and/or offsets to be provided) will not cause the discharge to exceed the annual total mass limits for these parameters. Documentation of compliance with nutrient allocations is attached.

Name of Permittee Agency, Authority, Municipality Lancaster Area Sewer Authority

Initials of Responsible Agent (See Section G 2.b) _____

See *Special Instructions* (Form 3800-FM-BPNPSM0353-1) for additional information on Chesapeake Bay watershed requirements.

☒ J. CHAPTER 94 CONSISTENCY DETERMINATION (See Section J of instructions)

Projects that propose the use of existing municipal collection, conveyance or wastewater treatment facilities, or the construction of collection and conveyance facilities to be served by existing municipal wastewater treatment facilities must be consistent with the requirements of Title 25, Chapter 94 (relating to Municipal Wasteload Management). If not previously included in Section F, include a general map showing the path of the sewage to the treatment facility. If more than one municipality or authority will be affected by the project, please obtain the information required in this section for each. Additional sheets may be attached for this purpose.

1. Project Flows 23800 gpd
2. Total Sewage Flows to Facilities (pathway from point of origin through treatment plant)

When providing "treatment facilities" sewage flows, use Annual Average Daily Flow for "average" and Maximum Monthly Average Daily Flow for "peak" in all cases. For "peak flows" in "collection" and "conveyance" facilities, indicate whether these flows are "peak hourly flow" or "peak instantaneous flow" and how this figure was derived (i.e., metered, measured, estimated, etc.).

- a. Enter average and peak sewage flows for each proposed or existing facility as designed or permitted.
- b. Enter the average and peak sewage flows for the most restrictive sections of the existing sewage facilities.
- c. Enter the average and peak sewage flows, projected for 5 years (2 years for pump stations) through the most restrictive sections of the existing sewage facilities. Include existing, proposed (this project) and future project (other approved projects) flows.

To complete the table, refer to the instructions, Section J.

	a. Design and/or Permitted Capacity (gpd)		b. Present Flows (gpd)		c. Projected Flows in 5 years (gpd) (2 years for P.S.)	
	Average	Peak	Average	Peak	Average	Peak
Collection						
Conveyance						
Treatment						

3. Collection and Conveyance Facilities

The questions below are to be answered by the sewer authority, municipality, or agency responsible for completing the Chapter 94 report for the collection and conveyance facilities. These questions should be answered in coordination with the latest Chapter 94 annual report and the above table. The individual(s) signing below must be legally authorized to make representation for the organization.

YES NO

- a. This project proposes sewer extensions or tap-ins. Will these actions create a hydraulic overload within five years on any existing collection or conveyance facilities that are part of the system?

If yes, this sewage facilities planning module will not be accepted for review by the municipality, delegated local agency and/or DEP until all inconsistencies with Chapter 94 are resolved or unless there is an approved Corrective Action Plan (CAP) granting an allocation for this project. A letter granting allocations to this project under the CAP must be attached to the module package.

If no, a representative of the sewer authority, municipality, or agency responsible for completing the Chapter 94 report for the collection and conveyance facilities must sign below to indicate that the collection and conveyance facilities have adequate capacity and are able to provide service to the proposed development in accordance with both §71.53(d)(3) and Chapter 94 requirements and that this proposal will not affect that status.

b. Collection System

Name of Agency, Authority, Municipality Lancaster Area Sewer Authority

Name of Responsible Agent _____

Agent Signature _____ Date _____

J. CHAPTER 94 CONSISTENCY DETERMINATION (See Section J of instructions)

c. Conveyance System

Name of Agency, Authority, Municipality Lancaster Area Sewer Authority

Name of Responsible Agent _____

Agent Signature _____

Date _____

4. Treatment Facility

The questions below are to be answered by a representative of the facility permittee in coordination with the information in the table and the latest Chapter 94 report. The individual signing below must be legally authorized to make representation for the organization.

YES NO

- a. This project proposes the use of an existing wastewater treatment plant for the disposal of sewage. Will this action create a hydraulic or organic overload within 5 years at that facility?

If yes, this planning module for sewage facilities will not be reviewed by the municipality, delegated local agency and/or DEP until this inconsistency with Chapter 94 is resolved or unless there is an approved CAP granting an allocation for this project. A letter granting allocations to this project under the CAP must be attached to the planning module.

If no, the treatment facility permittee must sign below to indicate that this facility has adequate treatment capacity and is able to provide wastewater treatment services for the proposed development in accordance with both §71.53(d)(3) and Chapter 94 requirements and that this proposal will not impact that status.

