



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

Trunk A Interceptor Expansion Project

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

☐☐1. Is there a municipal comprehensive plan adopted under the Municipalities Planning Code (53 P.S. 10101, *et seq.*)?☐☐

2. Is this proposal consistent with the comprehensive plan for land use?

If no, describe the inconsistencies _____

☐☐

3. Is this proposal consistent with the use, development, and protection of water resources?

If no, describe the inconsistencies _____

☐☐

4. Is this proposal consistent with municipal land use planning relative to Prime Agricultural Land Preservation?

☐☐

5. Does this project propose encroachments, obstructions, or dams that will affect wetlands?

If yes, describe impacts _____

☐☐

6. Will any known historical or archaeological resources be impacted by this project?

If yes, describe impacts _____

☐☐

7. Will any known endangered or threatened species of plant or animal be impacted by this 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?

☐☐

11. Have all applicable zoning approvals been obtained?

☐☐

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.