GENERAL INFORMATION FORM AUTHORIZATION APPLICATION

Prepared	05/2021
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This form provides general information, as required, for this Minor Permit Modification Application.

Table of Contents

FORM GENERAL INFORMATION...... This Minor Permit Modification

F-GI-AT.doc 5/29/2021



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION

GENERAL INFORMATION FORM – AUTHORIZATION APPLICATION

Before completing this General Information Form (GIF), read the step-by-step instructions provided in this application package. This version of the General Information Form (GIF) must be completed and returned with any program-specific application being submitted to the Department. $Prepared\ 05/2021$

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Related II	D#s (If Known)			DEF	USE O	NLY	
Client ID# 290720	APS ID#			Date Rece	eived & Ger	neral Note	es
Site ID# 239963	Auth ID#						
Facility ID# 100277							
	CLIENT INFO	ORMAT	ION				
DEP Client ID#	Client Type / Code						
290720	LLC						
Organization Name or Register	ed Fictitious Name		Employer II)# (EIN)	Dun &	Bradstı	reet ID#
Westmoreland Sanitary Landfill	l, LLC		72-1288487		00-687-	<i>-9067</i>	
Individual Last Name	First Name		MI	Suffi	ix SSN		
N/A							
Additional Individual Last Name N/A	e First Name		MI	Suffi	ix SSN		
Mailing Address Line 1		Mailine	Address Li	no 2			
111 Conner Lane		Manny	Address En	IIG Z			
Address Last Line – City	Sta	te	ZIP+4	С	ountry		
Belle Vernon	PA		15012-4519		USA		
Client Contact Last Name	First Name)		MI		Sı	ıffix
Client Contact Title				Phone		Ex	ct
Email Address				FAX			
	SITE INFO	RMATIC	ON				
DEP Site ID# Site Name							
239963 Sanitary La	andfill						
EPA ID# N/A	Estimated Number of	of Emplo	yees to be P	resent at	Site	12-14	
Description of Site							
Municipal Solid Waste Landfill							
County Name	Municipality			City	Boro	Twp	State
Westmoreland County	Rostraver Township				U		PA
County Name	Municipality			City ☐	Boro	Twp	State
Site Location Line 1		Site Loc	ation Line 2				
111 Conner Lane							
Site Location Last Line - City		State	ZIP+4				
Belle Vernon		PA	<i>15012-4519</i>)			
Detailed Written Directions to S							
From Interstate 70 West, take the			v <mark>rol Bouleva</mark> i	d and pro	oceed ap	proxim	ately 0.4
miles to the site entrance on the							
Site Contact Last Name	First Name	•		MI		Su	ıffix
Stork	Nick	0:1 - 0	. 4 4 1				
Site Contact Title	•		ntact Firm	. 1 T			
Director & Chief Financial Offi	cer		Environmenta				
Mailing Address Line 1 111 Conner Lane		waiiing	Address Line	e 2			
111 COMMCI Lanc							

Mailing Address Last Line – City		State ZIP+4			
Belle Vernon		PA 15012-	4519		
Phone Ext	FAX	Email Address			
412-426-5432	724-929-7740	nstork@nobleenv	riro.com		
NAICS Codes (Two- & Three-Digit Codes	- List All That Apply)		6-Digit Code	(Optional)	
562	11 77		3	(-1 /	
Client to Site Relationship					
OWNOP					
O W I VOI					
	FACILITY IN	FORMATION			
Modification of Existing Facility				Yes	No
1. Will this project modify an exist	sting facility, syster	n, or activity?		\boxtimes	
2. Will this project involve an add			activity?	\boxtimes	
If "Yes", check all relevant facilit				below.	_
Facility Type	DEP Fac ID#	Facility Type			DEP Fac ID#
Air Emission Plant			als Mining Operati		
Beneficial Use (water)		 Laboratory Loca		_	
Blasting Operation			Cleanup Location		
Captive Hazardous Waste Operation			mt/LandRecyProj		
Coal Ash Beneficial Use Operation		_ Municipal Waste			100277
					100277
Coal Mining Operation Coal Pillar Location		_ =	achment Location	¹	
Coal Pillar Location		Oil & Gas Locati		–	
Commercial Hazardous Waste Operatio	າ		Poll Control Faci	lity	
Dam Location		_ Public Water Su			
Deep Mine Safety Operation -Anthracite		Radiation Facilit	y		
	6	Residual Waste	Operation		
☐ Deep Mine Safety Operation -Bituminou					
Deep Mine Safety Operation -Bituminou Deep Mine Safety Operation -Ind Minera		Storage Tank Lo	•		
	ls		ocation	_	
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Mailing Address Line 1 1331 State Avenue

