

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

PAG-02

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) GENERAL PERMIT FOR DISCHARGES OF STORMWATER ASSOCIATED WITH CONSTRUCTION ACTIVITIES NOTICE OF INTENT (NOI)

Before completing this form, read the step-by-step instructions provided in the PAG-02 NOI package.

| DEP / CCD USE ONLY | | | | | | | | | | | | |
|---|-----------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Date Received: | Permit ID: | | | | | | | | | | | |
| ☐ Project Eligible ☐ NOI Complete | Date of: Return Withdrawal Denial | | | | | | | | | | | |
| Date Resubmission Received: | <u></u> | | | | | | | | | | | |
| Date Determined Complete: | Issuance Date: | | | | | | | | | | | |
| Coverage Effective Date: | Coverage Expiration Date: | | | | | | | | | | | |
| GENERAL INFORMATION | | | | | | | | | | | | |
| 1. NOI Type: ⊠ New ☐ Renewal ☐ Major Am | nendment | | | | | | | | | | | |
| 2. Primary NAICS Code: <u>447110</u> 3. | Additional NAICS Codes: | | | | | | | | | | | |
| 4. Project Description: construction of new convenien | ce store with fuel island | | | | | | | | | | | |
| 5. Site Restoration Project | | | | | | | | | | | | |
| 6. Common Plan of Development or Sale No. ph | ases: No. phases complete: | | | | | | | | | | | |
| APPLICANT INFORMATION | | | | | | | | | | | | |
| Organization Name or Registered Fictitious Name 2 | . Employer ID# (EIN) | | | | | | | | | | | |
| M & G Realty, Inc. | 23-1567662 | | | | | | | | | | | |
| Individual Last Name First Name | MI Suffix | | | | | | | | | | | |
| 4. Mailing Address Line 1 Mailing | Address Line 2 | | | | | | | | | | | |
| 2295 Susquehanna Trail, Suite C | | | | | | | | | | | | |
| 5. Address Last Line – City State | ZIP+4 Country | | | | | | | | | | | |
| York PA | 17404-9601 USA | | | | | | | | | | | |
| 6. Applicant Contact Last Name First Name | MI Suffix | | | | | | | | | | | |
| Hershey Eric | W | | | | | | | | | | | |
| 7. Applicant Contact Title 8. Phone | Ext | | | | | | | | | | | |
| Site Development Project 717- 771-5950 Manager | 1 | | | | | | | | | | | |
| 9. Email Address 10. FAX | | | | | | | | | | | | |
| Eric.Hershey@rutters.com | | | | | | | | | | | | |
| 11. Ownership: Government: Federal State | County Municipal School District | | | | | | | | | | | |
| | lic/Private) | | | | | | | | | | | |

| | | ELIGIBILITY II | NFORMATION | | | | | | | | |
|--|--|---|--|------------|---------------|-------------|--|--|--|--|--|
| 1. | Stormwater discharges from that are classified for spec | ⊠ True | ☐ False | | | | | | | | |
| 2. | The applicant is not in viol schedule of compliance, c sites or facilities owned or of ability or intention to co continuing violations. | ⊠ True | ☐ False | | | | | | | | |
| 3. | 3) "Avoidance Measures" " "Avoidance Measures" no | e PNDI receipt indicates either 1) "No Impact", or 2) "Conservation Measures", or "Avoidance Measures" that have been agreed to by the applicant, or 4) "Potential Impact" or voidance Measures" not agreed to by the applicant but clearance letters from jurisdictional encies are attached to the NOI or otherwise will be submitted prior to General Permit verage. | | | | | | | | | |
| 4. | Soils in the area of the ear non-residential medium-s residential or non-resident been met or evidence is a widespread atmospheric d | 50 at rd has | ⊠ True | ☐ False | | | | | | | |
| 5. | 5. Stormwater will not be discharged to MS4 or CSO systems or will be discharged to MS4 or CSO systems with no net change in volume, rate or water quality or will be discharged to MS4 or CSO systems with a net change (increase) and written consent of the MS4 or CSO permittee. | | | | | | | | | | |
| 6. All fill material imported to the project site will be clean fill or will be regulated fill that has been authorized for use on the project site by DEP's Waste Management Program or will be used on an Act 2 site in accordance with standards established by DEP's Land Recycling and Environmental Remediation Standards Program. | | | | | | | | | | | |
| 7. | 7. Stormwater discharges will not occur that would contain toxic or hazardous pollutants as defined in sections 307 and 311 of the Clean Water Act (33 U.S.C. §§ 1317 and 1321) or any other substance that – because of its quantity, concentration, or physical, chemical or infectious characteristics – may cause or contribute to an increase in mortality or morbidity in either an individual or the total population, or pose a substantial present or future hazard to human health or the environment when discharged into surface waters. | | | | | | | | | | |
| 8. | turbidity, water/flow variab | scharged to impaired waters collity, flow modifications/alterationaters but the applicant will imple | ns, or nutrients, or stormwater v | will be | ⊠ True | ☐ False | | | | | |
| 9. | siltation, suspended solids Chesapeake Bay) but the | scharged to waters with an EPs, or nutrients, or will be dischapplicant will implement non-dispad allocation (WLA) will be achi | arged to TMDL waters (including charge alternative(s) or ABACT | ng the | ⊠ True | ☐ False | | | | | |
| | | EXISTING | PERMITS | | | | | | | | |
| | ntify all environmental perrears. | mits issued by DEP/CCD or EF | PA or are pending for this facil | lity/proje | ect site with | in the past | | | | | |
| | Type of Permit | | Issued E | Ву | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

