



**TRANSMITTAL LETTER
FOR SEWAGE FACILITIES PLANNING MODULE**

DEPARTMENT OF ENVIRONMENTAL PROTECTION (DEP) USE ONLY				
DEP CODE #	CLIENT ID #	SITE ID #	APS ID #	AUTH. ID #

TO: Approving Agency (DEP or delegated local agency)
 DEP Southwest Regional Office
 400 Waterfront Drive
 Pittsburgh, PA 15222

Date _____

Dear Sir/Madam:

Attached please find a completed sewage facilities planning module prepared by Martina Battistone _____
(Name)
Senior Environmental Planner _____ for Pittsburgh Cultural Trust - 937 Liberty Avenue _____
(Title) (Name)
 a subdivision, commercial ,or industrial facility located in City of Pittsburgh _____

Allegheny _____ County.
(City, Borough, Township)

Check one

(i) The planning module, as prepared and submitted by the applicant, is approved by the municipality as a proposed revision supplement for new land development to its Official Sewage Facilities Plan (Official Plan), and is adopted for submission to DEP transmitted to the delegated LA for approval in accordance with the requirements of 25 Pa. Code Chapter 71 and the *Pennsylvania Sewage Facilities Act* (35 P.S. §750),

OR

(ii) The planning module will not be approved by the municipality as a proposed revision or supplement for new land development to its Official Plan because the project described therein is unacceptable for the reason(s) checked below:

Check Boxes

- Additional studies are being performed by or on behalf of this municipality which may have an effect on the planning module as prepared and submitted by the applicant. Attached hereto is the scope of services to be performed and the time schedule for completion of said studies.
- The planning module as submitted by the applicant fails to meet limitations imposed by other laws or ordinances, officially adopted comprehensive plans and/or environmental plans (e.g., zoning, land use, 25 Pa. Code Chapter 71). Specific reference or applicable segments of such laws or plans are attached hereto.
- Other (attach additional sheet giving specifics).

Municipal Secretary: Indicate below by checking appropriate boxes which components are being transmitted to the approving agency.

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Resolution of Adoption | <input checked="" type="checkbox"/> 3 Sewage Collection/Treatment Facilities | <input checked="" type="checkbox"/> 4A Municipal Planning Agency Review |
| <input type="checkbox"/> Module Completeness Checklist | <input type="checkbox"/> 3s Small Flow Treatment Facilities | <input type="checkbox"/> 4B County Planning Agency Review |
| <input type="checkbox"/> 2 Individual and Community Onlot Disposal of Sewage | | <input checked="" type="checkbox"/> 4C County or Joint Health Department Review |

Martina Battistone
 Municipal Secretary (print)

Signature

Date

SEWAGE FACILITIES PLANNING MODULE

Component 3. Sewage Collection and Treatment Facilities

(Return completed module package to appropriate municipality)

DEP USE ONLY

DEP CODE #	CLIENT ID #	SITE ID #	APS ID #	AUTH ID #

This planning module component is used to fulfill the planning requirements of Act 537 for the following types of projects: (1) a subdivision to be served by sewage collection, conveyance or treatment facilities, (2) a tap-in to an existing collection system with flows on a lot of 2 EDU's or more, or (3) the construction of, or modification to, wastewater collection, conveyance or treatment facilities that will require DEP to issue or modify a Clean Streams Law permit. Planning for any project that will require DEP to issue or modify a permit cannot be processed by a delegated agency. Delegated agencies must send their projects to DEP for final planning approval.

This component, along with any other documents specified in the cover letter, must be completed and submitted to the municipality with jurisdiction over the project site for review and approval. All required documentation must be attached for the Sewage Facilities Planning Module to be complete. Refer to the instructions for help in completing this component.

REVIEW FEES: Amendments to the Sewage Facilities Act established fees to be paid by the developer for review of planning modules for land development. These fees may vary depending on the approving agency for the project (DEP or delegated local agency). Please see section R and the instructions for more information on these fees.

