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CERTIFIED MAIL
RETURN RECEIPT REQUESTED
RECEIPT #7021 0350 0000 4156 1502

September 27, 2022

Lehigh County Commissioners 435 Hamilton Street Allentown, PA 18101

Re: Individual NPDES Permit Application

2951 Betz Court Site

CRG Services Management, LLC Lowhill Township, Lehigh County, PA ACT 14, 67, 68 & 127 NOTIFICATION

Dear Commissioners:

Acts 14, 67, 68, and 127, which amended the Municipalities Planning Code, direct state agencies to consider comprehensive plans and zoning ordinances when reviewing applications for permitting of facilities and infrastructure, and specify that state agencies may rely upon comprehensive plans and zoning ordinances under certain conditions as described in Sections 619.2 and 1105 of the Municipalities Planning Code. The Pennsylvania Department of Environmental Protection's Policy for Consideration of Local Comprehensive Plans and Zoning Ordinances in DEP Review of Permits for Facilities and Infrastructure (DEP's Land Use Policy) provides direction and guidance to DEP staff, permit applicants, and local and county governments for the implementation of Acts 14, 67, 68 and 127 of 2000. This policy can be found at www.dep.state.pa.us, keyword: Land Use.

Enclosed please find the County Notification of Planned Land Development for Chapter 102 Permits that is to be submitted with our permit application to DEP for an NPDES Permit for Stormwater Discharges Associated with Construction Activities. Please complete the attached form and return within 30 days to the Agent of Applicant:

Agent of Applicant: Joshua D. Hoffman, P.E.

Snyder, Secary & Associates, A Division of Pennoni

Address of Agent: 2000 Linglestown Road

Suite 304

Harrisburg, PA 17110

(717) 975-7863

Please do not send this form to DEP, as we must include the County Notification of Planned Land Development for Chapter 102 Permits with our permit application. If we do not receive a response from you within 30 days, we shall proceed to submit our permit application to DEP without the County Notification of Planned Land Development for Chapter 102 Permits. If the County Notification of Planned Land Development for Chapter 102 Permits is not submitted with our permit application, and we provide proof to DEP that we attempted to obtain it, DEP will assume there are no substantive land use conflicts and proceed with the normal application review process.

If you have any questions, please do not hesitate to contact me at (717) 975-7863 or jhoffman@pennoni.com. Thank you.

Sincerely,

Snyder, Secary & Associates, LLC

Joshua D. Hoffman, P.E.

Senior Engineer

cc: File

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COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

COUNTY NOTIFICATION OF PLANNED LAND DEVELOPMENT FOR CHAPTER 102 PERMITS

PROJECT INFORMATION (COMPLETED BY APPLICANT)						
Applicant Name:	CRG Services Management, LLC		Contact Name:	Fred Ferraro		
Applicant Address:	300 Barr Harbor Drive, Suite 720		Contact Phone:	(610) 729-0838		
Applicant City, State, ZIP:	Conshohocken PA 19428		County:	Lehigh		
Description of Proposed La	nd Development and Stormwater Cor	ntrols:	Municipality:	Lowhill Township		
THE OVERALL PROJECT ENTAILS CONSTRUCTION OF ONE N WAREHOUSE (APPROXIMATELY 299,880 SQUARE FEET GROSS FLOOR AREA), TWO ACCESS DRIVEWAYS, PARK AREAS, UTILITIES, AND OTHER RELATED SITE IMPROVEMEN			Project Area:	±52 acres ☐ Phased		
			Disturbance:	±28 acres		
			Surface Waters F	Receiving Stormwater Discharges:		
THE PROJECT IS LOCATED ALONG BETZ COURT. Tax Parcel ID(s) Affected by Proposed Land Development:			□ Unnamed Tributary to Jordan Creek (HQ-CWF, MF)			
PIN: 545725755429			Discharge to: [MS4 Other SS CSS		
The following information wa	as submitted to the county for this pro	oject:				
☐ Land Development / Subdivision Plan ☐ E&S Plan ☐ PCSM Plan ☐ Other: Site Plan						
COUNTY PLAN INFORMATION (COMPLETED BY COUNTY)						
Name of county organization completing this assessment:						
1. Is there an adopted county or multi-county comprehensive plan?						
2. If Yes to #1, is the prop	osed project consistent with the coun	ity 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?						
5. If Yes to #3, list the date of the latest plan / update approved by DEP:						
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.				
Joshua D. Hoffman, P.E.						
Applicant Name Solve D. Hoffman		County Representative Name				
Applicant Signature		County Representative Signature				
Senior Engineer						
		County	Representative ⁻	Title		
09/27/2022						
Date of Signature		Date of	Signature			

7,517	U.S. Postal Service [™] CERTIFIED MAIL® RECEIPT Domestic Mail Only For delivery information, visit our website at www.usps.com®.
4156	Certified Mail Fee
0000	Extra Services & Fees (check box, add tee as appropriate) Return Receipt (hardcopy) \$ Seturn Receipt (electronic) Certified Mail Restricted Delivery Postmark Adult Signature Required Here Adult Signature Restricted Polivery Postmark Adult Signature Restricted Polivery Polivery
0320	Postage \$ 193 Total Postage and Fees
7021	Sent To Phe a County Commissioners Street and Apt. No., or PO Box No. City, State, ZIP-18-35 Hammelton the eet
	PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: □ Addressed to: □ D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No 3. Service Type □ Adult Signature □ Adult Signature Restricted Delivery □ Adult Signature Registered Mail Mail Restricted Delivery □ Collect on D			
Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No Service Type □ Adult Signature Restricted Delivery Perified Mail® □ Certified Mail®	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DEL	IVERY
Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No Service Type □ Adult Signature Restricted Delivery Perified Mail® □ Certified Mail®	Complete items 1, 2, and 3.	A. Signature	
or on the front if space permits. 1. Article Addressed to: D. Is delivery address different from item 1? Yes	Print your name and address on the reverse so that we can return the card to you.		
D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No No	or on the front if space permits.	B. Received by (Printed Name)	C. Date of Delivery
3. Service Type Adult Signature Adult Signature Restricted Delivery Adult Signature Restricted Delivery Certified Mail Restricted Delivery Collect on Delivery Colle	Lehigh Country Commissioners 455 Hamulton Street	D. Is delivery address different from iteleft If YES, enter delivery address below.	m 1? ☐ Yes w: ☐ No
PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt	9590 9402 6062 0125 9904 77 2. Article Number (Transfer from service label) 7021 0350 0000 4156 1502	□ Adult Signature □ Adult Signature Restricted Delivery □ Sertified Mail® □ Certified Mail Restricted Delivery □ Collect on Delivery □ Collect on Delivery Restricted Delivery □ Insured Mail	egistered Mail™ egistered Mail Restricted elivery eturn Receipt for erchandise gnature Confirmation™ gnature Confirmation
	PS Form 3811, July 2015 PSN 7530-02-000-9053	Dome	stic Return Receipt

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