



COMMONWEALTH OF PENNSYLVANIA
 DEPARTMENT OF ENVIRONMENTAL PROTECTION
 OFFICE OF WATER PROGRAMS
 OFFICE OF OIL AND GAS MANAGEMENT

OFFICIAL USE ONLY	
ID #	_____
Date Received	_____
AUTH	_____
SITE	_____
CLNT	_____
APS	_____
Fee	_____
Check No.	_____
Check Date	_____

NOTICE OF INTENT (NOI) FOR COVERAGE UNDER THE EROSION AND SEDIMENT CONTROL GENERAL PERMIT (ESCGP-3) FOR EARTH DISTURBANCE ASSOCIATED WITH OIL AND GAS EXPLORATION, PRODUCTION, PROCESSING, OR TREATMENT OPERATIONS OR TRANSMISSION FACILITIES

READ THE INSTRUCTIONS PROVIDED IN THIS PERMIT APPLICATION PACKAGE BEFORE COMPLETING THIS FORM. PLEASE PRINT OR TYPE INFORMATION IN BLACK OR BLUE INK.

SECTION A. APPLICATION TYPE

Check one:

NEW RENEWAL MAJOR MODIFICATIONS (Provide ESCGP number)

PHASED (check only if applicable; *note: Most projects are not submitted as phased projects*)

Check one: EXPEDITED STANDARD

If an Expedited Review Process being requested, be advised that the Expedited Review is not available for all projects. Refer to Section D - Expedited Review Process of the ESCGP-3 NOI Instructions to determine if the project is eligible.

SECTION B. CLIENT INFORMATION

Applicant's Last Name (If applicable)	First Name	MI	Telephone No.
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Organization Name or Registered Fictitious Name	Telephone No.
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DEP Client ID No.

Headquarters Mailing Address	City	State	ZIP Code
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Email Address

Co-Applicant's Last Name (If applicable)	First Name	MI	Telephone No.
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Organization Name or Registered Fictitious Name	Telephone No.
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Address	City	State	ZIP Code
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Email Address

SECTION C. SITE INFORMATION

Is there an existing ESCGP associated with this site? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Permit No. _____					
Has a well permit application been submitted for this site? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Permit No. _____					
Does this site have a 911 address? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, _____					
Site Name					
Site Location			Site No. (if another permit has been issued for the site)		
Site Location – City				State	ZIP Code
Detailed Written Directions to Site					
Primary Location	County	Municipality	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp. <input type="checkbox"/>

SECTION D. EXPEDITED REVIEW

I. Expedited Review Eligibility	
1. Is any part of the project in an exceptional value or high quality watershed pursuant at Chapter 93 (relating to water quality standards), including EV wetlands in accordance with 25 Pa Code § 105.17.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Will the project in which the well pad will be constructed be in or on a floodplain?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Is any earth disturbance located or proposed to be located on land known to be contaminated by the release of regulated substances as defined in Section 103 of Act 2, 35 P.S. § 6026.103?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Is any earth disturbance conducted in or on areas sensitive to highly erodible conditions? 3% to 8% slope with soil K factor greater than 0.37 or 8% to 15% slope with soil K factor greater than 0.28 or 15% slope with soil K factor greater than 0.18	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Is any earth disturbance conducted in or on areas with geological formations that present a risk to public health, safety and the environment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Do any unresolved non-compliance issues exist with the applicant or the facility?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Is the project a transmission project?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If yes to any of the above questions the project is not eligible for Expedited Review; If the project is eligible for Expedited Review, all the following items must be completed.

II. Expedited Review Process

1. Is the technically and administratively complete and accurate NOI package prepared and certified by a licensed professional?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are E&S and PCSM/Site Restoration Plan drawings and narrative prepared and sealed by licensed professional? <i>(Include interim restoration details when needed)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Include a Resource Delineation Report and answer the following questions: (If applicant answers YES to any of these questions, the application is eligible.)	
a. Were all wetland resources delineated during the growing season?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. If not during the growing season, was a follow-up visit conducted during the growing season to verify/adjust boundaries and look for potentially missed resources?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Was a quality assurance field review conducted at a later date by an independent qualified wetland professional to verify boundaries and look for potentially missed resources? (If yes, attach Quality Assurance Field Review Report)	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Was a Jurisdictional Determination (JD) or Preliminary JD conducted by the US Army Corps of Engineers on the whole project? (If yes, attach Preliminary or Jurisdictional Determination Report)	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. If applicable, have you included PNDI clearance letters from applicable resource agencies?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. If the project site contains, is along, or within 100 feet of a river, stream, creek, lake, pond or reservoir, will you establish new or preserve existing riparian forest buffer at least 100 feet in width between the top of streambank or normal pool elevation of a lake, pond or reservoir and areas of earth disturbances. If no, will a waiver be obtained? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Name of Licensed Professional	
Company	
Address	
Phone	