| | PRO | JECT SITE INFORMA | ATION re | vised 3/15/22 | | | |
|-----|---|---|-------------------------|--|-----------|-------------|---------------|
| 1. | Project Site Name 2. Rutters | Huntingdon Store # 93 | 3. | Total Project Site | Area | 7.41 | acres |
| 4. | Project Site Impervious Area – Pre-C | onstruction 0.15 | acres | Percent of To | otal | 2.0 | % |
| 5. | Project Site Impervious Area – Post- | Construction 4.78 | acres | Percent of To | otal | 64.5 | % |
| 6. | Hydric soils or other wetland features | are present within the F | Project Site | e. 🛛 Yes 🗌 I | No | | |
| | | | | esources located | adjacen | t to projec | t site. |
| 7. | County Name Mu | nicipality Name | | City | Boro | Twp | State |
| | Huntingdon Sm | ithfield | | | | \boxtimes | PA |
| 8. | County Name Mu | nicipality Name | | City □ | Boro | Twp | State PA |
| 9. | Site Location Address | | | | | | |
| | William Penn Highway | | | | | | |
| 10. | Site Location City St | ate | ZI | P+4 | | | |
| | Huntingdon Pa | 4 | 16 | 652 | | | |
| | | OPERATOR INF | ORMATI | ON | | | |
| 1. | Operator Name: T.B.D. | | 2. | Contact Name: | | | |
| 3. | Operator Address: | | 4. | Operator Phone: | | | |
| 5. | Operator City, State, Zip: | | | | | | |
| 6. | Operator's Role in Project: Ge | neral Contractor 🔲 Co | onsultant | ☐ Excavation Co | ntractor | ☐ Other | |
| 7. | Operator's Responsibilities: | | | | | | |
| 1. | Operator Name: | | 2. | Contact Name: | | | |
| 3. | Operator Address: | | 4. | Operator Phone: | | | |
| 5. | Operator City, State, Zip: | | | | | | |
| 6. | Operator's Role in Project: Ge | neral Contractor 🔲 Co | onsultant | ☐ Excavation Co | ntractor | ☐ Other | |
| 7. | Operator's Responsibilities: | | | | | | |
| | | EARTH DISTURBANC | E INFOR | MATION | | | |
| 1. | Total Earth Disturbance Area 7 | .03 acres 30 | 6,227 | sf | | | |
| 2. | Pre-Construction Impervious Area: | 6,534 sf | | | | | |
| 3. | Post-Construction Impervious Area: | 208,217 sf | | | | | |
| 4. | Pre-Construction/Present Land Use(s | s): 5 | . Post-C | Construction Land U | se(s): | | |
| | Vacant lot | 100 % | Develo | ped convenience s | tore with | fueling | 100 % |
| | | % | | | | | % |
| | | % | | | | | % |
| | | % | | | | | % |
| 6. | Plan Drawings within E&S Plans waters, discharge points, E&S ar | s and PCSM Plans sho nd PCSM BMPs, and dra | wing topo ainage pat | graphy, project site terns are attached. | and LC | D boundar | ries, surface |
| 7. | Report latitude and longitude at the c | enter of the proposed di | sturbed ar | ea (decimal degree | s). | | |
| | Latitude: 40.489604° N Lo | ngitude: <u>-78.036794°V</u> | <u>V</u> | | | | |
| 8. | Horizontal Reference Datum: | NAD of 1927 🛛 NAI | D of 1983 | ☐ WGS of 198 | 34 🗆 | Unknown | |