- b. Name of Agency, Authority, Municipality _____

Name of Responsible Agent _____

Agent Signature _____

Date _____

K. TREATMENT AND DISPOSAL OPTIONS (See Section K of instructions)

This section is for land development projects that propose construction of wastewater treatment facilities. Please note that, since these projects require permits issued by DEP, these projects may **NOT** receive final planning approval from a delegated local agency. Delegated local agencies must send these projects to DEP for final planning approval.

Check the appropriate box indicating the selected treatment and disposal option.

1. Spray irrigation (other than individual residential spray systems (IRSIS)) or other land application is proposed, and the information requested in Section K.1. of the planning module instructions are attached.
2. Recycle and reuse is proposed and the information requested in Section K-2 of the planning module instructions is attached.
3. A discharge to a dry stream channel is proposed, and the information requested in Section K.3. of the planning module instructions are attached.
4. A discharge to a perennial surface water body is proposed, and the information requested in Section K.4. of the planning module instructions are attached.

L. PERMEABILITY TESTING (See Section L of instructions)

- The information required in Section L of the instructions is attached.

M. PRELIMINARY HYDROGEOLOGIC STUDY (See Section M of instructions)

- The information required in Section M of the instructions is attached.

N. DETAILED HYDROGEOLOGIC STUDY (See Section N of instructions)

The detailed hydrogeologic information required in Section N. of the instructions is attached.

O. SEWAGE MANAGEMENT (See Section O of instructions)

(1-3 for completion by the developer(project sponser), 4-5 for completion by the non-municipal facility agent and 6 for completion by the municipality)

Yes No

1. Is connection to, or construction of, a DEP permitted, non-municipal sewage facility or a local agency permitted, community onlot sewage facility proposed.

If Yes, respond to the following questions, attach the supporting analysis, and an evaluation of the options available to assure long-term proper operation and maintenance of the proposed non-municipal facilities. If No, skip the remainder of Section O.

2. Project Flows _____ gpd

Yes No

3. Is the use of nutrient credits or offsets a part of this project?

If yes, attach a letter of intent to purchase the necessary credits and describe the assurance that these credits and offsets will be available for the remaining design life of the non-municipal sewage facility;

(For completion by non-municipal facility agent)

4. Collection and Conveyance Facilities

The questions below are to be answered by the organization/individual responsible for the non-municipal collection and conveyance facilities. The individual(s) signing below must be legally authorized to make representation for the organization.

Yes No

- a. If this project proposes sewer extensions or tap-ins, will these actions create a hydraulic overload on any existing collection or conveyance facilities that are part of the system?

If yes, this sewage facilities planning module will not be accepted for review by the municipality, delegated local agency and/or DEP until this issue is resolved.

If no, a representative of the organization responsible for the collection and conveyance facilities must sign below to indicate that the collection and conveyance facilities have adequate capacity and are able to provide service to the proposed development in accordance with Chapter 71 §71.53(d)(3) and that this proposal will not affect that status.

- b. Collection System

Name of Responsible Organization _____

Name of Responsible Agent _____

Agent Signature _____

Date _____

- c. Conveyance System

Name of Responsible Organization _____

Name of Responsible Agent _____

Agent Signature _____

Date _____

5. Treatment Facility

The questions below are to be answered by a representative of the facility permittee. The individual signing below must be legally authorized to make representation for the organization.

Yes No

- a. If this project proposes the use of an existing non-municipal wastewater treatment plant for the disposal of sewage, will this action create a hydraulic or organic overload at that facility?

If yes, this planning module for sewage facilities will not be reviewed by the municipality, delegated local agency and/or DEP until this issue is resolved.

If no, the treatment facility permittee must sign below to indicate that this facility has adequate treatment capacity and is able to provide wastewater treatment services for the proposed development in accordance with §71.53(d)(3) and that this proposal will not impact that status.

- b. Name of Facility _____
Name of Responsible Agent _____
Agent Signature _____
Date _____

(For completion by the municipality)

6. The **SELECTED OPTION** necessary to assure long-term proper operation and maintenance of the proposed non-municipal facilities is clearly identified with documentation attached in the planning module package.

P. PUBLIC NOTIFICATION REQUIREMENT (See Section P of instructions)

This section must be completed to determine if the applicant will be required to publish facts about the project in a newspaper of general circulation to provide a chance for the general public to comment on proposed new land development projects. This notice may be provided by the applicant or the applicant's agent, the municipality or the local agency by publication in a newspaper of general circulation within the municipality affected. Where an applicant or an applicant's agent provides the required notice for publication, the applicant or applicant's agent shall notify the municipality or local agency and the municipality and local agency will be relieved of the obligation to publish. The required content of the publication notice is found in Section P of the instructions.

