
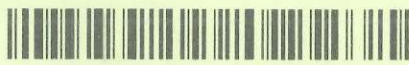


| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                                                                            | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------|--------------------------------------------------------------|-------------------------------------------|------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------|----------------------------------------------|--------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------------|--|-----------------------------------------------------------|--|
| <ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | <p>A. Signature <input checked="" type="checkbox"/> Agent<br/> <input checked="" type="checkbox"/> Addressee<br/> <i>Wickitashlyarger</i></p> <p>B. Received by (Printed Name) <i>Vicki Hershberg</i> C. Date of Delivery <i>2-15-12</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <p>1. Article Addressed to:</p> <p><i>Smithfield Township<br/> 202 S. 13th St. Ste #3<br/> Huntingdon, PA 16652</i></p>  <p>9590 9402 5958 0062 2350 45</p>                            | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/> If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery</td> <td></td> </tr> </table> | <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® | <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ | <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery | <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ | <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery | <input type="checkbox"/> Insured Mail |  | <input type="checkbox"/> Insured Mail Restricted Delivery |  |
| <input type="checkbox"/> Adult Signature                                                                                                                                                                                                                                 | <input type="checkbox"/> Priority Mail Express®                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Adult Signature Restricted Delivery                                                                                                                                                                                                             | <input type="checkbox"/> Registered Mail™                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Certified Mail®                                                                                                                                                                                                                                 | <input type="checkbox"/> Registered Mail Restricted Delivery                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Certified Mail Restricted Delivery                                                                                                                                                                                                              | <input type="checkbox"/> Return Receipt for Merchandise                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Collect on Delivery                                                                                                                                                                                                                             | <input type="checkbox"/> Signature Confirmation™                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery                                                                                                                                                                                                         | <input type="checkbox"/> Signature Confirmation Restricted Delivery                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Insured Mail                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Insured Mail Restricted Delivery                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <p>2. Article Number (Transfer from service label)</p> <p><i>7020 2450 0001 7338 6459</i></p>                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |

| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                                                                            | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------|--------------------------------------------------------------|-------------------------------------------|------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------|---------------------------------------------------------|----------------------------------------------|--------------------------------------------------|------------------------------------------------------------------|---------------------------------------------------------------------|---------------------------------------|--|-----------------------------------------------------------|--|
| <ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | <p>A. Signature <input checked="" type="checkbox"/> Agent<br/> <input checked="" type="checkbox"/> Addressee<br/> <i>Kaleen Wilson</i></p> <p>B. Received by (Printed Name) <i>Kaleen Wilson</i> C. Date of Delivery <i>2-15-12</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <p>1. Article Addressed to:</p> <p><i>Huntingdon County Planning<br/> 205 Penn St. Ste 3<br/> Huntingdon PA 16652</i></p>  <p>9590 9402 5958 0062 2350 52</p>                        | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/> If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery</td> <td></td> </tr> </table> | <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® | <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ | <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery | <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ | <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery | <input type="checkbox"/> Insured Mail |  | <input type="checkbox"/> Insured Mail Restricted Delivery |  |
| <input type="checkbox"/> Adult Signature                                                                                                                                                                                                                                 | <input type="checkbox"/> Priority Mail Express®                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Adult Signature Restricted Delivery                                                                                                                                                                                                             | <input type="checkbox"/> Registered Mail™                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Certified Mail®                                                                                                                                                                                                                                 | <input type="checkbox"/> Registered Mail Restricted Delivery                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Certified Mail Restricted Delivery                                                                                                                                                                                                              | <input type="checkbox"/> Return Receipt for Merchandise                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Collect on Delivery                                                                                                                                                                                                                             | <input type="checkbox"/> Signature Confirmation™                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery                                                                                                                                                                                                         | <input type="checkbox"/> Signature Confirmation Restricted Delivery                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Insured Mail                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <input type="checkbox"/> Insured Mail Restricted Delivery                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <p>2. Article Number (Transfer from service label)</p> <p><i>7020 2450 0001 7338 6466</i></p>                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |
| <p>PS Form 3811, July 2015 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |                                                 |                                                              |                                           |                                          |                                                              |                                                             |                                                         |                                              |                                                  |                                                                  |                                                                     |                                       |  |                                                           |  |



**MUNICIPAL NOTIFICATION OF PLANNED LAND DEVELOPMENT  
FOR CHAPTER 102 PERMITS**

**PROJECT INFORMATION (COMPLETED BY APPLICANT)**

|                                                                                                                                                                                                                 |                                                                                                           |                  |                                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------|---------------------------------|
| Applicant Name:                                                                                                                                                                                                 | <u>M &amp; G Realty, Inc.</u>                                                                             | Contact Name:    | <u>Eric Hershey, P.E.</u>       |
| Applicant Address:                                                                                                                                                                                              | <u>2295 Susquehanna Trail, Suite C</u>                                                                    | Contact Phone:   | <u>717-771-5950</u>             |
| Applicant City, State, ZIP:                                                                                                                                                                                     | <u>York, PA 17404-9601</u>                                                                                | County:          | <u>Huntingdon</u>               |
| Description of Proposed Land Development and Stormwater Controls:                                                                                                                                               | Municipality: <u>Smithfield Township</u>                                                                  |                  |                                 |
| <b>Construction of new Rutter convenience store on a vacant parcel of land. Site development includes the construction of the required stormwater collection, detention, infiltration, and treatment BMP's.</b> | Project Area:                                                                                             | <u>7.4</u> acres | <input type="checkbox"/> Phased |
|                                                                                                                                                                                                                 | Disturbance:                                                                                              | <u>7.0</u> acres |                                 |
| Tax Parcel ID(s) Affected by Proposed Land Development:                                                                                                                                                         | Surface Waters Receiving Stormwater Discharges:                                                           |                  |                                 |
| <u>44-02-66</u>                                                                                                                                                                                                 | <b>wetlands tributary to UNT to Juniata River, WWF</b>                                                    |                  |                                 |
|                                                                                                                                                                                                                 | Discharge to: <input type="checkbox"/> MS4 <input type="checkbox"/> Other SS <input type="checkbox"/> CSS |                  |                                 |