NOTE: All projects must complete Sections A through I, and Sections O through R. Complete Sections J, K, L, M and/or N if applicable or marked .

A. PROJECT INFORMATION (See Section A of instructions)

1. Project Name Pittsburgh Cultural Trust - 937 Liberty Avenue

2. Brief Project Description The project consists of interior renovation work of the existing 3 story (plus basement) building to bring utilities up to code/compliance.

B. CLIENT (MUNICIPALITY) INFORMATION (See Section B of instructions)

Municipality Name	County	City	Boro	Twp
City of Pittsburgh	Allegheny	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Municipality Contact Individual - Last Name	First Name	MI	Suffix	Title
Battistone	Martina			
Additional Individual Last Name	First Name	MI	Suffix	Title
Municipality Mailing Address Line 1	Mailing Address Line 2			
Department of City Planning	200 Ross Street #3			
Address Last Line -- City	State	ZIP+4		
Pittsburgh	PA	15219		
Area Code + Phone + Ext.	FAX (optional)	Email (optional)		
(412) 255-2516		martina.battistone@pittsburghpa.gov		

C. SITE INFORMATION (See Section C of instructions)

Site (Land Development or Project) Name

Pittsburgh Cultural Trust - 937 Liberty Avenue

Site Location Line 1

937 Liberty Avenue

Site Location Line 2

Site Location Last Line -- City

Pittsburgh

State

PA

ZIP+4

15222

Latitude

40.44353

Longitude

-79.99675

Detailed Written Directions to Site Heading Westbound on I-376, take the exit 70D and continue Straight onto Stanwix Street. After 0.2 miles turn right after passing the McDonalds on the right to get onto Liberty Avenue. In 0.4 Miles, the project site will be on the left

Description of Site The project consists of interior renovation work of the existing 3 story (plus basement) building to bring utilities up to code/compliance.

Site Contact (Developer/Owner)

Last Name

Boggio

First Name

Ben

MI

Suffix

Phone

(412) 471-5173

Ext.

Site Contact Title

Finance Manager

Site Contact Firm (if none, leave blank)

Pittsburgh Cultural Trust

FAX

(412) 471-5945

Email

boggio@trustarts.org

Mailing Address Line 1

803 Liberty Avenue

Mailing Address Line 2

Mailing Address Last Line -- City

Pittsburgh

State

PA

ZIP+4

15222

D. PROJECT CONSULTANT INFORMATION (See Section D of instructions)

Last Name

Karanovich

First Name

Philip

MI

Suffix

J

Title

Project Manager

Consulting Firm Name

Red Swing Group

Mailing Address Line 1

4314 Old William Penn Highway

Mailing Address Line 2

Suite 101

Address Last Line -- City

Monroeville

State

PA

ZIP+4

15146

Country

United States of America

Email

p.karanovich@redswinggroup.com

Area Code + Phone

(724) 325-1215

Ext.

204

Area Code + FAX

(866) 295-5226

E. AVAILABILITY OF DRINKING WATER SUPPLY

The project will be provided with drinking water from the following source: (Check appropriate box)

Individual wells or cisterns.

A proposed public water supply.

An existing public water supply.

If existing public water supply is to be used, provide the name of the water company and attach documentation from the water company stating that it will serve the project.

Name of water company: The Pittsburgh Water and Sewer Authority

F. PROJECT NARRATIVE (See Section F of instructions)

A narrative has been prepared as described in Section F of the instructions and is attached.

The applicant may choose to include additional information beyond that required by Section F of the instructions.

G. PROPOSED WASTEWATER DISPOSAL FACILITIES (See Section G of instructions)

Check all boxes that apply, and provide information on collection, conveyance and treatment facilities and EDU's served. This information will be used to determine consistency with Chapter 93 (relating to wastewater treatment requirements).