To complete this section, each of the following questions must be answered with a "yes" or "no". Newspaper publication is required if any of the following are answered "yes".

Yes No


1. Does the project propose the construction of a sewage treatment facility ?
2. Will the project change the flow at an existing sewage treatment facility by more than 50,000 gallons per day?
3. Will the project result in a public expenditure for the sewage facilities portion of the project in excess of \$100,000?
4. Will the project lead to a major modification of the existing municipal administrative organizations within the municipal government?
5. Will the project require the establishment of *new* municipal administrative organizations within the municipal government?
6. Will the project result in a subdivision of 50 lots or more? (onlot sewage disposal only)
7. Does the project involve a major change in established growth projections?
8. Does the project involve a different land use pattern than that established in the municipality's Official Sewage Plan?

P. PUBLIC NOTIFICATION REQUIREMENT cont'd. (See Section P of instructions)

9. Does the project involve the use of large volume onlot sewage disposal systems (Flow > 10,000 gpd)?
10. Does the project require resolution of a conflict between the proposed alternative and consistency requirements contained in §71.21(a)(5)(i), (ii), (iii)?
11. Will sewage facilities discharge into high quality or exceptional value waters?
- Attached is a copy of:
- the public notice,
 - all comments received as a result of the notice,
 - the municipal response to these comments.
- No comments were received. A copy of the public notice is attached.

Q. FALSE SWEARING STATEMENT (See Section Q of instructions)

I verify that the statements made in this component are true and correct to the best of my knowledge, information and belief. I understand that false statements in this component are made subject to the penalties of 18 PA C.S.A. §4904 relating to unsworn falsification to authorities.

Christopher Helwig	
Name (Print)	Signature
Project Landscape Architect	2/16/2022
Title	Date
221 W. Philadelphia Street, York, PA 17401	717-854-3910
Address	Telephone Number

R. REVIEW FEE (See Section R of instructions)

The Sewage Facilities Act establishes a fee for the DEP planning module review. DEP will calculate the review fee for the project and invoice the project sponsor **OR** the project sponsor may attach a self-calculated fee payment to the planning module prior to submission of the planning package to DEP. (Since the fee and fee collection procedures may vary if a "delegated local agency" is conducting the review, the project sponsor should contact the "delegated local agency" to determine these details.) Check the appropriate box.

- I request DEP calculate the review fee for my project and send me an invoice for the correct amount. I understand DEP's review of my project will not begin until DEP receives the correct review fee from me for the project.
- I have calculated the review fee for my project using the formula found below and the review fee guidance in the instructions. I have attached a check or money order in the amount of \$5150 payable to "Commonwealth of PA, DEP". Include DEP code number on check. I understand DEP will not begin review of my project unless it receives the fee and determines the fee is correct. If the fee is incorrect, DEP will return my check or money order, send me an invoice for the correct amount. I understand DEP review will NOT begin until I have submitted the correct fee.
- I request to be exempt from the DEP planning module review fee because this planning module creates **only** one new lot and is the **only** lot subdivided from a parcel of land as that land existed on December 14, 1995. I realize that subdivision of a second lot from this parcel of land shall disqualify me from this review fee exemption. I am furnishing the following deed reference information in support of my fee exemption.

County Recorder of Deeds for _____ County, Pennsylvania

Deed Volume _____ Book Number _____

Page Number _____ Date Recorded _____

R. REVIEW FEE (continued)

Formula:

1. For a new collection system (with or without a Clean Streams Law Permit), a collection system extension, or individual tap-ins to an existing collection system use this formula.

$$\#103 \text{ _____ Lots (or EDUs) X } \$50.00 = \$ \underline{5150.00}$$

The fee is based upon:

- The number of lots created or number of EDUs whichever is higher.
- For community sewer system projects, one EDU is equal to a sewage flow of 400 gallons per day.

2. For a surface or subsurface discharge system, use the appropriate one of these formulae.

- A. A new surface discharge greater than 2000 gpd will use a flat fee:

\$ 1,500 per submittal (non-municipal)
\$ 500 per submittal (municipal)

- B. An increase in an existing surface discharge will use:

$$\# \text{ _____ Lots (or EDUs) X } \$35.00 = \$ \text{ _____}$$

to a maximum of \$ 1,500 per submittal (non-municipal) or \$ 500 per submittal (municipal)

The fee is based upon:

- The number of lots created or number of EDUs whichever is higher.
- For community sewage system projects one EDU is equal to a sewage flow of 400 gallons per day.
- For non-single family residential projects, EDUs are calculated using projected population figures

- C. A sub-surface discharge system that requires a permit under The Clean Streams Law will use a flat fee:

\$ 1,500 per submittal (non-municipal)
\$ 500 per submittal (municipal)

PROJECT NARRATIVE
For
620 Sycamore Drive
RGS Project #: 2017D62-002

620 Sycamore Drive Associates is proposing a new residential development on property located at 620 Sycamore Drive, Columbia, Lancaster County. The property is an existing wooded lot, located between Sycamore Drive on the south and Pitney Road along the north. A pond exists on the property with no known outlet. There are currently no structures located on the property.