| | EARTH DISTURBANCE INFORMATION (CONT | INUED) revised 3/15 | 5/22 | | | | | | | | | | |
|------|--|--------------------------|-----------------------------|--|--|--|--|--|--|--|--|--|--|
| 9. | There will be off-site construction support activities. $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$ | No | | | | | | | | | | | |
| 10. | If Yes, identify the nature of known off-site support activities whose dist | urbance is included in | #1, above: | | | | | | | | | | |
| | Description of Off-Site Support Activity | Distance from Site | Disturbance Area | | | | | | | | | | |
| | | mi | acres | | | | | | | | | | |
| | mi acres | | | | | | | | | | | | |
| 11. | 11. Identify any other off-site support activities whose disturbance is not included in #1, above (see instructions). | | | | | | | | | | | | |
| | Description of Off-Site Support Activity | Distance from Site | Disturbance Area | | | | | | | | | | |
| | | mi | acres | | | | | | | | | | |
| | | mi | acres | | | | | | | | | | |
| 12. | Check the appropriate box concerning fill material (see instructions): | | | | | | | | | | | | |
| | $oxed{oxed}$ No fill material is expected to be imported to the project site. | | | | | | | | | | | | |
| | It is expected that fill will be needed for this project. The source of environmental due diligence when identified. | of fill has not yet been | determined but will undergo | | | | | | | | | | |
| | It is expected that fill will be needed for this project. The applicant has identified the source of the fill and has determined the material to be clean fill. DEP's online Certification of Clean Fill form has been submitted. | | | | | | | | | | | | |
| | It is expected that fill will be needed for this project, which is located on a site that is being remediated to Act 2 standards and will be utilized in accordance with DEP standards under that program. | | | | | | | | | | | | |
| | ☐ It is expected that fill will be needed for this project. The applicant has identified the source of the fill and has determined it to be regulated fill. The regulated fill is authorized on the project site under a Waste Management General Permit No. WMGR096 authorization dated: | | | | | | | | | | | | |
| | It is expected that fill will be needed for this project, which is not on an Act 2 site. The applicant has identified the fill and has determined that it does not meet criteria for clean fill. The applicant is seeking authorization to use the regulated fill from DEP's Waste Management Program. | | | | | | | | | | | | |
| 13. | The site is enrolled in DEP's Act 2 Program. | | ☐ Yes ⊠ No | | | | | | | | | | |
| 14. | The site was previously enrolled in DEP's Act 2 Program and cleanup s | tandards have been m | et. 🗌 Yes 🖾 No | | | | | | | | | | |
| 15. | Is Act 537 sewage planning approval needed for this project? | es 🗌 No | | | | | | | | | | | |
| | The Act 537 approval letter is attached to the NOI. | (will be obtained befo | re construction) N/A | | | | | | | | | | |
| 16. | A Chapter 105 permit or authorization is required. Yes No |) | | | | | | | | | | | |
| 17. | If Yes, identify the necessary authorization. ☐ Joint Permit ☐ Ge | eneral Permit 🔲 W | aiver | | | | | | | | | | |
| 18. | Other DEP/CCD permits or authorizations are required. | ⊠ No | | | | | | | | | | | |
| 19. | If Yes, identify the necessary authorizations. | | | | | | | | | | | | |
| | COMPLIANCE HISTOR | Y | | | | | | | | | | | |
| | s/Is the applicant, facility owner or operator in violation of any DEP reg edule of compliance at this or any other facility or project site within the p | | or ☐ Yes ⊠ No | | | | | | | | | | |
| | Yes," list each permit, order or schedule of compliance and provide curvide information on all permits. | rent compliance status | s. Use additional sheets to | | | | | | | | | | |
| Per | mit Program: | Permit No.: | | | | | | | | | | | |
| Brie | ef Description of Non-Compliance: | | | | | | | | | | | | |
| Ste | ps Taken to Achieve Compliance | Date(s) Compliance | Achieved | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Cur | rent Compliance Status: | nnliance | | | | | | | | | | | |