1. COLLECTION SYSTEM

a. Check appropriate box concerning collection system

- New collection system Pump Station Force Main
 Grinder pump(s) Extension to existing collection system Expansion of existing facility

Clean Streams Law Permit Number _____

b. Answer questions below on collection system

Number of EDU's and proposed connections to be served by collection system. EDU's 3.13

Connections 1

Name of:

existing collection or conveyance system Exchange Way - 20" VCP

owner The Pittsburgh Water and Sewer Authority

existing interceptor Allegheny River Interceptor

owner The Allegheny County Sanitary Authority

2. WASTEWATER TREATMENT FACILITY

Check all boxes that apply, and provide information on collection, conveyance and treatment facilities and EDU's served. This information will be used to determine consistency with Chapter(s) 91 (relating to general provisions), 92 (relating to national Pollution Discharge Elimination System permitting, monitoring and compliance) and 93 (relating to water quality standards).

a. Check appropriate box and provide requested information concerning the treatment facility

- New facility Existing facility Upgrade of existing facility Expansion of existing facility

Name of existing facility ALCOSAN Woods Run Treatment Plant

NPDES Permit Number for existing facility PA025984

Clean Streams Law Permit Number PAG136110

Location of discharge point for a new facility. Latitude _____ Longitude _____

b. The following certification statement must be completed and signed by the wastewater treatment facility permittee or their representative.

As an authorized representative of the permittee, I confirm that the ALCOSAN Woods Run (Name from above) sewage treatment facilities can accept sewage flows from this project without adversely affecting the facility's ability to achieve all applicable technology and water quality based effluent limits (see Section I) and conditions contained in the NPDES permit identified above.

Name of Permittee Agency, Authority, Municipality ALCOSAN

Name of Responsible Agent Joe Fedor

Agent Signature Joe Fedor Date 8-29-22

(Also see Section I. 4.)

G. PROPOSED WASTEWATER DISPOSAL FACILITIES (Continued)

3. PLOT PLAN

The following information is to be submitted on a plot plan of the proposed subdivision.

- a. Existing and proposed buildings.
- b. Lot lines and lot sizes.
- c. Adjacent lots.
- d. Remainder of tract.
- e. Existing and proposed sewerage facilities. Plot location of discharge point, land application field, spray field, COLDS, or LVCOLDS if a new facility is proposed.
- f. Show tap-in or extension to the point of connection to existing collection system (if applicable).
- g. Existing and proposed water supplies and surface water (wells, springs, ponds, streams, etc.)
- h. Existing and proposed rights-of-way.
- i. Existing and proposed buildings, streets, roadways, access roads, etc.
- j. Any designated recreational or open space area.
- k. Wetlands - from National Wetland Inventory Mapping and USGS Hydric Soils Mapping.
- l. Flood plains or Flood prone areas, floodways, (Federal Flood Insurance Mapping)
- m. Prime Agricultural Land.
- n. Any other facilities (pipelines, power lines, etc.)
- o. Orientation to north.
- p. Locations of all site testing activities (soil profile test pits, slope measurements, permeability test sites, background sampling, etc. (if applicable).
- q. Soils types and boundaries when a land based system is proposed.
- r. Topographic lines with elevations when a land based system is proposed

4. WETLAND PROTECTION

YES NO

- a. Are there wetlands in the project area? If yes, ensure these areas appear on the plot plan as shown in the mapping or through on-site delineation.
- b. Are there any construction activities (encroachments, or obstructions) proposed in, along, or through the wetlands? If yes, Identify any proposed encroachments on wetlands and identify whether a General Permit or a full encroachment permit will be required. If a full permit is required, address time and cost impacts on the project. Note that wetland encroachments should be avoided where feasible. Also note that a feasible alternative **MUST BE SELECTED** to an identified encroachment on an exceptional value wetland as defined in Chapter 105. Identify any project impacts on streams classified as HQ or EV and address impacts of the permitting requirements of said encroachments on the project.