Mailing Address Line 2

Phone Ext FAX Email Address MZucatti@civildesign.org	Address Last Line - City	у	State	ZIP+4
### Time Schedules Project Milestone (Optional)	Coraopolis		PA	15108
Time Schedules N/A Project Milestone (Optional) 1. Have you informed the surrounding community and addressed any		Ext FAX	Email Address	
1. Have you informed the surrounding community and addressed any Yes No concerns prior to submitting the application to the Department? 2. Is your project funded by state or federal grants? Note: If 'Yes', specify what aspect of the project is related to the grant and provide the grant source, contact person and grant expiration date. Aspect of Project Related to Grant Grant Source: Grant Contact Person: Grant Expiration Date: 3. Is this application for an authorization on Appendix A of the Land Use Yes No Policy? (For referenced list, see Appendix A of the Land Use Policy attached to Gif instructions) Note: If "No" to Question 3, the application is not subject to the Land Use Policy. If "Yes' to Question 3, the application is subject to this policy and the Applicant should answer the additional questions in the Land Use Information section. LAND USE INFORMATION (Not Applicable) Note: Applicants are encouraged to submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances. 1. Is there an adopted county or multi-county comprehensive plan?	412-299-2700	<i>157 412-299-2922</i>	MZucatti@civildesi	gn.org
1. Have you informed the surrounding community and addressed any	Time Schedules	Project Milestone (Optional)		
2. Is your project funded by state or federal grants? Note: If Yes, specify what aspect of the project is related to the grant and provide the grant source, contact person and grant expiration date. Aspect of Project Related to Grant Grant Source: Grant Contact Person: Grant Expiration Date: 3. Is this application for an authorization on Appendix A of the Land Use Yes No Policy? (For referenced list, see Appendix A of the Land Use Policy attached to GIF instructions) Note: If "No" to Question 3, the application is not subject to the Land Use Policy. If "Yes" to Question 3, the application is subject to this policy and the Applicant should answer the additional questions in the Land Use Information section. **Note: Applicants are encouraged to submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances. 1. Is there an adopted county or multi-county comprehensive plan? Yes No 2. Is there an adopted municipal or multi-nunicipal comprehensive plan? Yes No 3. Is there an adopted county-wide zoning ordinance, municipal zoning Yes No 1. Is there an adopted county-wide zoning ordinance, municipal zoning Yes No 2. Is there an adopted county-wide zoning ordinance, municipal zoning Yes No 1. Is the an adopted county-wide zoning ordinance, municipal zoning Yes No 2. Is the an adopted county-wide zoning ordinance, municipal zoning Yes No Note: If the Applicant answers "No" to either Questions 1, 2 or 3, the provisions of the PA MPC are not applicable and the Applicant does not need to respond to questions 4 and 5 below. If the Applicant answers "Yes" to questions 1, 2 and 3, the Applicant should respond to questions 4 and 5 below. If the Applicant does not need to respond to questions 4 and 5 below. If the Applicant does not need to respond to questions 4 and 5 below. If the Applicant does not need to respond to questions 4 and 5 below.	N/A			
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Sour project funded by state or federal grants? Yes No	1. Have you inform	ned the surrounding commu	inity and addressed an	y 🗌 Yes 🛛 No
Note: If "Yes", specify what aspect of the project is related to the grant and provide the grant source, contact person and grant expiration date. Aspect of Project Related to Grant Grant Source: Grant Contact Person: Grant Expiration Date: 3. Is this application for an authorization on Appendix A of the Land Use Yes No Policy? (For referenced list, see Appendix A of the Land Use Policy attached to GIF instructions) Note: If "No" to Question 3, the application is not subject to the Land Use Policy. If "Yes" to Question 3, the application is subject to this policy and the Applicant should answer the additional questions in the Land Use Information section. **Note: Applicants are encouraged to submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances. 1. Is there an adopted county or multi-county comprehensive plan? Yes No 2. Is there an adopted municipal or multi-municipal comprehensive plan? Yes No 3. Is there an adopted county-wide zoning ordinance, municipal zoning Yes No Note: If the Applicant answers "No" to either Questions 1, 2 or 3, the provisions of the PA MPC are not applicable and the Applicant does not need to respond to questions 4 and 5 below. If the Applicant answers "Yes" to questions 1, 2 and 3, the Applicant should respond to questions 4 and 5 below. If the Applicant answers "Yes" to questions of the zoning ordinance or Yes No does the proposed project meet the provisions of the zoning approval has been received, attach documentation.				
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Aspect of Project Related to Grant Grant Source: Grant Contact Person: Grant Expiration Date: 3. Is this application for an authorization on Appendix A of the Land Use Yes No Policy? (For referenced list, see Appendix A of the Land Use Policy attached to GIF instructions) Note: If "No" to Question 3, the application is not subject to the Land Use Policy. If "Yes" to Question 3, the application is subject to this policy and the Applicant should answer the additional questions in the Land Use Information section. Note: Applicants are encouraged to submit copies of local land use approvals or other evidence of compliance with local comprehensive plans and zoning ordinances. 1. Is there an adopted county or multi-county comprehensive plan? Yes No 2. Is there an adopted municipal or multi-municipal comprehensive plan? Yes No 3. Is there an adopted county-wide zoning ordinance, municipal zoning Yes No vordinance or joint municipal zoning ordinance? Note: If the Applicant answers "No" to either Questions 1, 2 or 3, the provisions of the PA MPC are not applicable and the Applicant does not need to respond to questions 4 and 5 below. If the Applicant answers "Yes" to questions 1, 2 and 3, the Applicant should respond to questions 4 and 5 below. If the Applicant answers "Yes" to questions 1, 2 and 3, the Applicant should respond to questions 4 and 5 below. If the Applicant documentation.			ted to the grant and provide the	grant source, contact person
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does the proposed project have zoning approval? If zoning approval has been received, attach documentation.		•		•
received, attach documentation.				
·			ii ii zoning approvarnas bee	11
			se I etters for the project?	Yes No