SECTION E. PROJECT INFORMATION

1. Total Project Area/Project Site (Ac):		Total Disturbed Area (Ac):	
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Increased disturbed acreage (for permit modification only)

Fee: (For additional information regarding fees, refer to NOI Instructions #3 Permit NOI Filing Fees.) \$

2. Project Name:

3. Project Type (Check all that apply)

<input type="checkbox"/> Oil/Gas Well ¹	<input type="checkbox"/> Transmission Facility
<input type="checkbox"/> Gathering Facility	<input type="checkbox"/> Processing Facility
<input type="checkbox"/> Treatment Facility	<input type="checkbox"/> Well Development Impoundment
<input type="checkbox"/> Compressor Station	<input type="checkbox"/> Non-FERC regulated Transmission Facility
<input type="checkbox"/> Pipeline	<input type="checkbox"/> Ground/Surface Water Withdrawal Site
<input type="checkbox"/> Storage Field Facility	
<input type="checkbox"/> Other	

¹ If Oil/Gas Well; is the well conventional or unconventional? Conventional Unconventional

Project Description

Provide the date of pre-application meeting (if conducted with the Department)

4. Provide the latitude and longitude coordinates for the center of the project. The coordinates should be in Decimal degrees and North American Datum 1983. The coordinates must meet the current DEP policy regarding locational accuracy. For linear projects provide the project's termini.

Latitude (DD) . Longitude (DD) - .
 Latitude (DD) . Longitude (DD) - .
 Horizontal Collection Method: GPS Interpolated from U.S.G.S. Topographic Map DEP's eMAP

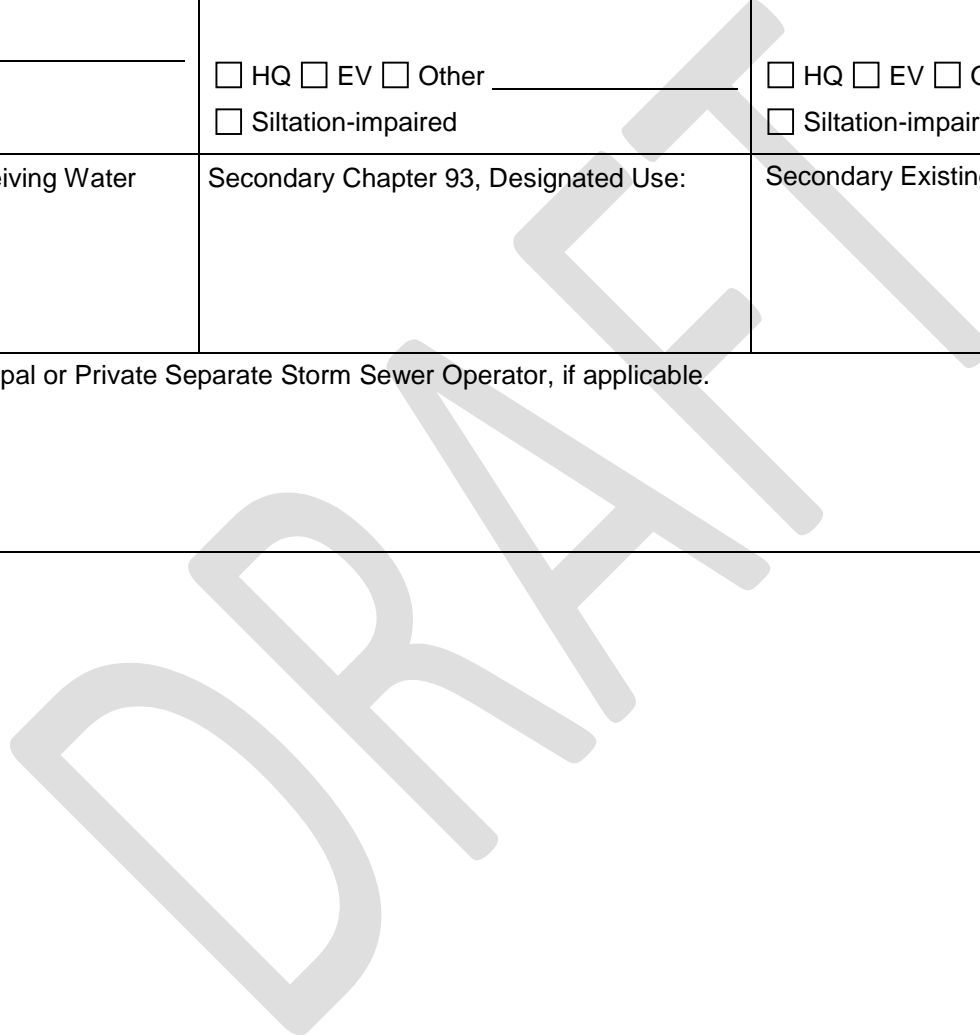
5. U.S.G.S. 7.5 min. topographic quadrangle Name
 (Include a copy of the project area on the 7.5 min quad map)

6. Will the project be conducted as a phased permit project? Yes No
 If Yes, Include Master Site Plan Estimated Timetable for Phased Projects. Additional sheet(s) attached.

