



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF WATER MANAGEMENT
OFFICE OF OIL AND GAS MANAGEMENT

OFFICIAL USE ONLY	
ID # _____	_____
Date Received _____	_____

**NOTICE OF INTENT FOR COVERAGE
UNDER THE EROSION AND SEDIMENT CONTROL GENERAL PERMIT (ESCGP-2)
FOR EARTH DISTURBANCE ASSOCIATED WITH OIL AND GAS EXPLORATION,
PRODUCTION, PROCESSING, OR TREATMENT OPERATIONS OR TRANSMISSION FACILITIES**

**READ THE INSTRUCTIONS PROVIDED IN THIS PERMIT APPLICATION PACKAGE BEFORE COMPLETING THIS FORM.
PLEASE PRINT OR TYPE INFORMATION IN BLACK OR BLUE INK.**

SECTION A. APPLICANT INFORMATION

APPLICATION TYPE NEW RENEWAL MAJOR MODIFICATIONS EXPEDITED PHASED

Applicant's Last Name (If applicable)		First Name	MI	Phone
				FAX
Organization Name or Registered Fictitious Name				Phone
				FAX
Mailing Address	City		State	ZIP + 4
Email Address				
Co-Applicant's Last Name (If applicable)		First Name	MI	Phone
				FAX
Organization Name or Registered Fictitious Name				Phone
				FAX
Mailing Address	City		State	ZIP + 4
Email Address				

SECTION B. SITE INFORMATION

Site Name				
Site Location				
Site Location – City			State	ZIP+4
Detailed Written Directions to Site				

County	Municipality	City	Boro	Twp.
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION C. PROJECT INFORMATION

1. Total Project Area/Project Site (Ac):	Total Disturbed Area (Ac):
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2. Project Name

3. Project Type (Check all that apply)

Oil/Gas Well
 Transmission Facility
 Gathering Facility
 Processing Facility
 Treatment Facility
 Centralized Fresh Water Impoundment
 Centralized Wastewater Impoundment
 If Oil/Gas well, is the well conventional or unconventional?
 Conventional
 Unconventional

Project Description

4. Please provide the latitude and longitude coordinates for the center of the project. The coordinates should be in degrees, minutes seconds (DD MM SS.SS) and North American Datum 1983.

Latitude ____degrees ____minutes ____seconds Longitude ____degrees ____minutes ____seconds

Horizontal Collection Method:
 GPS
 Interpolated from U.S.G.S. Topographic Map
 DEP's eMAP

5. U.S.G.S. 7.5 min. Quad Map Name

6. Will the project be conducted as a phased permit project?
 Yes
 No
 If Yes, Include Master Site Plan Estimated Timetable for Phased Projects.
 Additional sheet(s) attached.

Phase No. or Name	Description	Total Area	Disturbed Area	Start Date	End Date

7. List existing and previous land use for a minimum of the previous 5 years.

8. Other Pollutants: Will the stormwater discharge contain pollutional substances other than sediment?
 Yes
 No
 If yes, explain and provide any available quantitative data.

9. Will fuels, chemicals, solvents, other hazardous waste or materials be used or stored on site during earth disturbance activities?
 Yes No **(If yes, a PPC Plan is required)**

10. Have naturally occurring geologic formations or soil types been identified that may cause pollution when disturbed?
 Yes No **(If yes, BMPs to avoid or minimize the potential pollution must be utilized)**

11. Have potential thermal impacts to surface water of the Commonwealth from earth disturbance activity been identified?
 Yes No **(If yes, BMPs to avoid, minimize or mitigated the thermal pollution must be utilized)**

12. Have the E&S Plan and PCSM/SR Plan been planned, designed and implemented to be consistent and separate?
 Yes No **(If no, use of combined plans must be approved by the Department)**

13. Have existing and/or proposed Riparian Forest Buffers been identified?
 Yes No **(If no, they must be shown on the plans)** N/A