| Rev. 4/202 | |
|-----------------|------------|
| 3800-PM-BCW405b | PAG-02 NOI |

| | ble | | TMDL? | | | | ple | | TMDL? | | | | | % □ | | scharges. | | | olicant, and |
|----------------------------------|--|------------------|--------------------------|--|--|--|--|------------------|--------------------------|--|--|--|--|--|--|---|---|--|--|
| | ☐ Not Applicable | | Impaired? | | | | ☐ Not Applicable | | Impaired? | | | | | □ Yes | n sewer: | of all such dis | | | ned by the app |
| | | | Ch. 93 Class. | WWF | WWF | | | | Ch. 93 Class. | WWF | WWF | | | an MS4 or CSS? | scharging to storr | uency and volume | |] No | property not own |
| revised 3/15/22 | oelow (see instructions). | RECEIVING WATERS | Non-Surface Waters | | | | id stabilization are complete and provide the information requested below. | RECEIVING WATERS | Non-Surface Waters | | | | | Is the storm sewer an MS4 or CSS? | Discharge points discharging to storm sewer: | rage. Describe the frequency and volume of all such discharges. | | ers? 🗌 Yes 🛚 | if the discharge will be to |
| | ion requested b | RE | Ches. Bay? | | \boxtimes | | ıplete and prov | RE | Ches. Bay? | \boxtimes | \boxtimes | | | Yes 🛭 No | | ing permit cove | | ng surface wate | ater discharge |
| STORMWATER DISCHARGE INFORMATION | List all stormwater discharge points during construction and provide the information requested below (see instructions). | | Name of Receiving Waters | Wetlands tributary to UNT Juniata River | Wetlands tributary to UNT Juniata River | | struction and stabilization are com | | Name of Receiving Waters | Wetlands tributary to UNT Juniata River | Wetlands tributary to UNT Juniata River | | | sewer system? | | harges that are expected to occur during permit coverage. | oated. | Will there be any new or increased discharge to non-surface waters prior to reaching surface waters? | If Yes, the applicant is expected to 1) secure legal authority for the non-surface water discharge if the discharge will be to property not owned by the applicant, and 2) provide for adequate E&S controls to prevent accelerated erosion. |
| | rge points <u>during c</u> | LONGITUDE | Degrees | 78.03638° W | 78.03750° W | | List all stormwater discharge points <u>after construction an</u> | LONGITUDE | Degrees | 78.03638° W | 78.03750° W | | | Will any of the points identified above discharge to a storm | ner/operator: | Identify and describe all non-stormwater discharges that a | $\ igtimes$ No non-stormwater discharges are anticipated. | ncreased discharge | pected to 1) secure &S controls to prev |
| | tormwater discha | LATITUDE | Degrees | 40.48861° N | 40.48916° | | tormwater discha | LATITUDE | Degrees | 40.48861° N | 40.48916° | | | of the points iden | Name of storm sewer owner/operator: | and describe all n | ion-stormwater di | e be any new or i | he applicant is ex le for adequate E |
| | 1. List all st | Discharge | Point No. | 002 | 001 | | 2. List all st | Discharge | Point No. | 002 | 001 | | | 3. Will any | Name of | 4. Identify a | u oN ⊠ | 5. Will there | If Yes, th 2) provid |