Phase No. or Name	Description	Total Area	Disturbed Area	Start Date	End Date

7. List existing and previous land use for a minimum of the previous 5 years.
8. Other Pollutants: Will the stormwater discharge contain polluttional substances other than sediment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain and provide any available quantitative data.
9. Will fuels, chemicals, solvents, other hazardous waste or materials be used or stored on site during earth disturbance activities? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, Preparedness, Prevention and Contingency (PPC) Plan must be attached with the application and maintained on site during earth disturbance. See NOI Instructions, E.9 PPC Plan Guidance for further information.)
10. Does the project have the potential to discharge to siltation-impaired waters? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, show how the project will not result in a net change in volume, rate or water quality. See section I below, and E.10 of NOI instructions.)
11. Has the project site been investigated to identify naturally occurring geologic formations or soil types that may cause pollution when disturbed? Yes <input type="checkbox"/> No <input type="checkbox"/> Have naturally occurring geologic formations or soil types that may cause pollution when disturbed been identified? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain where in this application details are provided.
12. Has the Act 14 Municipal Notification proof of receipt been attached to the NOI? Yes <input type="checkbox"/> No <input type="checkbox"/> (If not, the NOI is not complete, see E.12 and #4 Municipal Notification in the NOI Instructions for additional guidance.)
13. Has the Project Review Form to the PHMC identified historic resources within the LOD? Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, attach resulting correspondence with the PHMC)
14. Has the PNDI receipt been attached to the NOI? Yes <input type="checkbox"/> No <input type="checkbox"/> (If not, the NOI is not complete, see E.14 and #5 PNHP in the NOI Instructions for additional guidance.)
15. Have the E&S Plan and PCSM/SR Plan been planned, designed and implemented to be consistent? Provide explanation Yes <input type="checkbox"/> No <input type="checkbox"/>
16. Have existing and/or proposed Riparian Forest Buffers been identified? Yes <input type="checkbox"/> N/A <input type="checkbox"/> (If yes, they must be shown on the E&S Plan as well as the PCSM/SR Plans.)
17. Have antidegradation implementation requirements for special protection waters been addressed? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> (If yes, antidegradation requirements must be included in the plan.)
18. Has the seasonal high groundwater level been identified and 20-inch separation established at all excavation locations for pits for conventional operations and Well Development Impoundments for unconventional operations? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

19. Receiving Waters _____ _____ _____ _____	Chapter 93, Designated Use Stream Classification <input type="checkbox"/> HQ <input type="checkbox"/> EV <input type="checkbox"/> Other _____ <input type="checkbox"/> Siltation-impaired <input type="checkbox"/> HQ <input type="checkbox"/> EV <input type="checkbox"/> Other _____ <input type="checkbox"/> Siltation-impaired <input type="checkbox"/> HQ <input type="checkbox"/> EV <input type="checkbox"/> Other _____ <input type="checkbox"/> Siltation-impaired <input type="checkbox"/> HQ <input type="checkbox"/> EV <input type="checkbox"/> Other _____ <input type="checkbox"/> Siltation-impaired	Chapter 93, Existing Use Stream Classification <input type="checkbox"/> HQ <input type="checkbox"/> EV <input type="checkbox"/> Other _____ <input type="checkbox"/> Siltation-impaired <input type="checkbox"/> HQ <input type="checkbox"/> EV <input type="checkbox"/> Other _____ <input type="checkbox"/> Siltation-impaired <input type="checkbox"/> HQ <input type="checkbox"/> EV <input type="checkbox"/> Other _____ <input type="checkbox"/> Siltation-impaired <input type="checkbox"/> HQ <input type="checkbox"/> EV <input type="checkbox"/> Other _____ <input type="checkbox"/> Siltation-impaired
Secondary Receiving Water	Secondary Chapter 93, Designated Use:	Secondary Existing Use
Name of Municipal or Private Separate Storm Sewer Operator, if applicable.		



SECTION F. EROSION AND SEDIMENT CONTROL (E&S) PLAN
See the attached Instructions for additional guidance with E&S Plans

Erosion and Sediment Control Plan BMPs should be designed to minimize accelerated erosion and sedimentation through limiting the extent and duration of earth disturbance, protection of existing drainage and vegetation, limiting soil compaction and controlling the generation of increased runoff. The Department recommends the use of the *Pennsylvania Erosion & Sedimentation Pollution Control Program Manual (E&S Manual), Technical Guidance No. 363-2134-008* to achieve this goal. The E&S Plan must meet the requirements of Pa. Code § 102.4(b) and submitted with the NOI. Also, see section 2. of the NOI instruction for detailed information on completing the E&S plan and additional requirements.

a. E&S Plan Summary

Provide a summary of proposed E&S BMPs and their performance to manage E&S for the project.

b. E&S Plan BMP Design

Check those that apply:

- E&S Plan is designed using BMPs in the *E&S Manual*.
- E&S Plan is designed using an alternative BMP or design standard approved by DEP.