14. Have antidegradation implementation requirements been addressed?
 Yes No **(If no, antidegradation requirements must be included in the plan)** N/A

15. a. If the proposed earth disturbance includes construction of a well site, is any earth disturbance proposed within 100 feet of a blue-line stream or wetland at least one acre in size?
Yes No N/A
- b. If Yes, has Waiver OG-0057 been obtained?
Yes No (If no, be advised that a waiver is required for well sites prepared within 100 feet of any blue-line stream or wetland greater than 1 acre in size)

16. Has the seasonal high groundwater level been identified at all excavation locations for pits and impoundments other than those containing top-hole water, fresh water and uncontaminated drill cuttings?
Yes No (If no, be advised that a 20-inch separation between the seasonal high groundwater and the bottom of all pits and impoundments containing polluttional substances is required.)

<p>17. Receiving Water/Watershed Name _____</p> <p>Chapter 93, Designated Use and Existing Use Stream Classification <input type="checkbox"/> High Quality <input type="checkbox"/> Exceptional Value <input type="checkbox"/> Other _____</p> <p>Secondary Water _____</p>	<p>Name of Municipal or Private Separate Storm Sewer Operator _____ _____ _____ _____ _____ _____</p>
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18. Is an Expedited Review being requested? Yes No
If yes, be advised that the Expedited Review is not available for all projects. Refer to the "Expedited Review Process" Section Page 3 of the Instructions for the ESCGP-2 to determine if your project is eligible.

SECTION D. POST CONSTRUCTION STORMWATER MANAGEMENT (PCSM)/SITE RESTORATION (SR) BMPS
See the attached instructions on how to complete this section.

For earth disturbance projects requiring site restoration under Chapter 78, provide the information outlined in Section D1 only. For earth disturbance projects requiring a PCSM plan, provide the information outlined in Section D2 only. If your project includes both a Site Restoration Plan under Chapter 78 and a PCSM Plan, provide the information outlined in both Sections D1 and D2.
Check those that apply. Section D1 Site Restoration (SR) Section D2 Post Construction Stormwater Management (PCSM)

SECTION D1. SITE RESTORATION (SR) PLAN BMPS

Site Restoration BMPs should be designed to use natural measures to eliminate pollution, infiltrate runoff, not require extensive construction/maintenance activity, promote pollutant reduction, and preserve the integrity of stream channels. The Department recommends the use of PA Stormwater BMP manual to achieve this goal.

1. Site Restoration Plan Information – The Site Restoration Plan should be designed to maximize volume reduction technologies, eliminate (where possible) or minimize point source discharges to surface waters, preserve the integrity of stream channels, and protect the physical, biological and chemical qualities of the receiving surface water.

Design standards applied to develop the Site Restoration Plan. Check those that apply.

Act 167 Plan – The attached SR Plan is consistent with an applicable approved Act 167 Plan.

Complete the following for all approved Act 167 Stormwater Management Plans. (Use additional sheets if necessary)

Act 167 Plan Name _____	Date Adopted _____	Consistency Letter Included <input type="checkbox"/>	
		Verification Report Included <input type="checkbox"/>	

The Site Restoration Plan must satisfy either sub paragraph A, B, or C below. Check those that apply.

A. Act 167 Plan approvals on or after January 2005 - The attached PCSM Plan, in its entirety, is consistent with all requirements pertaining to rate, volume, and water quality from an Act 167 Stormwater Management Plan approved by DEP on or after January 2005.

B. The PCSM meets the standard design criteria from the PA Stormwater BMP Manual.

C. Alternative Design Standard – The attached PCSM Plan was developed using approaches other than 102.8(g)(2). Demonstrate/explain in the space provided below how this standard will be either more protective than what is required in 102.8(g)(2) or will maintain and protect existing water quality and existing and designated uses.