The total site area of the property is approximately 56.0 acres. Approximately 38.0 acres will be disturbed as part of the development. The site is designed according to the Open Space design option (Conditional use approved on 3/5/2019) within the R-2 zoning district of West Hempfield Township. The project consists of 100 total new residential dwelling units (single family homes), 2 open space lots, and one lot for the proposed pump station. All units are proposed to be connected to existing public sewer owned by the Lancaster Area Sewer Authority (LASA) via a pump station and force main currently being designed which will be directed to the east along Sycamore Drive, extending to existing LASA owned sewer systems. The proposed flow from the site is calculated at 23,800 GPD. Based on the LASA flow rate of 238 GPD/EDU, 100 EDU's are proposed. Refer to the attached summary for how the flows were calculated. The pump station has been designed to handle additional offsite flows. The information regarding these flows will be submitted under a separate planning module for approval.

The noted sewer force main will be directed to the east along Sycamore Drive and Vista Road, then south along Hempfield Hill Road, and east along Horizon Drive to an existing system owned and operated by LASA. The existing system ultimately runs to the Susquehanna Water Pollution Control Facility, see the attached exhibit showing the assumed flow path.

SEWER USAGE COMPUTATIONS:

620 Sycamore Drive
RGS Project No.: 2017D62-002

Project Requirements:

Residential: Single Family Homes
Total Units: 100

Discussion:

- 1) Residential Use –
 - 1 EDU per residence.

Type of Unit	Total Gallons/Day	
Residential	238	
	23,800	Subtotal

Conclusions:

This project will require a total of **100 EDU's** (23,800 gallon per day) of sewer capacity, assuming a rate of 238 gallons per day/EDU.