COORDINATION INFORMATION

<u>Note</u>: The PA Historical and Museum Commission must be notified of proposed projects in accordance with DEP Technical Guidance Document 012-0700-001 and the accompanying Cultural Resource Notice Form.

If the activity will be a mining project (i.e., mining of coal or industrial minerals, coal refuse disposal and/or the operation of a coal or industrial minerals preparation/processing facility), respond to questions 1.0 through 2.5 below.

If the activity will not be a mining project, skip questions 1.0 through 2.5 and begin with question 3.0.

1.0	Is this a coal mining project? If "Yes", respond to 1.1-1.6. If "No", skip to Question 2.0.	Yes	No
1.1	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be equal to or greater than 200 tons/day?	Yes	No
1.2	Will this coal mining project involve coal preparation/ processing activities in which the total amount of coal prepared/processed will be greater than 50,000 tons/year?	Yes	No
1.3	Will this coal mining project involve coal preparation/ processing activities in which thermal coal dryers or pneumatic coal cleaners will be used?	Yes	No
1.4	For this coal mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	Yes	No
1.5	Will this coal mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet?	Yes	No
1.6	Will this coal mining project involve underground coal mining to be conducted within 500 feet of an oil or gas well?	Yes	No
2.0	Is this a non-coal (industrial minerals) mining project? If "Yes", respond to 2.1-2.6. If "No", skip to Question 3.0.	Yes	No
2.1	Will this non-coal (industrial minerals) mining project involve the crushing and screening of non-coal minerals other than sand and gravel?	Yes	No
2.2	Will this non-coal (industrial minerals) mining project involve the crushing and/or screening of sand and gravel with the exception of wet sand and gravel operations (screening only) and dry sand and gravel operations with a capacity of less than 150 tons/hour of unconsolidated materials?	Yes	No
2.3	Will this non-coal (industrial minerals) mining project involve the construction, operation and/or modification of a portable non-metallic (i.e., non-coal) minerals processing plant under the authority of the General Permit for Portable Non-metallic Mineral Processing Plants (i.e., BAQ-PGPA/GP-3)?	Yes	No
2.4	For this non-coal (industrial minerals) mining project, will sewage treatment facilities be constructed and treated waste water discharged to surface waters?	Yes	No
2.5	Will this non-coal (industrial minerals) mining project involve the construction of a permanent impoundment meeting one or more of the following criteria: (1) a contributory drainage area exceeding 100 acres; (2) a depth of water measured by the upstream toe of the dam at maximum storage elevation exceeding 15 feet; (3) an impounding capacity at maximum storage elevation exceeding 50 acre-feet?	Yes	No