2. Riparian Buffer Information

- A. Will you be protecting, converting or establishing a riparian buffer or a riparian forest buffer as part of this activity?
 Yes No
- B. Will you be protecting, converting or establishing a voluntary riparian forest buffer as part of this activity?
 Yes No
- C. If the regulations require a riparian buffer or riparian forest buffer and you are not providing one, list below the waiver provisions in the Chapter 102 regulations, Section 102.14(d)(i)-(vi), that you are requesting and provide additional documentation to demonstrate reasonable alternatives for compliance with 102.14 requirements.
- _____
- _____
- _____

- D. Are you proposing Oil and Gas activities for which SR is required under Chapter 78 within 150 feet of a HQ/EV Watershed?
 Yes No

If yes, demonstrate that any existing riparian buffer is undisturbed to the extent practicable.

Note: If the proposed activity protects, converts or establishes a riparian or riparian forest buffer a Buffer Management Plan is required in the PCSM Plan.

3. SUMMARY TABLE FOR SUPPORTING CALCULATION AND MEASUREMENT DATA
See Attachment B the Instructions on how to Complete This Section

Design storm frequency _____ inches Rainfall amount _____ inches	Pre-construction	Post Construction	Net Change
Impervious area (acres)			
Volume of stormwater runoff (acre-feet) without planned stormwater BMPs			
Volume of stormwater runoff (acre-feet) with planned stormwater BMPs			
Stormwater discharge rate for the design frequency storm			

4. SUMMARY DESCRIPTION OF POST CONSTRUCTION STORMWATER BMPs

In the lists below, check the BMPs identified in the Post Construction Stormwater Management Plan. The primary function(s) of the BMP listed in the functions column (infiltration/recharge; detention/retention; water quality). Additional functions may be added if applicable to that BMP. List the stormwater volume and area of runoff to be treated by each BMP type when calculations are required. If any BMP in the Site Restoration Plan is not listed below, describe it in the space provided after "Other".

BMP	Function(s)	Volume of stormwater treated	Acres treated
Bio-infiltration areas <input type="checkbox"/> Infiltration Trench <input type="checkbox"/> Infiltration Bed <input type="checkbox"/> Infiltrated Basin	Infiltration/Recharge	_____ _____ _____	_____ _____ _____
Natural Area Conservation <input type="checkbox"/> Streamside Buffer Zone <input type="checkbox"/> Wetland Buffer Zone <input type="checkbox"/> Sensitive Area Buffer Zone <input type="checkbox"/> Pre-Construction Drainage Pattern Intact	Infiltration/Recharge	_____ _____ _____ _____	_____ _____ _____ _____
Stormwater Retention <input type="checkbox"/> Constructed Wetlands <input type="checkbox"/> Wet Ponds <input type="checkbox"/> Retention Basin	Detention/Retention	_____ _____ _____	_____ _____ _____

Sediment and Pollutant Removal <input type="checkbox"/> Vegetated Filter Strips <input type="checkbox"/> Brush Barriers <input type="checkbox"/> Detention Basins	Water Quality Treatment	_____ _____ _____	_____ _____ _____
Access Road Design <input type="checkbox"/> Road Crowning <input type="checkbox"/> Ditches <input type="checkbox"/> Turnouts <input type="checkbox"/> Culverts <input type="checkbox"/> Roadside Vegetated Filter Strips	Infiltration/Recharge	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
Stormwater Energy Dissipaters <input type="checkbox"/> Level Spreaders <input type="checkbox"/> Riprap Aprons <input type="checkbox"/> Upslope Diversions <input type="checkbox"/> _____	Infiltration/Recharge	_____ _____ _____ _____	_____ _____ _____ _____

5. Off-site Discharge Analysis.

Does the activity propose any off-site discharges to areas other than surface waters? Yes No

If yes, the applicant must have appropriate easement that provides the legal authority for this off-site discharge.