ASSUMED FLOW PATH EXHIBIT

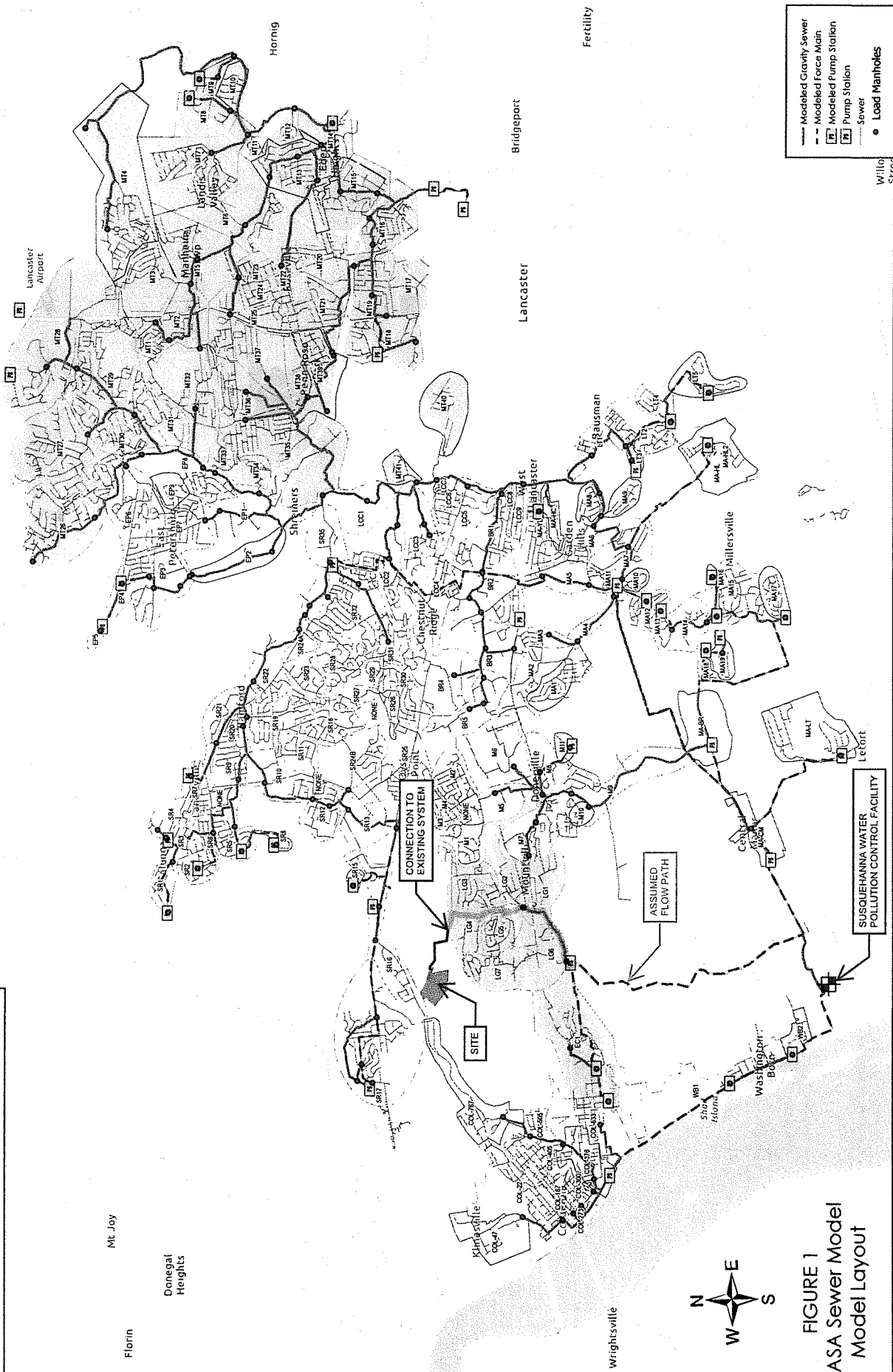


FIGURE 1
LASA Sewer Model
Model Layout

(ELIZABETHTOWN)