| | STORMWATER DISCHARGE INFORMATION (CONTINUED) revised 3/15/22 |
|----|---|
| 6. | For each discharge to an impaired water (with or without a TMDL, including Ches. Bay) complete the information below. |
| | Discharge Point No.: 001 |
| | Stormwater will be managed using: Non-discharge alternative ABACT BMP(s) |
| | Description of E&S BMP(s): Compost Filter Sock & Inlet Filter Bags |
| | Description of PCSM BMP(s): Subsurface Infiltration Bed & Water Quality Filter |
| | WLA(s) in a TMDL apply to this discharge: Yes No |
| | If Yes, describe how the discharge will comply with the WLA(s): |
| | |
| | Discharge Point No.: 002 |
| | Stormwater will be managed using: Non-discharge alternative ABACT BMP(s) |
| | Description of E&S BMP(s): Compost Filter Sock & Inlet Filter Bags |
| | Description of PCSM BMP(s): Subsurface Infiltration Bed & Water Quality filter |
| | WLA(s) in a TMDL apply to this discharge: ☐ Yes ☒ No |
| | If Yes, describe how the discharge will comply with the WLA(s): |
| | |
| | Discharge Point No.: |
| | Stormwater will be managed using: Non-discharge alternative ABACT BMP(s) |
| | Description of E&S BMP(s): |
| | Description of PCSM BMP(s): |
| | WLA(s) in a TMDL apply to this discharge: |
| | If Yes, describe how the discharge will comply with the WLA(s): |
| | |
| | Discharge Point No.: |
| | Stormwater will be managed using: Non-discharge alternative ABACT BMP(s) |
| | Description of E&S BMP(s): |
| | Description of PCSM BMP(s): WLA(s) in a TMDL apply to this discharge: |
| | WLA(s) in a TMDL apply to this discharge: |
| | in res, describe now the discharge will comply with the WLA(s). |
| | Discharge Point No.: |
| | Stormwater will be managed using: Non-discharge alternative ABACT BMP(s) |
| | Description of E&S BMP(s): |
| | Description of PCSM BMP(s): |
| | WLA(s) in a TMDL apply to this discharge: |
| | If Yes, describe how the discharge will comply with the WLA(s): |
| | |

| | E | | | | | | | | | | | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

| CERTIFICATION FOR PA | AG-02 APPLICANTS |
|--|--|
| I certify under penalty of law that this application and all related supervision in accordance with a system designed to assure information submitted. Based on my own knowledge and on gathering the information, the information submitted is, to the best The responsible official's signature also verifies that the activity is E&S Plan, PPC Plan, PCSM Plan, and other controls are being or and effluent limits are attained. I am aware that there are significated possibility of fine and imprisonment or both for knowing violations 18 Pa. C.S.A. § 4904. | that qualified personnel properly gather and evaluate the inquiry of the person or persons directly responsible for it of my knowledge and belief, true, accurate, and complete. eligible to participate in the NPDES permit, and that BMP's, r will be, implemented to ensure that water quality standards cant penalties for submitting false information, including the |
| I grant permission to the agencies responsible for the permitting the project site for inspection purposes. I will abide by the condipermit issuance. | of this work, or their duly authorized representative to enter tions of the permit if issued and will not begin work prior to |
| (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 § is responsible for decision-making regarding environmental compor more manufacturing, production, or operating facilities of the a which govern the operation of regulated facility including having recommendations, and initiating and directing other comprehenvironmental compliance with environmental laws and regulation systems are established or actions taken to gather complete and a | liance functions for $\underline{M \& G Realty, Inc.}$, the manager of one pplicant and am authorized to make management decisions explicit or implicit duty of making major capital investment tensive measures to assure the applicant's long termons; and I am responsible for ensuring that the necessary |
| (choose one of the following; not applicable for individuals): | |
| ∑ The responsible corporate officer | ent secretary treasurer of M&G Realty, Inc. Entity name |
| The person either holding a position designated or individed Authority" filed with the Pennsylvania Department of State as the person listed in the LLC's most current and active operational Please attach the applicable "Certificate of Limited Liability Canagreement is attached, please identify the page and paragraph | a position/person with the authority to bind the company OR ng agreement as having the authority to bind the company. ompany Authority" or operating agreement. If the operating |
| The general partner of partnership/LP/LLP | |
| Entity name The principal executive officer or ranking elected official of | Municipality/State/Federal/other public agency |
| Power of Attorney/delegation of contractual authority (docume be provided) for | ity name entation supporting delegation of contracting authority must |
| | |
| | Descident |
| Tim Rutter Applicant Name (type or print legibly) | President Official Title |
| - 04 | - 1 /- |
| I em / Calles | 2/14/22 |
| Applicant Signature | Date Signed ' |

CERTIFICATION FOR OPERATORS

I understand that I am assuming joint and severable responsibility, coverage, and liability under the permit for all duties, responsibilities, and non-compliance with the Chapter 102 permit, as a co-permittee of this permit coverage. I certify that I will implement the requirements of the permit and the approved design plans and will notify the permittee and the agency that issued permit coverage prior to implementing changes to the plans.

| Operator Name (type or print legibly) | Official Title | |
|---------------------------------------|----------------|--|
| | | |
| Operator Signature | Date Signed | |
| | | |
| | | |
| Operator Name (type or print legibly) | Official Title | |
| | | |
| Operator Signature | Date Signed | |