3.0	Will your project, activity, or authorization have anything to do with a well related to oil or gas production, have construction within 200 feet of, affect an oil or gas well, involve the waste from such a well, or string power lines above an oil or gas well? If "Yes", respond to 3.1-3.3. If "No", skip to Question 4.0.		Yes		No
3.1	Does the oil- or gas-related project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water (including wetlands)?		Yes		No
3.2	Will the oil- or gas-related project involve discharge of industrial wastewater or stormwater to a dry swale, surface water, ground water or an existing sanitary sewer system or storm water system? If "Yes", discuss in <i>Project Description</i> .		Yes		No
3.3	Will the oil- or gas-related project involve the construction and operation of industrial waste treatment facilities?		Yes		No
4.0	Will the project involve a construction activity that results in earth disturbance? If "Yes", specify the total disturbed acreage. 4.0.1 Total Disturbed Acreage The total disturbed area is not chan	_		⊠ permit	No
	application. Overall facility limits in	ot ch		<u> </u>	NI-
5.0	Does the project involve any of the following? If "Yes", respond to 5.1-5.3. If "No", skip to Question 6.0.	<u> </u>	Yes		No
5.1	Water Obstruction and Encroachment Projects – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a watercourse, floodway or body of water?		Yes		No
5.2	Wetland Impacts – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a wetland?		Yes		No
5.3	Floodplain Projects by the commonwealth, a Political Subdivision of the commonwealth or a Public Utility – Does the project involve any of the following: placement of fill, excavation within or placement of a structure, located in, along, across or projecting into a floodplain?		Yes		No
6.0	Will the project involve discharge of stormwater or wastewater from an industrial activity to a dry swale, surface water, ground water or an existing sanitary sewer system or separate storm water system? Discharges not changed by this application.		Yes		No
7.0	Will the project involve the construction and operation of industrial waste treatment facilities? No waste treatment proposed by this application.		Yes		No
8.0	Will the project involve construction of sewage treatment facilities, sanitary sewers, or sewage pumping stations? If "Yes", indicate estimated proposed flow (gal/day). Also, discuss the sanitary sewer pipe sizes and the number of pumping stations/treatment facilities/name of downstream sewage facilities in the <i>Project Description</i> , where applicable. 8.0.1 Estimated Proposed Flow (gal/day) Sewage/leachate flows not		Yes		No
	application.	от спа	ngea by		
9.0	Will the project involve the subdivision of land, or the generation of 800 gpd or more of sewage on an existing parcel of land or the generation of an additional 400 gpd of sewage on an already-developed parcel, or the generation of 800 gpd or more of industrial wastewater that would be discharged to an existing sanitary sewer system?		Yes		No
	9.0.1 Was Act 537 sewage facilities planning submitted and approved by DEP? If "Yes" attach the approval letter. Approval required prior to 105/NPDES approval.		Yes		No