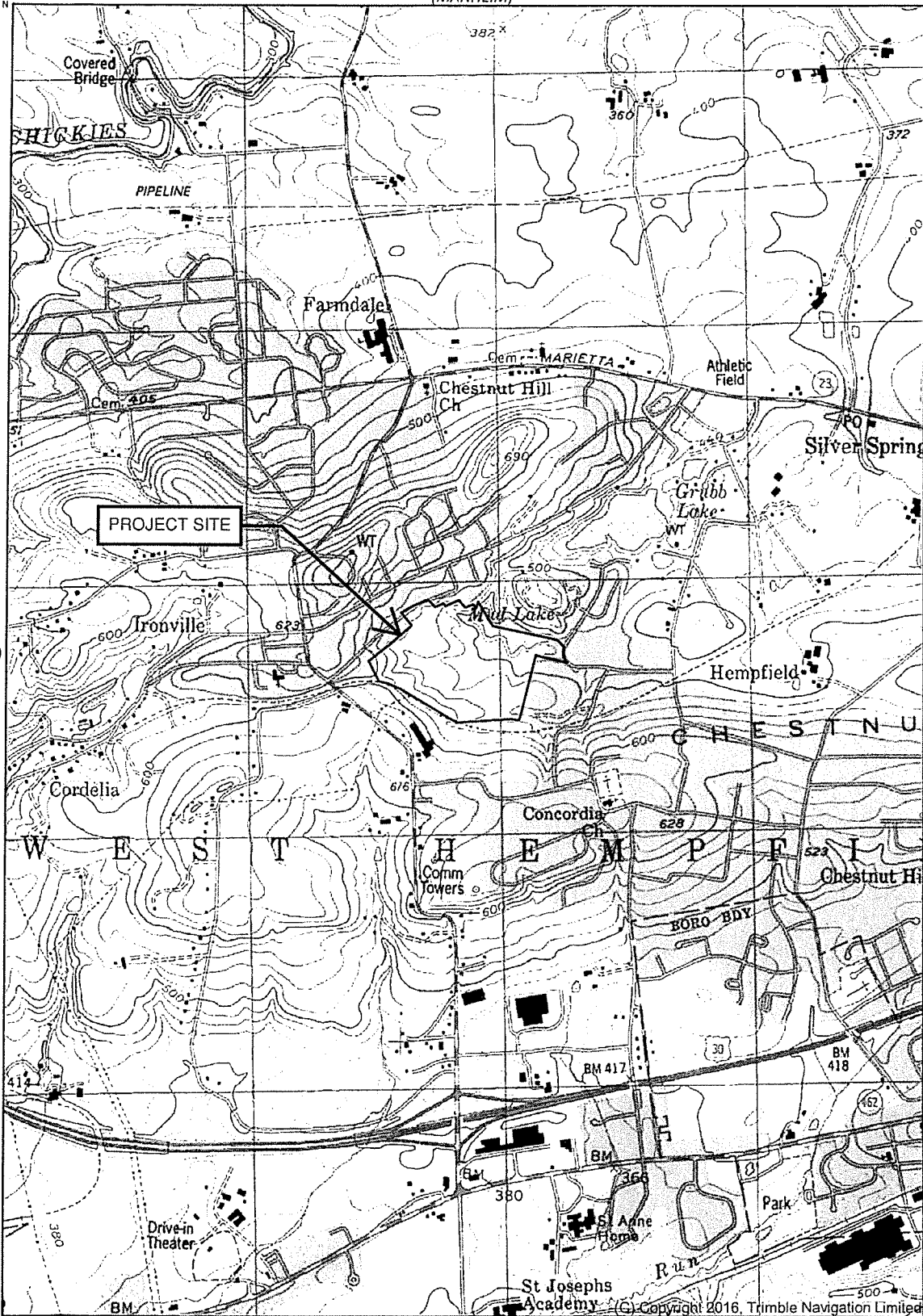
COLUMBIA EAST QUADRANGLE
PENNSYLVANIA
TOPOGRAPHIC SERIES

(LITITZ)

076° 28' 34.7332" W
040° 04' 42.5240" N

(MANHEIM)

076° 26' 00.1987" W
040° 04' 42.5240" N



(COLUMBIA WEST)

(LANCASTER)

040° 01' 54.8885" N
076° 28' 34.7332" W

040° 01' 54.8885" N
076° 26' 00.1987" W

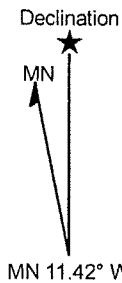
(RED LION)

(CONESTOGA)

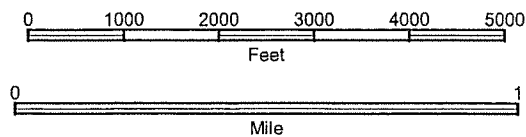
Produced by MyTopo Terrain Navigator
Topography based on USGS 1:24,000 Maps

North American 1983 Datum (NAD83)
[Projection] Projection

To place on the predicted North American 1927
move the projection lines 11M N and 27M E



(SAFE HARBOR)
SCALE 1:24000



CONTOUR INTERVAL 20 FT
[BASE MAP VERTICAL DATUM]





Lancaster Area Sewer Authority
130 Centerville Rd.
Lancaster, PA 17603-4007

Tel. 717-299-4843
Fax: 717-299-9658
Website: www.lasa.org

October 13, 2021

Mr. Todd Kurl
RGS Associates, Inc.
221 W. Philadelphia Street, Suite 108E
York, PA 17401

Reference: 620 Sycamore Drive
West Hempfield Township
Planning Module Exemption Request
LASA Log #18-103

Dear Mr. Kurl,

We are in receipt of your October 7, 2021 transmittal concerning a planning module exemption for the above referenced project. The proposed flow that was reserved on March 16, 2021 has been indicated for 100 residential dwelling units of sewage flow equivalent to 23,800 gpd using LASA's conversion factor.

The Lancaster Area Sewer Authority is not aware of any facilities that will be overloaded within the next five years by the addition of this proposed connection.

The Lancaster Area Sewer Authority will not object to the appropriate municipality approving the Planning Module Exemption Application Mailer for the project.

If you have any questions, please call.

Sincerely,

A handwritten signature in black ink, appearing to read 'S. Fertich', is written over a white background.

Scot A. Fertich, PE
Engineering Director

SAF/pjh

Enclosure

cc: Michael A. Kyle



H. Alternative Sewage Facilities Analysis

The chosen method of disposal is to convey the flows to the pump station located along Sycamore Drive. From there the flows will run via force main to an existing manhole within Horizon drive. The end destination is the Susquehanna Water Pollution Control Facility operated by the Lancaster Area Sewer Authority. The project contains a total 100 EDUs generating a daily flow estimated at 23,800 GPD per LASA's flow rate of 238 GPD/EDU. This method is proposed as an ultimate method of disposal.

The adjacent properties are residential. The properties immediately adjacent to the site are using on lot disposal systems. This method is an ultimate use.

Different destinations were considered and studied in coordination with LASA. The decided upon destination was determined to be the best solution.

It has been confirmed that the existing conveyance and treatment facilities have adequate capacity to treat the proposed flows.

**Columbia
WATER
Company**



August 19, 2021

Todd Kurl, RLA
RGS Associates
53 West James Street
Lancaster, PA 17603

RE: 620 Sycamore Drive – West Hempfield Township
Conditional Capacity Letter

Dear Mr. Kurl:

This letter will confirm that the Columbia Water Company has adequate capacity to serve the referenced project, which consists of 100 single family detached dwellings proposed to be located between Pitney Road and Sycamore Drive in West Hempfield Township. Please consider this a conditional water utility capacity letter pending compliance with the Columbia Water Company's administrative and technical requirements. This capacity is contingent upon installing water facilities in accordance with the Water Company's standards. It will be necessary to connect to the existing water mains located on Hempfield Hill Road and the Ironville Pike such that no dead-end mains are created.