Note: NOI packages submitted with alternate BMPs not approved by the Department will be returned to the Applicant.

c. Do you have any riparian buffer information which differs from what was submitted in the Riparian Buffer Section?

Yes No

Explain:

d. Thermal Impacts Analysis

Explain how thermal impacts associated with this project were avoided, minimized, or mitigated.

e. Off-Site Discharge Analysis

Does the activity propose any off-site discharges to areas other than surface waters? Yes No

If yes, it is the applicant's responsibility to ensure that they have legal authority for any off-site discharge to neighboring properties.

The applicant must provide a demonstration in both E&S and PCSM/SR plans that the discharge will not cause erosion, damage, or a nuisance to off-site properties.

SECTION G. RIPARIAN BUFFER

1. Will you be protecting, converting or establishing a voluntary riparian forest buffer as part of this project? Yes No
If yes, as part of the PCSM/SR Plan, provide a Buffer Management Plan.
2. Will proposed earth disturbance activities be conducted in an EV or HQ watershed AND within 150 feet of a perennial or intermittent river, stream, or creek, or lake, pond, or reservoir? Yes No

If no, proceed to the next section/module.

3. Does this project qualify for an exception (see § 102.14(d)(1))? Yes No

If yes, indicate below the type of project for which the exception applies by marking the appropriate box.

- Oil and gas activities for which site reclamation or restoration is part of the permit authorization in Chapter 78 and 78a.
- Road maintenance activities.
- The repair or maintenance of existing pipelines and utilities.
- Other (see §102.14(d)(1))

If exceptions are checked, explain how existing riparian buffer will be undisturbed to the extent practicable. Provide a demonstration that the requirements of §102.14(b) are met, or provide the necessary information to request a riparian buffer waiver.

4. Are you requesting a riparian buffer waiver for this project (see § 102.14(d)(2))? Yes No

If yes, indicate below the type of project for which you are requesting a waiver by marking the appropriate box.

- Linear project that may include pipelines, public roadways, rail lines, or utility lines.
- Project is of a temporary nature where the site will be fully restored to its preexisting conditions during the ESCGP permit term.
- Project where compliance with mandatory riparian buffers is not appropriate or feasible due to site characteristics or existing structures at the project site.
- Other (see §102.14(d)(2)):

If waivers are checked, explain how existing riparian buffers will be undisturbed to the extent practicable.

Note: If "Yes" to #2 **AND** "No" to #3 and #4, provide an attachment to demonstrate how the requirements of §102.14 are met.

SECTION H. POST CONSTRUCTION STORMWATER MANAGEMENT (PCSM) AND/OR SITE RESTORATION(SR) PLAN

See NOI Instructions for additional guidance with PCSM Plans

PCSM/SR BMPs should be designed to use natural measures to eliminate pollution, infiltrate runoff, not require extensive construction/maintenance, promote pollutant reduction, and preserve the integrity of stream channels. All PCSM/SR BMPs proposed in the PCSM/SR Plan must be designed in accordance with the *Pennsylvania Stormwater Best Management Practices Manual (Stormwater BMP Manual)*, *Technical Guidance No. 363-0300-002*. If alternate design criteria are utilized for the proposed project, they must have prior approval by the Department, or the NOI Application will be returned to the Applicant.

After construction is completed, how much of the entire disturbed area will be restored to meadow in good condition or better, or existing conditions? All Partial None

Include PCSM narrative and drawings for remaining impervious area. Also include a map showing the proposed contours of the site restoration plan.

If there are additional stages of the project prior to permit termination or expiration, list the stages and provide the documents required by subsection 'a' to section 'g' for each stage (e.g. partial restoration or changes to the amount of compacted areas, gravel, and/or impervious areas). Upload a narrative for each additional stage in addition to the drawings.

EXAMPLE

Stage No	Stage Name	PCSM Plan	SR Plan
Stage 1		<input type="checkbox"/>	<input type="checkbox"/>
Stage 2		<input type="checkbox"/>	<input type="checkbox"/>
Stage 3		<input type="checkbox"/>	<input type="checkbox"/>
Stage 4		<input type="checkbox"/>	<input type="checkbox"/>

Act 167 Consistency. Check those that apply.

Is there an Act 167 Plan? Yes No

The attached PCSM/SR Plan is consistent with an applicable approved Act 167 Plan.

Complete the following for all approved Act 167 Stormwater Management Plans. (Use additional sheets if necessary)

Act 167 Plan Name	Date Adopted	Consistency Letter Included <input type="checkbox"/>
_____	_____	Verification Report Included <input type="checkbox"/>

Note: A consistency letter is not required if a verification report is provided. See NOI Instructions. The PCSM/SR Plan must satisfy either sub paragraph 1, 2, or 3 below. Check those that apply.