The Applicant must provide a demonstration in both the E&S and Site Restoration Plans that the discharge will not cause erosion, damage, or a nuisance to off-site properties.

6. Thermal Impact Analysis.

Explain how thermal impacts associated with this project were avoided, minimized, or mitigated.

SECTION D2. POST CONSTRUCTION STORMWATER MANAGEMENT (PCSM) PLAN BMPS

Post Construction Stormwater Management BMPs should be designed to use natural measures to eliminate pollution, infiltrate runoff, not require extensive construction/maintenance activity, promote pollutant reduction, and preserve the integrity of stream channels. The Department recommends the use of PA Stormwater BMP manual to achieve this goal.

1. Post Construction Stormwater Management Plan Information – The Post Construction Stormwater Management Plan should be designed to maximize volume reduction technologies, eliminate (where possible) or minimize point source discharges to surface waters, preserve the integrity of stream channels, and protect the physical, biological and chemical qualities of the receiving surface water.

Design standards applied to develop the Site Restoration Plan. Check those that apply.

Act 167 Plan – The attached SR Plan is consistent with an applicable approved Act 167 Plan.

Complete the following for all approved Act 167 Stormwater Management Plans. (Use additional sheets if necessary)

Act 167 Plan Name	Date Adopted	Consistency Letter Included	<input type="checkbox"/>
_____	_____	Verification Report Included	<input type="checkbox"/>

The PCSM Plan must satisfy either sub paragraph A, B, or C below. Check those that apply.

- A. Act 167 Plan approval on or after January 2005 - The attached PCSM Plan, in its entirety, is consistent with all requirements pertaining to rate, volume, and water quality from an Act 167 Stormwater Management Plan approved by DEP on or after January 2005.
- B. The PCSM meets the standard design criteria from the PA Stormwater BMP Manual.
- C. Alternative Design Standard – The attached PCSM Plan was developed using approaches other than 102.8(g)(2). Demonstrate/explain in the space provided below how this standard will be either more protective than what is required in 102.8(g)(2) or will maintain and protect existing water quality and existing and designated uses.

2. Riparian Buffer Information

- A. Will you be protecting, converting or establishing a riparian buffer or a riparian forest buffer as part of this activity?
 Yes No
- B. Will you be protecting, converting or establishing a voluntary riparian forest buffer as part of this activity?
 Yes No
- C. If the regulations require a riparian buffer or riparian forest buffer and you are not providing one, list below the waiver provisions in the Chapter 102 regulations, Section 102.14(d)(i)-(vi), that you are requesting and provide additional documentation to demonstrate reasonable alternatives for compliance with 102.14 requirements.

Note: If the proposed activity protects, converts or establishes a riparian or riparian forest buffer a Buffer Management Plan is required in the PCSM Plan.

3. SUMMARY TABLE FOR SUPPORTING CALCULATION AND MEASUREMENT DATA
See Attachment B the Instructions on how to Complete This Section

Design storm frequency _____ Rainfall amount _____ inches	Pre-construction	Post Construction	Net Change
Impervious area (acres)			
Volume of stormwater runoff (acre-feet) without planned stormwater BMPs			
Volume of stormwater runoff (acre-feet) with planned stormwater BMPs			
Stormwater discharge rate for the design frequency storm			

4. SUMMARY DESCRIPTION OF POST CONSTRUCTION STORMWATER BMPs

In the lists below, check the BMPs identified in the Post Construction Stormwater Management Plan. The primary function(s) of the BMP listed in the functions column (infiltration/recharge; detention/retention; water quality). Additional functions may be added if applicable to that BMP. List the stormwater volume and area of runoff to be treated by each BMP type when calculations are required. If any BMP in the Site Restoration Plan is not listed below, describe it in the space provided after "Other".