5. PRIME AGRICULTURAL LAND PROTECTION

YES NO

- Will the project involve the disturbance of prime agricultural lands?
If yes, coordinate with local officials to resolve any conflicts with the local prime agricultural land protection program. The project must be consistent with such municipal programs before the sewage facilities planning module package may be submitted to DEP.
If no, prime agricultural land protection is not a factor to this project.
- Have prime agricultural land protection issues been settled?

6. HISTORIC PRESERVATION ACT

YES NO

- Sufficient documentation is attached to confirm that this project is consistent with DEP Technical Guidance 012-0700-001 *Implementation of the PA State History Code* (available online at the DEP website at www.dep.state.pa.us, select "subject" then select "technical guidance"). As a minimum this includes copies of the completed Cultural Resources Notice

(CRN), a return receipt for its submission to the PHMC and the PHMC review letter.

7. PROTECTION OF RARE, ENDANGERED OR THREATENED SPECIES

Check one:

- The "Pennsylvania Natural Diversity Inventory (PNDI) Project Environmental Review Receipt" resulting from my search of the PNDI database and all supporting documentation from jurisdictional agencies (when necessary) is/are attached.
- A completed "Pennsylvania Natural Diversity Inventory (PNDI) Project Planning & Environmental Review Form," (PNDI Form) available at www.naturalheritage.state.pa.us, and all required supporting documentation is attached. I request DEP staff to complete the required PNDI search for my project. I realize that my planning module will be considered incomplete upon submission to the Department and that the DEP review will not begin, and that processing of my planning module will be delayed, until a "PNDI Project Environmental Review Receipt" and all supporting documentation from jurisdictional agencies (when necessary) is/are received by DEP.

Applicant or Consultant Initials _____.

H. ALTERNATIVE SEWAGE FACILITIES ANALYSIS (See Section H of instructions)

- An alternative sewage facilities analysis has been prepared as described in Section H of the attached instructions and is attached to this component.
The applicant may choose to include additional information beyond that required by Section H of the attached instructions.

I. COMPLIANCE WITH WATER QUALITY STANDARDS AND EFFLUENT LIMITATIONS (See Section I of instructions) (Check and complete all that apply.)

1. Waters designated for Special Protection

- The proposed project will result in a new or increased discharge into special protection waters as identified in Title 25, Pennsylvania Code, Chapter 93. The Social or Economic Justification (SEJ) required by Section 93.4c. is attached.

2. Pennsylvania Waters Designated As Impaired

- The proposed project will result in a new or increased discharge of a pollutant into waters that DEP has identified as being impaired by that pollutant. A pre-planning meeting was held with the appropriate DEP regional office staff to discuss water quality based discharge limitations.

3. Interstate and International Waters

- The proposed project will result in a new or increased discharge into interstate or international waters. A pre-planning meeting was held with the appropriate DEP regional office staff to discuss effluent limitations necessary to meet the requirements of the interstate or international compact.

4. Tributaries To The Chesapeake Bay

- The proposed project result in a new or increased discharge of sewage into a tributary to the Chesapeake Bay. This proposal for a new sewage treatment facility or new flows to an existing facility includes total nitrogen and total phosphorus in the following amounts: _____ pounds of TN per year, and _____ pounds of TP per year. Based on the process design and effluent limits, the total nitrogen treatment capacity of the wastewater treatment facility is _____ pounds per year and the total phosphorus capacity is _____ pounds per year as determined by the wastewater treatment facility permittee. The permittee has determined that the additional TN and TP to be contributed by this project (as modified by credits and/or offsets to be provided) will not cause the discharge to exceed the annual total mass limits for these parameters. Documentation of compliance with nutrient allocations is attached.

Name of Permittee Agency, Authority, Municipality _____

Initials of Responsible Agent (See Section G 2.b) _____

See *Special Instructions* (Form 3800-FM-BPNPSM0353-1) for additional information on Chesapeake Bay watershed requirements.