10.0	Is this project for the beneficial use of biosolids for land application within Pennsylvania? If "Yes" indicate how much (i.e. gallons or dry tons per year).		Yes		No
	 10.0.1 Gallons Per Year (residential septage) 10.0.2 Dry Tons Per Year (biosolids) Varies – 60 dry tons ma	v ne	r acre		
11.0	Does the project involve construction, modification or removal of a dam?	77. PC	Yes		No
	If "Yes", identify the dam.	_			
	11.0.1 Dam Name				
12.0	Will the project interfere with the flow from, or otherwise impact, a dam?		Yes	\boxtimes	No
	If "Yes", identify the dam.				
13.0	12.0.1 Dam Name Will the project involve operations (excluding during the construction		Yes	\boxtimes	No
13.0	period) that produce air emissions (i.e., NOX, VOC, etc.)? If "Yes", identify	ш	100		140
	each type of emission followed by the amount of that emission.				
	13.0.1 Enter all types & amounts No change in air emissions by the	s app	lication	1.	
	of emissions; separate				
44.0	each set with semicolons.	$\overline{}$	Vac	\boxtimes	No
14.0	Does the project include the construction or modification of a drinking water supply to serve 15 or more connections or 25 or more people, at	Ш	Yes		No
	least 60 days out of the year? If "Yes", check all proposed sub-facilities.				
	14.0.1 Number of Persons Served				
	14.0.2 Number of Employee/Guests				
	14.0.3 Number of Connections				
	14.0.4 Sub-Fac: Distribution System		Yes		No
	14.0.5 Sub-Fac: Water Treatment Plant		Yes Yes		No No
	14.0.6 Sub-Fac: Source 14.0.7 Sub-Fac: Pump Station		Yes	H	No
	14.0.8 Sub Fac: Transmission Main		Yes	H	No
	14.0.9 Sub-Fac: Storage Facility		Yes		No
15.0	Will your project include infiltration of storm water or waste water to		Yes	\boxtimes	No
	ground water within one-half mile of a public water supply well, spring or				
40.0	infiltration gallery?				NI-
16.0	Is your project to be served by an existing public water supply? If "Yes", indicate name of supplier and attach letter from supplier stating that it will	Ш	Yes	\boxtimes	No
	serve the project.				
	16.0.1 Supplier's Name Water supply/quantity not changed by this	appli	ication.		
	16.0.2 Letter of Approval from Supplier is Attached		Yes		No
17.0	Will this project involve a new or increased drinking water withdrawal		Yes	\boxtimes	No
	from a stream or other water body? If "Yes", should reference both Water				
	Supply and Watershed Management. 17.0.1 Stream Name Water supply/quantity not changed by this app	licati	on		
18.0	Will the construction or operation of this project involve treatment,	П	Yes	\boxtimes	No
10.0	storage, reuse, or disposal of waste? If "Yes", indicate what type (i.e.,	ш	. 00		
	hazardous, municipal (including infectious & chemotherapeutic), residual) and				
	the amount to be treated, stored, re-used or disposed.				
-	18.0.1 Type & Amount This application presents a revised Operation	s Pla			
19.0	Will your project involve the removal of coal, minerals, etc. as part of any	Ш	Yes	\boxtimes	No
	earth disturbance activities? This application does not change the				
20.0	overall limits of disturbance for the facility. Does your project involve installation of a field constructed underground	П	Yes		No
20.0	storage tank? If "Yes", list each Substance & its Capacity. Note: Applicant	Ц	162		INU
	may need a Storage Tank Site Specific Installation Permit.				
	20.0.1 Enter all substances & No storage tank sizing or stored to	nater	ials cha	nge	
	capacity of each; separate proposed by this application.			C	
	each set with semicolons.				

1300-PM-BIT0001 5/2012

gr ea Sit	pes your project involve installation reater than 21,000 gallons capacity at ach Substance & its Capacity. Note: Act the Specific Installation Permit. 1.0.1 Enter all substances & capacity of each; separate each set with semicolons.	an existing facility? If "Yes", list Applicant may need a Storage Tank		Yes		No
wi Re Su Sp	bes your project involve installation of hich will contain a highly hazardous egulated Substances List, 2570-BK abstance & its Capacity. Note: Applic pecific Installation Permit. 2.0.1 Enter all substances & capacity of each; separate	s substance as defined in DEP's I-DEP2724? If "Yes", list each ant may need a Storage Tank Site See Item 21.0 above for information	on on	Yes propose	⊠ ed pro	No ocess
	each set with semicolons.					
wi Տւ Տր 23	pes your project involve installation of the a total AST capacity greater than abstance & its Capacity. Note: Applicate pecific Installation Permit. 3.0.1 Enter all substances & capacity of each; separate each set with semicolons.	21,000 gallons? If "Yes", list each ant may need a Storage Tank Site This is an existing facility. See It information on proposed process				No
24.0 W	ill the intended activity involve the use	e of a radiation source?		Yes		No
	CEI	RTIFICATION				
I certify that I have the authority to submit this application on behalf of the applicant named herein and that the information provided in this application is true and correct to the best of my knowledge and information. Type or Print Name Michael E. Zucatti, P.E.						
1/1/2		Senior Project Manager		5/	/29/20	021
Signature		Title		Da	ate	