

**FEDEX** 

### LETTER OF TRANSMITTAL

To:	Mount Joy Township
	8853 Elizabethtown Rd,
	Elizabethtown, PA 17022
	717-367-8917

Date: April 10, 2025 Job No.: AZ228-008 Attention: Ms. Kim Kaufman, Township Manager Re: **Sewage Planning Module Westmount Development** Mount Joy Township, Lancaster County

We are sending you  $\boxtimes$ Attached Under Separate Cover, the following items:

Item No.	Copies	Date	No.	Description	
1.	1	4/18/2025	Sewage Planning Module		

These are transmitted as checked below:			
For Approval			As Requested
☐ For Your Use	2	7	For Review and Comment

#### **REMARKS:**

Ms. Kaufman,

We are submitting to you a Component 3 Sewage Planning Module Package for the Westmount Development project. This project consists of constructing an apartment building with 289 residential units, resident only swimming pool, resident only fitness center, and maintenance center on largely undeveloped land. There are several items that require municipal signatures and completion, including the following:

- Exhibit A: Checklist Letter (municipal signature)
- Exhibit B: Transmittal Letter (municipal signature)
- Exhibit C: Resolution for Plan Revision (requires completion, seal, and signature)
- Exhibit D: Component 4A (requires completion and signature)
- Exhibit K: Completeness Checklist (municipal signature)

Arrow tabs have been added to try to simplify this process. Feel free to contact me with any questions or concerns regarding the project at 215-478-1750 or slpreslev@elagroup.com.

Sincerely, **ELA Group, Inc.** 

Signed:\_

Selene Presley, EIT Project Engineer Corporate Office

Delene Presley

C:\Users\s|presley\DC\ACCDocs\ELA Group\1212-004 Westmount Development\Project Files\Project Documents\Civil\Wastewater\Sewage Planning\Module\2025-04-21 Randor Township Transmittal.docx



# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF CLEAN WATER

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 Westmount Subdivision SECTION B. **REVIEW SCHEDULE** (See Section B of instructions) 1. Date plan received by municipal planning agency \_ Date review completed by agency SECTION C. **AGENCY REVIEW** (See Section C of instructions) Yes No  $\Box$ П Is there a municipal comprehensive plan adopted under the Municipalities Planning Code (53 P.S. 10101, et seq.)? Is this proposal consistent with the comprehensive plan for land use? If no, describe the inconsistencies П П Is this proposal consistent with the use, development, and protection of water resources? If no, describe the inconsistencies Is this proposal consistent with municipal land use planning relative to Prime Agricultural Land 4. Preservation? Does this project propose encroachments, obstructions, or dams that will affect wetlands? If yes, describe impacts \_\_\_ Will any known historical or archaeological resources be impacted by this project? If yes, describe impacts \_\_\_\_\_ Will any known endangered or threatened species of plant or animal be impacted by this 7. project? If yes, describe impacts \_\_\_ 8. Is there a municipal zoning ordinance? 9. Is this proposal consistent with the ordinance? If no, describe the inconsistencies 10. Does the proposal require a change or variance to an existing comprehensive plan or zoning ordinance? 1 1 11. Have all applicable zoning approvals been obtained? 12. Is there a municipal subdivision and land development ordinance?

### 3850-FM-BCW0362A 6/2016

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:			
SECTIO	N D.	ADDITI	ONAL COMMENTS (See Section D of instructions)			
			ot limit municipal planning agencies from making additional comments concerning the relevancy other plans or ordinances. If additional comments are needed, attach additional sheets.			
The plan	The planning agency must complete this component within 60 days.					
This com	ponent	and an	y additional comments are to be returned to the applicant.			