1. Act 167 Plan approvals on or after January 2005 – The attached PCSM/SR Plan, in its entirety, is consistent with all requirements pertaining to rate, volume, and water quality from an Act 167 Stormwater Management Plan approved by DEP on or after January 2005. Box 1 must be checked if a current, DEP approved Act 167 plan exists.
2. The PCSM/SR meets the standard design criteria from sections 102.8(g)(2) and (3) and the *Stormwater BMP Manual*. For projects involving oil and gas activities authorized by a permit issued under Chapter 78 or Chapter 78a (well pads) or pipelines and other similar utility infrastructure, post construction stormwater management requirements are met for all areas that are restored to preconstruction conditions or to a condition of meadow in good condition or better. [Note: PCSM plans must meet both the volume and rate requirements in the regulations, which are provided in the 2 sections mentioned in this paragraph].
3. Alternative Design Standard – The attached PCSM/SR Plan was developed using approaches as provided in 102.8(g)(2)(iv) and 102.8(g)(3)(iii). Demonstrate/explain in the space provided below how this standard will be either more protective than what is required in 102.8(g)(2) and 102.8(g)(3) or will maintain and protect existing water quality and existing and designated uses.

PCSM/SR BMP Alternative Standards:

Has the alternative BMP or design standard been approved by the Department?

Yes

No – Do not submit the ESCGP-3 application and see Section (H) of the NOI Instructions concerning the alternative BMP approval process.

Water Quality Compliance:

Does the PCSM/SR plan comply with requirements for volume control? Yes No

If yes, is at least 90% of the disturbed area controlled by a PCSM BMP? Yes No

If yes, do you have the Standard PCSM Worksheet # 10 attached to show water quality compliance has achieved?

Yes No

If no, attach Standard PCSM Worksheets # 12 and #13 to show water quality compliance has achieved.

If PCSM/SR plan is not complying with the requirements for volume control, attach Standard PCSM Worksheets # 11, # 12 and #13 to show water quality compliance has achieved.

a. PCSM/SR Plan Summary

Provide a summary of proposed BMPs and their performance to manage PCSM/SR for the project.

Check all that apply PCSM BMPs SR BMPs

b. Do you have any Riparian buffer information which differs from what was submitted in the Riparian Buffer Module?

Yes No

Explain:

c. Thermal Impacts Analysis

Explain how thermal impacts associated with this project were avoided, minimized, or mitigated.

d. Off-Site Discharge Analysis.

Does the activity propose any off-site discharges to areas other than surface waters? Yes No

If yes, it is the applicant's responsibility to ensure that they have legal authority for any off-site discharge to neighboring properties.

The Applicant must provide a demonstration in both the E&S and PCSM/SR Plans that the discharge will not cause erosion, damage, or a nuisance to off-site properties.

e. Summary Table for Supporting Calculation and Measurement Data
(See NOI Instructions for additional guidance with this section)

The remainder of this section (Summary Table for Calculation and Measurement Data) does not need to be completed for areas of projects involving oil and gas activities authorized by Chapter 78 or Chapter 78a (well pads) or pipelines and other similar utility infrastructure which will be restored to meadow in good condition or better or existing conditions.

Watershed Name:

Design storm frequency _____ Rainfall amount _____ inches	Pre-construction	Post Construction	Net Change
Impervious area (acres)			
Volume of stormwater runoff (acre-feet) without planned stormwater BMPs			
Volume of stormwater runoff (acre-feet) with planned stormwater BMPs			
Stormwater discharge rate for the design frequency storm	Pre-construction	Post Construction	Net Change
1) 2-Year/24-Hour			
2) 10-Year/24-Hour			
3) 50-year/24-Hour			
4) 100-year/24-Hour			

f. Summary Description of SR/PCSM BMPs

In the lists below, check the BMPs identified in the PCSM Plan. The primary function(s) of the BMP listed in the functions column (infiltration/recharge; detention/retention; water quality). Additional functions may be added if applicable to that BMP. List the stormwater volume and area of runoff to be treated by each BMP type when calculations are required. If any BMP in the PCSM/SR Plan is not listed below, describe it in the space provided after "Other". A summary table with infiltration testing information (Attachment E) must be submitted for all Bio-infiltration BMPs included in PCSM/SR plan.

For Rate control provide the volume of stormwater treated and acres treated for the 100-year/24-hour storm event.

For volume control and water quality provide the volume of stormwater treated and acres treated for the 2-year/24-hour storm event.

