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April 19, 2022

VIA EMAIL

EWTPX 17000

Mr. Zachary Barner, Director of Planning
East Whiteland Township
209 Conestoga Road
Frazer, PA 19355

**Re: East Whiteland Township
Act 537 Special Study
Sale of Township Sanitary Sewer System**

Dear Mr. Barner:

As you are aware, East Whiteland Township is in the process of selling their sanitary sewerage system to Aqua Pennsylvania Wastewater Inc. Per PaDEP requirements, adoption of the Special Study requires the Township's Planning Commission to review the study and complete the enclosed Component 4A - Municipal Planning Agency Review.

We respectfully request this matter be placed on the Commissions earliest agenda.

Thank you in advance for your attention to this matter. Should you have any questions, please feel free to contact me.

Sincerely,

PENNONI ASSOCIATES INC.

Charles Faulkner, PE
Township Wastewater Engineer

CF/rmc

cc: John Nagel, Manager, East Whiteland Township, via email
John Neild, Director of Public Works, East Whiteland Township, via email
Joseph J. McGrory Jr., Esquire, Hamburg, Rubin, Mullin, Maxwell & Lupin, PC, via email
Aqua Pennsylvania Wastewater, Inc., via email



INSTRUCTIONS FOR COMPLETING COMPONENT 4A MUNICIPAL PLANNING AGENCY REVIEW

Remove and recycle these instructions prior to mailing component to the approving agency.

Background

This component, Component 4, is used to obtain the comments of planning agencies and/or health departments having jurisdiction over the project area. It is used in conjunction with other planning module components appropriate to the characteristics of the project proposed.

Who Should Complete the Component?

The component should be completed by any existing municipal planning agency, county planning agency, planning agency with areawide jurisdiction, and/or health department having jurisdiction over the project site. It is divided into sections to allow for convenient use by the appropriate agencies.

The project sponsor must forward copies of this component, along with supporting components and data, to the appropriate planning agency(ies) and health department(s) (if any) having jurisdiction over the development site. These agencies are responsible for responding to the questions in their respective sections of Component 4, as well as providing whatever additional comments they may wish to provide on the project plan. After the agencies have completed their review, the component will be returned to the applicant. The agencies have 60 days in which to provide comments to the applicant. If the agencies fail to comment within this 60 day period, the applicant may proceed to the next stage of the review without the comments. The use of registered mail or certified mail (return receipt requested) by the applicant when forwarding the module package to the agencies will document a date of receipt.

After receipt of the completed Component 4 from the planning agencies, or following expiration of the 60 day period without comments, the applicant must submit the entire component package to the municipality having jurisdiction over the project area for review and action. If approved by the municipality, the proposed plan, along with the municipal action, will be forwarded to the approving agency (Department of Environmental Protection or delegated local agency). The approving agency, in turn, will either approve the proposed plan, return it as incomplete, or disapprove the plan, based upon the information provided.

Instructions for Completing Planning Agency and/or Health Department Review Component

Section A. Project Name

Enter the project name as it appears on the accompanying sewage facilities planning module component (Component 2, 2m, 3, 3s or 3m).

Section B. Review Schedule

Enter the date the package was received by the reviewing agency, and the date that the review was completed.

Section C. Agency Review

1. Answer the yes/no questions and provide any descriptive information necessary on the lines provided. Attach additional sheets, if necessary.
2. Complete the name, title, and signature block.

Section D. Additional Comments

The Agency may provide whatever additional comment(s) it deems necessary, as described in the form. Attach additional sheets, if necessary.



DEP Code #: _____

**SEWAGE FACILITIES PLANNING MODULE
 COMPONENT 4A - MUNICIPAL PLANNING AGENCY REVIEW**

Note to Project Sponsor: To expedite the review of your proposal, one copy of your completed planning module package and one copy of this *Planning Agency Review Component* should be sent to the local municipal planning agency for their comments.

SECTION A. PROJECT NAME (See Section A of instructions)

Project Name
East Whiteland Township Act 537 Special Study Transfer of Sanitary Sewerage Facilities

SECTION B. REVIEW SCHEDULE (See Section B of instructions)

1. Date plan received by municipal planning agency _____
2. Date review completed by agency _____

SECTION C. AGENCY REVIEW (See Section C of instructions)

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	1. Is there a municipal comprehensive plan adopted under the Municipalities Planning Code (53 P.S. 10101, <i>et seq.</i>)?
<input type="checkbox"/>	<input type="checkbox"/>	2. Is this proposal consistent with the comprehensive plan for land use? If no, describe the inconsistencies _____
<input type="checkbox"/>	<input type="checkbox"/>	3. Is this proposal consistent with the use, development, and protection of water resources? If no, describe the inconsistencies _____
<input type="checkbox"/>	<input type="checkbox"/>	4. Is this proposal consistent with municipal land use planning relative to Prime Agricultural Land Preservation?
<input type="checkbox"/>	<input type="checkbox"/>	5. Does this project propose encroachments, obstructions, or dams that will affect wetlands? If yes, describe impacts _____
<input type="checkbox"/>	<input type="checkbox"/>	6. Will any known historical or archaeological resources be impacted by this project? If yes, describe impacts _____
<input type="checkbox"/>	<input type="checkbox"/>	7. Will any known endangered or threatened species of plant or animal be impacted by this project? If yes, describe impacts _____
<input type="checkbox"/>	<input type="checkbox"/>	8. Is there a municipal zoning ordinance?
<input type="checkbox"/>	<input type="checkbox"/>	9. Is this proposal consistent with the ordinance? If no, describe the inconsistencies _____
<input type="checkbox"/>	<input type="checkbox"/>	10. Does the proposal require a change or variance to an existing comprehensive plan or zoning ordinance?
<input type="checkbox"/>	<input type="checkbox"/>	11. Have all applicable zoning approvals been obtained?
<input type="checkbox"/>	<input type="checkbox"/>	12. Is there a municipal subdivision and land development ordinance?

SECTION C. AGENCY REVIEW (continued)

Yes

No

- 13. Is this proposal consistent with the ordinance?
 If no, describe the inconsistencies _____
- 14. Is this plan consistent with the municipal Official Sewage Facilities Plan?
 If no, describe the inconsistencies _____
- 15. Are there any wastewater disposal needs in the area adjacent to this proposal that should be considered by the municipality?
 If yes, describe _____
- 16. Has a waiver of the sewage facilities planning requirements been requested for the residual tract of this subdivision?
- If yes, is the proposed waiver consistent with applicable ordinances?
 If no, describe the inconsistencies

17. Name, title and signature of planning agency staff member completing this section:

Name: _____

Title: _____

Signature: _____

Date: _____

Name of Municipal Planning Agency: _____

Address _____

Telephone Number: _____

SECTION D. ADDITIONAL COMMENTS (See Section D of instructions)

This component does not limit municipal planning agencies from making additional comments concerning the relevancy of the proposed plan to other plans or ordinances. If additional comments are needed, attach additional sheets.

The planning agency must complete this component within 60 days.

This component and any additional comments are to be returned to the applicant.