BMP	Function(s)	Volume of stormwater treated	Acres treated
Bio-infiltration areas <input type="checkbox"/> Infiltration Trench <input type="checkbox"/> Infiltration Bed <input type="checkbox"/> Infiltrated Basin	Infiltration/Recharge	_____ _____ _____	_____ _____ _____
Natural Area Conservation <input type="checkbox"/> Streamside Buffer Zone <input type="checkbox"/> Wetland Buffer Zone <input type="checkbox"/> Sensitive Area Buffer Zone <input type="checkbox"/> Pre-Construction Drainage Pattern Intact	Infiltration/Recharge	_____ _____ _____ _____	_____ _____ _____ _____

Sediment and Pollutant Removal <input type="checkbox"/> Vegetated Filter Strips <input type="checkbox"/> Brush Barriers <input type="checkbox"/> Detention Basins	Water Quality Treatment	_____ _____ _____	_____ _____ _____
Access Road Design <input type="checkbox"/> Road Crowning <input type="checkbox"/> Ditches <input type="checkbox"/> Turnouts <input type="checkbox"/> Culverts <input type="checkbox"/> Roadside Vegetated Filter Strips	Infiltration/Recharge	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____
Stormwater Energy Dissipaters <input type="checkbox"/> Level Spreaders <input type="checkbox"/> Riprap Aprons <input type="checkbox"/> Upslope Diversions <input type="checkbox"/> _____	Infiltration/Recharge	_____ _____ _____ _____	_____ _____ _____ _____

5. Off-site Discharge Analysis.

Does the activity propose any off-site discharges to areas other than surface waters? Yes No

If yes, the applicant must have appropriate easement that provides the legal authority for this off-site discharge.

The Applicant must provide a demonstration in both the E&S and PCSM Plans that the discharge will not cause erosion, damage, or nuisance to off-site properties.

6. Thermal Impact Analysis.

Explain how thermal impacts associated with this project were avoided, minimized, or mitigated.

7. Critical PCSM Plan stages.

Identify and list critical stages of implementation of the PCSM Plan for which a licensed professional or designee shall be present on site.

SECTION H. CERTIFICATION BY PERSON PREPARING APPLICATION

I do hereby certify to the best of my knowledge, information, and belief, that the Erosion and Sediment Control and PCSM/Site Restoration Plan are true and correct, represent actual field conditions, and are in accordance with the 25 Pa. Code Chapters 78 and 102 of the Department's rules and regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Print Name	Signature	Professional Seal
Company		
Address		
Phone		
Most Recent DEP Training Attended	Location _____ Date _____	
Email Address		

EXPEDITED REVIEW PROCESS

In addition to the certification required above applicants using the expedited permit review process must attach an E&S and PCSM/Site Restoration Plan developed and sealed by a licensed professional engineer, surveyor or professional geologist. The plans shall contain the following certification:

I do hereby certify to the best of my knowledge, information, and belief, that the Erosion and Sediment Control and PCSM/Site Restoration Plan and Post Construction BMPs are true and correct, represent actual field conditions and are in accordance with the 25 Pa. Code Chapters 78 and 102 of the Department's rules and regulations. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SECTION I. APPLICANT CERTIFICATION

Applicant Certification. I certify under penalty of law that this document and all attachments were prepared by me or 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 system, 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. The responsible official's signature also verifies that the activity is eligible to participate in the permit, and that the applicant agrees to abide by the terms and conditions of the permit. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

_____	_____
Print Name and Title of Applicant	Print Name and Title of Co-Applicant (if applicable)
_____	_____
Signature of Applicant	Signature of Co-Applicant
_____	_____
Date Application Signed	Date Application Signed
Notarization	Commonwealth of Pennsylvania
Sworn to and subscribed to before me this	County of _____
_____ day of _____, 20_____	My Commission expires _____

Notary Public	
AFFIX SEAL	

SECTION J. CONTACT FOR ADDITIONAL INFORMATION

Contact's Last Name	First Name	MI	Phone
			FAX
Mailing Address	City	State	ZIP + 4
Email Address			