BMP	Function(s)	Volume of stormwater treated	Acres treated
Site Restoration ONLY <input type="checkbox"/> Restore Site to Meadow in Good Condition or Better, or Existing Conditions	Infiltration/Recharge Detention/WQ Treatment	_____ _____ _____	_____ _____ _____
Bio-infiltration areas <input type="checkbox"/> Infiltration Trench <input type="checkbox"/> Infiltration Bed <input type="checkbox"/> Infiltration Basin <input type="checkbox"/> Rain Garden/ Bioretention <input type="checkbox"/> Infiltration Berm	Infiltration/Recharge	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
Natural Area Conservation <input type="checkbox"/> Streamside Buffer Zone <input type="checkbox"/> Wetland Buffer Zone <input type="checkbox"/> Sensitive Area Buffer Zone <input type="checkbox"/> Pre-Construction Drainage Pattern Intact	Infiltration/Recharge	_____ _____ _____ _____	_____ _____ _____ _____
Stormwater Retention <input type="checkbox"/> Constructed Wetlands <input type="checkbox"/> Wet Ponds <input type="checkbox"/> Retention Basin	Detention/Retention	_____ _____ _____	_____ _____ _____
Sediment and Pollutant Removal <input type="checkbox"/> Vegetated Filter Strips <input type="checkbox"/> Compost Filter Sock <input type="checkbox"/> Detention Basins	Water Quality Treatment	_____ _____ _____	_____ _____ _____
Access Road Design <input type="checkbox"/> Road Crowning <input type="checkbox"/> Ditches <input type="checkbox"/> Turnouts <input type="checkbox"/> Culverts <input type="checkbox"/> Roadside Vegetated Filter Strips	Infiltration/Recharge	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
Stormwater Energy Dissipaters <input type="checkbox"/> Level Spreaders <input type="checkbox"/> Riprap Aprons <input type="checkbox"/> Upslope Diversions <input type="checkbox"/> Other _____	Infiltration/Recharge	_____ _____ _____ _____	_____ _____ _____ _____

g. Critical PCSM Plan stages

Identify and list critical stages of implementation of the PCSM Plan for which a licensed professional or designee shall be present on site.

DRAFT

SECTION I. ANTIDegradation ANALYSIS

This section must be completed where earth disturbance activities will be conducted in special protection or siltation-impaired watersheds.

Part 1 - NONDISCHARGE ALTERNATIVES EVALUATION

The applicant must consider and describe any and all non-discharge alternatives for the entire project area which are environmentally sound and will:

- Minimize accelerated erosion and sedimentation during the earth disturbance activity
- Achieve no net change from pre-development to post-development volume, rate and concentration of pollutants in water quality

E & S Plan

PCSM/SR Plan

Check off the environmentally sound nondischarge Best Management Practices (BMPs) listed below to be used prior to, during, and after earth disturbance activities that have been incorporated into your E & S Plan based on the site analysis. For non-discharge BMPs not checked, provide an explanation of why they were not utilized. Also for BMPs checked, provide an explanation of why they were utilized. (Provide the analysis and attach additional sheets if necessary)

Check off the environmentally sound nondischarge Best Management Practices (BMPs) listed below to be used after construction that have been incorporated into the PCSM/SR Plan based on your site analysis. For non-discharge BMPs not checked, provide an explanation of why they were not utilized. Also for BMPs checked, provide an explanation of why they were utilized. (Provide the analysis and attach additional sheets if necessary)

Nondischarge BMPs

- Alternative Siting
 - Alternative location
 - Alternative configuration
 - Alternative location of discharge
- Limited Disturbed Area
- Limiting Extent & Duration of Disturbance (Phasing, Sequencing)
- Riparian Buffers (150 ft. min.)
- Riparian Forest Buffer (150 ft. min.)
- Other _____

Nondischarge BMPs

- Alternative Siting
 - Alternative location
 - Alternative configuration
 - Alternative location of discharge
- Low Impact Development (LID / BSD)
- Riparian Buffers (150 ft. min.)
- Riparian Forest Buffer (150 ft. min.)
- Infiltration
- Water Reuse
- Other _____

Will the non-discharge alternative BMPs eliminate the net change in rate, volume and quality during construction?

- Yes No

If yes, antidegradation analysis is complete.
 If no, proceed to Part 2.

Will the non-discharge alternative BMPs eliminate the net change in rate, volume and quality after construction?

- Yes No

If yes, antidegradation analysis is complete.
 If no, proceed to Part 2.

PART 2 - ANTIDegradation BEST AVAILABLE COMBINATION OF TECHNOLOGIES (ABACT)

If the net change in stormwater discharge from or after construction is not fully managed by nondischarge BMPs, the applicant must utilize ABACT BMPs to manage the difference. The Applicant must specify whether the discharge will occur during construction, post-construction or both, and identify the technologies that will be used to ensure that the discharge will be a non-degrading discharge. ABACT BMPs include but are not limited to:

E & S Plan	PCSM/SR Plan
<p><input type="checkbox"/> Treatment BMPs:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Sediment basin with skimmer <input type="checkbox"/> Sediment basin ratio of 4:1 or greater (flow length to basin width) <input type="checkbox"/> Sediment basin with 4-7 day detention <input type="checkbox"/> Flocculants <input type="checkbox"/> Compost Filter Socks <input type="checkbox"/> Compost Filter Sock Sediment Basin <input type="checkbox"/> RCE w/ Wash Rack <p><input type="checkbox"/> Land disposal:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Vegetated filters <input type="checkbox"/> Riparian buffers <150ft. <input type="checkbox"/> Riparian Forest Buffer <150ft. <input type="checkbox"/> Immediate stabilization <p><input type="checkbox"/> Pollution prevention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> PPC Plans <input type="checkbox"/> Street sweeping <input type="checkbox"/> Channels, collectors and diversions lined with permanent vegetation, rock, geotextile or other non-erosive materials <p><input type="checkbox"/> Stormwater reuse technologies:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Sediment basin water for dust control <input type="checkbox"/> Sediment basin water for irrigation <p><input type="checkbox"/> Other _____</p>	<p><input type="checkbox"/> Treatment BMPs:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Infiltration Practices <input type="checkbox"/> Wet ponds <input type="checkbox"/> Created wetland treatment systems <input type="checkbox"/> Vegetated swales <input type="checkbox"/> Manufactured devices <input type="checkbox"/> Bio-retention/infiltration <input type="checkbox"/> Green Roofs <p><input type="checkbox"/> Land disposal:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Vegetated filters <input type="checkbox"/> Riparian Buffers <150ft. <input type="checkbox"/> Riparian Forest Buffer <150ft. <input type="checkbox"/> Disconnection of roof drainage <input type="checkbox"/> Bio-retention/bio-infiltration <p><input type="checkbox"/> Pollution prevention:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Street sweeping <input type="checkbox"/> Nutrient, pesticide, herbicide or other chemical application plan alternatives <input type="checkbox"/> PPC Plans <input type="checkbox"/> Non-structural Practices <input type="checkbox"/> Restoration BMPs <p><input type="checkbox"/> Stormwater reuse technologies:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Divert rainwater into impoundment <input type="checkbox"/> Underground storage <p><input type="checkbox"/> Spray/Drip Irrigation</p> <p><input type="checkbox"/> Other _____</p>
<p>Are the ABACT BMPs selected sufficient to minimize E&S discharges to the extent that existing or designated surface water uses are protected?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, Antidegradation analysis is complete. If no, NOI Application will be returned to the Applicant.</p>	<p>Are the ABACT BMPs selected sufficient to achieve no net change and assure that existing or designated surface water uses are protected?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, Antidegradation analysis is complete. If no, NOI Application will be returned to the Applicant.</p>

SECTION J. COMPLIANCE HISTORY REVIEW

Is/was the applicant(s) in violation of any Department regulation, order, schedule of compliance or permit or in violation of any department regulated activities within the past five years?

Yes No

If yes, provide the permit number or facility name, a brief description of the violation, the compliance schedule (including dates and steps to achieve compliance) and the current compliance status. (Attach additional information on a separate sheet, when necessary)

Permit Program or Activity:
Brief Description of non-compliance:

Permit Number (if applicable):

Steps taken to achieve compliance

Date(s) compliance achieved

Current Compliance Status: In-Compliance In Non-Compliance

If in non-compliance, attach schedule for achieving compliance.

SECTION K. CERTIFICATION BY PERSON PREPARING E&S AND PCSM/SR PLANS

I do hereby certify to the best of my knowledge, information, and belief, that the Erosion and Sediment Control and PCSM/Site Restoration Plans are true and correct, represent actual field conditions, and are in accordance with the 25 Pa. Code Chapters 78/78a and 102 of the Department's rules and regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Print Name	Signature	Professional Seal
Company		
Address		
Phone		
Most Recent DEP Training Attended	Location _____ Date _____	
e-Mail Address _____		

EXPEDITED REVIEW PROCESS

In addition to the certification required above, applicants using the expedited permit review process must attach an E&S and PCSM/Site Restoration Plans developed and sealed by a licensed professional engineer, surveyor or professional geologist. The plans shall contain the following certification:

I do hereby certify to the best of my knowledge, information, and belief, that the E & S Control and PCSM/SR BMPs are true and correct, represent actual field conditions and are in accordance with the 25 Pa. Code Chapters 78/ 78a and 102 of the Department's rules and regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SECTION L. APPLICANT CERTIFICATION

Applicant Certification

I certify under penalty of law that this application and all related attachments were prepared by me or under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my own knowledge and on inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. The responsible official's signature also verifies that the activity is eligible to participate in the ESCGP, and that the applicant agrees to abide by the terms and conditions of the permit. BMP's, E&S Plan, PPC Plan, PCSM Plan, and other controls are being or will be, implemented to ensure that water quality standards and effluent limits are attained. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment or both for knowing violations pursuant to Section 309(c)(4) of the Clean Water Act and, 18 Pa. C.S. §§4903-4904.

I grant permission to the agencies responsible for the permitting of this work, or their duly authorized representative to enter the project site for inspection purposes. I will abide by the conditions of the permit if issued and will not begin work prior to permit issuance.