The following information was submitted to the municipality for this project:  
 Land Development / Subdivision Plan   
 E&S Plan   
 PCSM Plan   
 Other:

**MUNICIPAL PLAN / ORDINANCE INFORMATION (COMPLETED BY MUNICIPALITY)**

1. Is there an adopted municipal or multi-municipal comprehensive plan?     Yes     No
2. Is there an enacted municipal or multi-municipal zoning ordinance?     Yes     No
3. If Yes to #2, is the proposed project consistent with the ordinance?     Yes     No
4. Is there a municipal stormwater management ordinance?     Yes     No
5. If Yes to #4, is the proposed project consistent with the ordinance, without waiver?     Yes     No
6. If Yes to #4, indicate type of ordinance:   
 Act 167 Model Ordinance   
 DEP Model Ordinance (MS4s)   
 Other

| APPLICANT CERTIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | MUNICIPAL ACKNOWLEDGEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| I certify under penalty of law (see 18 Pa.C.S. § 4904 (relating to unsworn falsification)) that the information reported herein was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the information, 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. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. | The municipality acknowledges that a permit application for the above-referenced project has been submitted to a reviewing agency and that notification requirements of Act 14 of 1984 and Acts 67, 68, and 127 of 2000 have been satisfied. The information reported herein by the municipality is true and accurate. The municipality reserves the right to comment to the reviewing agency relative to comprehensive plans, zoning, and stormwater ordinance consistency. Municipal acknowledgment of receipt of notification shall not be construed as project approval. |

|                                                                                                                                                                             |                                                                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Tim Rutter<br><hr/> <b>Applicant Name</b><br><br><hr/> <b>Applicant Signature</b><br>President<br><hr/> <b>Applicant Title</b><br>2/14/22<br><hr/> <b>Date of Signature</b> | <hr/> <b>Municipal Representative Name</b><br><hr/> <b>Municipal Representative Signature</b><br><hr/> <b>Municipal Representative Title</b><br><hr/> <b>Date of Signature</b> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|



**COUNTY NOTIFICATION OF PLANNED LAND DEVELOPMENT  
 FOR CHAPTER 102 PERMITS**

**PROJECT INFORMATION (COMPLETED BY APPLICANT)**

Applicant Name: M & G Realty, Inc. Contact Name: Eric Hershey, P.E.  
 Applicant Address: 2295 Susquehanna Trail, Suite C Contact Phone: 717-771-5950  
 Applicant City, State, ZIP: York, PA 17404-9601 County: Huntingdon  
 Description of Proposed Land Development and Stormwater Controls: Municipality: Smithfield Township

**Construction of new Rutter convenience store on a vacant parcel of land. Site development includes the construction of the required stormwater collection, detention, infiltration, and treatment BMP's.**

Project Area: 7.4 acres  Phased  
 Disturbance: 7.0 acres

Tax Parcel ID(s) Affected by Proposed Land Development:  
44-02-66

Surface Waters Receiving Stormwater Discharges:  
wetlands tributary to UNT to Juniata River, WWF  
 Discharge to:  MS4  Other SS  CSS

The following information was submitted to the county for this project:

- Land Development / Subdivision Plan  E&S Plan  PCSM Plan  Other:

**COUNTY PLAN INFORMATION (COMPLETED BY COUNTY)**

Name of county organization completing this assessment:

1. Is there an adopted county or multi-county comprehensive plan?  Yes  No  
 2. If Yes to #1, is the proposed project consistent with the county plan?  Yes  No  
 3. Is there a DEP-approved Act 167 stormwater management plan?  Yes  No  CCD  
 4. If Yes to #3, is the proposed project consistent with the Act 167 plan, without waiver?  Yes  No  CCD  
 5. If Yes to #3, list the date of the latest plan / update approved by DEP:  CCD

| APPLICANT CERTIFICATION | COUNTY ACKNOWLEDGEMENT |
|-------------------------|------------------------|
|-------------------------|------------------------|

I certify under penalty of law (see 18 Pa.C.S. § 4904 (relating to unsworn falsification)) that the information reported herein was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the information, 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. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

The county acknowledges that a permit application for the above-referenced project has been submitted to a reviewing agency and that notification requirements of Act 14 of 1984 and Acts 67, 68, and 127 of 2000 have been satisfied. The information reported herein by the county is true and accurate. County acknowledgment of receipt of notification shall not be construed as project approval.

Tim Rutter  
 Applicant Name  
  
 Applicant Signature  
 President  
 Applicant Title  
2/14/22  
 Date of Signature

County Representative Name  
 County Representative Signature  
 County Representative Title  
 Date of Signature