The water system improvements will need to be installed in accordance with approved water utility design drawings, the Applicant will be required to enter into a Water Main Extension Agreement and comply with all technical and administrative requirements.

If you require additional information, please feel free to contact me.

Sincerely,

David T. Lewis, P.E.
Vice President and
General Manager

Columbia Water Company

220 Locust Street □ P.O. Box 350 □ Columbia, PA 17512
Phone: 717-684-2188 □ Fax: 717-684-4566



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF CLEAN WATER

DEP Code #:
B3-36960-320-3

**SEWAGE FACILITIES PLANNING MODULE
COMPONENT 4A - MUNICIPAL PLANNING AGENCY REVIEW**

Note to Project Sponsor: To expedite the review of your proposal, one copy of your completed planning module package and one copy of this *Planning Agency Review Component* should be sent to the local municipal planning agency for their comments.

SECTION A. PROJECT NAME (See Section A of instructions)

Project Name

620 Sycamore Drive

SECTION B. REVIEW SCHEDULE (See Section B of instructions)

1. Date plan received by municipal planning agency 3/23/2022

2. Date review completed by agency 3/31/2022

SECTION C. AGENCY REVIEW (See Section C of instructions)

- | Yes | No | |
|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Is there a municipal comprehensive plan adopted under the Municipalities Planning Code (53 P.S. 10101, <i>et seq.</i>)? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Is this proposal consistent with the comprehensive plan for land use?
If no, describe the inconsistencies _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Is this proposal consistent with the use, development, and protection of water resources?
If no, describe the inconsistencies _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4. Is this proposal consistent with municipal land use planning relative to Prime Agricultural Land Preservation? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 5. Does this project propose encroachments, obstructions, or dams that will affect wetlands?
If yes, describe impacts _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Will any known historical or archaeological resources be impacted by this project?
If yes, describe impacts _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Will any known endangered or threatened species of plant or animal be impacted by this project?
If yes, describe impacts _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. Is there a municipal zoning ordinance? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Is this proposal consistent with the ordinance?
If no, describe the inconsistencies _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10. Does the proposal require a change or variance to an existing comprehensive plan or zoning ordinance? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 11. Have all applicable zoning approvals been obtained? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 12. Is there a municipal subdivision and land development ordinance? |

SECTION C. AGENCY REVIEW (continued)

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	13. Is this proposal consistent with the ordinance? If no, describe the inconsistencies _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	14. Is this plan consistent with the municipal Official Sewage Facilities Plan? If no, describe the inconsistencies _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	15. Are there any wastewater disposal needs in the area adjacent to this proposal that should be considered by the municipality? <u>None at this time, but expected in the future, We have asked the developer to plan</u> If yes, describe <u>for this for the future.</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	16. Has a waiver of the sewage facilities planning requirements been requested for the residual tract of this subdivision?
<input type="checkbox"/>	<input type="checkbox"/>	If yes, is the proposed waiver consistent with applicable ordinances? If no, describe the inconsistencies _____
17. Name, title and signature of planning agency staff member completing this section: Name: <u>Andrew Stern, AICP</u> Title: <u>Township Manager/Planner</u> Signature: <u><i>Andrew B. Stern</i></u> Date: <u>3/31/2022</u> Name of Municipal Planning Agency: <u>West Hempfield Twp Planning Dept.</u> Address <u>3476 Marietta Avenue, Lancaster, PA 17601</u> Telephone Number: <u>717-285-5554</u>		

SECTION D. ADDITIONAL COMMENTS (See Section D of instructions)

This component does not limit municipal planning agencies from making additional comments concerning the relevancy of the proposed plan to other plans or ordinances. If additional comments are needed, attach additional sheets.

The planning agency must complete this component within 60 days.

This component and any additional comments are to be returned to the applicant.



Planning Department

150 North Queen Street | Suite 320
Lancaster, Pennsylvania 17603
Phone: 717-299-8333

www.lancastercountyp Planning.org

County Commissioners

Ray D'Agostino, Chairman
Joshua G. Parson, Vice Chairman
John B. Trescot, Commissioner

Executive Director

Scott W. Standish

March 23, 2022

Todd Kurl
RGS Associates, Inc.
221 West Philadelphia Street, Suite 108E
York, PA 17401

RE: Component 4B Module
DEP Code No.: **B3-36960-320-3**
Project Name: **620 Sycamore Drive**
Planning Module #: **PM22-20**
Municipality: **West Hempfield Township**

Enclosed is the Component 4B Sewage Planning Module form for the above referenced project.