(For individuals no indication of title is necessary, choose the box below. All others proceed to the next paragraph)

Individual; proceed to signature portion.

I hereby certify that I am the signatory pursuant to 25 Pa, Code § 92a.22 and 40 CFR §122.22 and that I am the person who is responsible for decision-making regarding environmental compliance functions for Enter Entity name, the manager of one or more manufacturing, production, or operating facilities of the applicant and am authorized to make management decisions which govern the operation of regulated facility including having explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure the applicant's long term environmental compliance with environmental laws and regulations; and I am responsible for ensuring that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements.

(choose one of the following; not applicable for individuals):

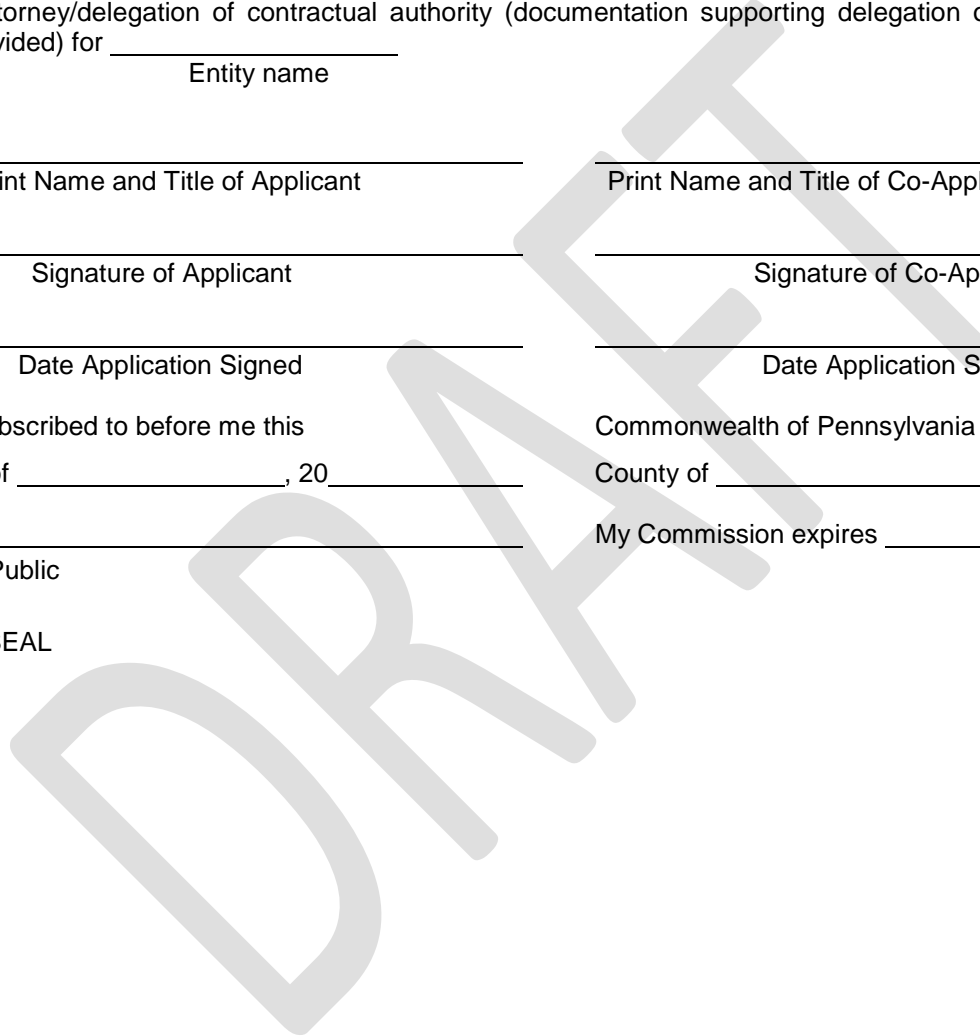
- The responsible corporate officer president vice president secretary
 treasure of _____ Corporation/Company
Entity name
- The member or manager of _____ LLC
Entity name
- The general partner of _____ partnership/LP/LLP
Entity name
- The principal executive officer or ranking elected official of _____ Municipality/State/Federal/other public agency
Entity name
- Power of Attorney/delegation of contractual authority (documentation supporting delegation of contracting authority must be provided) for _____
Entity name

Print Name and Title of Applicant	Print Name and Title of Co-Applicant (if applicable)
Signature of Applicant	Signature of Co-Applicant
Date Application Signed	Date Application Signed

Notarization
Sworn to and subscribed to before me this _____ day of _____, 20____
_____ day of _____, 20____
_____ day of _____, 20____

Commonwealth of Pennsylvania
County of _____
My Commission expires _____

Notary Public
AFFIX SEAL



SECTION M. ADDITIONAL CONTACT INFORMATION			
Contact's Last Name	First Name	MI	Phone
			FAX
Mailing Address	City	State	ZIP + 4
e-Mail Address			

DRAFT