Please contact me if you have any questions. Thank you.

Sincerely,

Alex W. Rohrbaugh, AICP
Senior Planner

Enclosure

Copy: Andrew Stern, Manager, West Hempfield Township

S:\COMMUNPL\STAFF REVIEWS\DEP MODULES\2022\PM22-20, 620 Sycamore Drive AWR.docx





**SEWAGE FACILITIES PLANNING MODULE
 COMPONENT 4B - COUNTY PLANNING AGENCY REVIEW
 (or Planning Agency with Areawide Jurisdiction)**

Note to Project Sponsor: To expedite the review of your proposal, one copy of your completed planning package and one copy of this *Planning Agency Review Component* should be sent to the existing county planning agency or planning agency with areawide jurisdiction for their comments.

SECTION A. PROJECT NAME (See Section A of instructions)

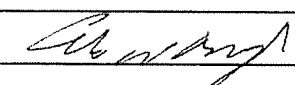
Project Name
 620 Sycamore Drive

SECTION B. REVIEW SCHEDULE (See Section B of instructions)

1. Date plan received by county planning agency. February 22, 2022
2. Date plan received by planning agency with areawide jurisdiction. February 22, 2022
 Agency name. Lancaster County Planning Department
3. Date review completed by agency. March 23, 2022

SECTION C. AGENCY REVIEW (See Section C of instructions)

- | Yes | No | |
|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Is there a county or areawide comprehensive plan adopted under the Municipalities Planning Code (53 P.S. 10101 <i>et seq.</i>)? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Is this proposal consistent with the comprehensive plan for land use? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Does this proposal meet the goals and objectives of the plan?
If no, describe goals and objectives that are not met _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4. Is this proposal consistent with the use, development, and protection of water resources?
If no, describe inconsistency _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. Is this proposal consistent with the county or areawide comprehensive land use planning relative to Prime Agricultural Land Preservation?
If no, describe inconsistencies: _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Does this project propose encroachments, obstructions, or dams that will affect wetlands?
If yes, describe impact _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Will any known historical or archeological resources be impacted by this project?
If yes, describe impacts. _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 8. Will any known endangered or threatened species of plant or animal be impacted by the development project? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9. Is there a county or areawide zoning ordinance? |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Does this proposal meet the zoning requirements of the ordinance?
If no, describe inconsistencies. <u>Zoning controlled by municipality</u> |

Yes	No	SECTION C. AGENCY REVIEW (continued)	
<input type="checkbox"/>	<input type="checkbox"/>	11.	Have all applicable zoning approvals been obtained? <u>Municipality determines zoning approvals</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	12.	Is there a county or areawide subdivision and land development ordinance?
<input type="checkbox"/>	<input type="checkbox"/>	13.	Does this proposal meet the requirements of the ordinance? If no, describe which requirements are not met. <u>Municipality regulates subdivision and land development</u>
<input type="checkbox"/>	<input type="checkbox"/>	14.	Is this proposal consistent with the municipal Act 537 Official Sewage Facilities Plan? If no, describe inconsistency <u>Municipality has adopted Act 537 plan</u>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	15.	Are there any wastewater disposal needs in the area adjacent to this proposal that should be considered by the municipality? If yes, describe _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	16.	Has a waiver of the sewage facilities planning requirements been requested for the residual tract of this subdivision? If yes, is the proposed waiver consistent with applicable ordinances. If no, describe the inconsistencies _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	17.	Does the county have a stormwater management plan as required by the Stormwater Management Act? If yes, will this project plan require the implementation of storm water management measures? <u>Municipality regulates stormwater management</u>
<input type="checkbox"/>	<input type="checkbox"/>	18.	Name, Title and signature of person completing this section: Name: <u>Alex Rohrbaugh</u> Title: <u>Senior Planner</u> Signature:  Date: <u>March 23, 2022</u> Name of County or Areawide Planning Agency: <u>Lancaster County Planning Department</u> Address: <u>150 North Queen Street, Suite 320, Lancaster, PA 17603</u> Telephone Number: <u>717.299.8333</u>
SECTION D. ADDITIONAL COMMENTS (See Section D of instructions)			
This Component does not limit county planning agencies from making additional comments concerning the relevancy of the proposed plan to other plans or ordinances. If additional comments are needed, attach additional sheets.			
The county planning agency must complete this Component within 60 days. This Component and any additional comments are to be returned to the applicant.			