J. CHAPTER 94 CONSISTENCY DETERMINATION (See Section J of instructions)

Projects that propose the use of existing municipal collection, conveyance or wastewater treatment facilities, or the construction of collection and conveyance facilities to be served by existing municipal wastewater treatment facilities must be consistent with the requirements of Title 25, Chapter 94 (relating to Municipal Wasteload Management). If not previously included in Section F, include a general map showing the path of the sewage to the treatment facility. If more than one municipality or authority will be affected by the project, please obtain the information required in this section for each. Additional sheets may be attached for this purpose.

1. Project Flows 640 gpd
2. Total Sewage Flows to Facilities (pathway from point of origin through treatment plant)

When providing "treatment facilities" sewage flows, use Annual Average Daily Flow for "average" and Maximum Monthly Average Daily Flow for "peak" in all cases. For "peak flows" in "collection" and "conveyance" facilities, indicate whether these flows are "peak hourly flow" or "peak instantaneous flow" and how this figure was derived (i.e., metered, measured, estimated, etc.).

- a. Enter average and peak sewage flows for each proposed or existing facility as designed or permitted.
- b. Enter the average and peak sewage flows for the most restrictive sections of the existing sewage facilities.
- c. Enter the average and peak sewage flows, projected for 5 years (2 years for pump stations) through the most restrictive sections of the existing sewage facilities. Include existing, proposed (this project) and future project (other approved projects) flows.

To complete the table, refer to the instructions, Section J.

	a. Design and/or Permitted Capacity (gpd)		b. Present Flows (gpd)		c. Projected Flows in 5 years (gpd) (2 years for P.S.)	
	Average	Peak	Average	Peak	Average	Peak
Collection	1411938	4941784	16	55	209	730
Conveyance		12,100,000	833,000,000	1,090,000	843,000,000	1,090,000
Treatment	225,000,000	225,000,000	191,500,000	250,000,000	228,342,000	295,000,000

3. Collection and Conveyance Facilities

The questions below are to be answered by the sewer authority, municipality, or agency responsible for completing the Chapter 94 report for the collection and conveyance facilities. These questions should be answered in coordination with the latest Chapter 94 annual report and the above table. The individual(s) signing below must be legally authorized to make representation for the organization.

YES NO

- a. YES NO This project proposes sewer extensions or tap-ins. Will these actions create a hydraulic overload within five years on any existing collection or conveyance facilities that are part of the system?

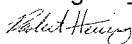
If yes, this sewage facilities planning module will not be accepted for review by the municipality, delegated local agency and/or DEP until all inconsistencies with Chapter 94 are resolved or unless there is an approved Corrective Action Plan (CAP) granting an allocation for this project. A letter granting allocations to this project under the CAP must be attached to the module package.

If no, a representative of the sewer authority, municipality, or agency responsible for completing the Chapter 94 report for the collection and conveyance facilities must sign below to indicate that the collection and conveyance facilities have adequate capacity and are able to provide service to the proposed development in accordance with both §71.53(d)(3) and Chapter 94 requirements and that this proposal will not affect that status.

b. Collection System

Name of Agency, Authority, Municipality PWSA

Name of Responsible Agent Robert Herring

Agent Signature  Robert Herring 2022.08.23 08:55:24 -04'00' Date August 23, 2022

J. CHAPTER 94 CONSISTENCY DETERMINATION (See Section J of instructions)

c. Conveyance System

Name of Agency, Authority, Municipality ALCOSAN
Name of Responsible Agent Joe Fedor
Agent Signature Joe Fedor
Date 8-29-22

4. Treatment Facility

The questions below are to be answered by a representative of the facility permittee in coordination with the information in the table and the latest Chapter 94 report. The individual signing below must be legally authorized to make representation for the organization.

YES NO

- a. This project proposes the use of an existing wastewater treatment plant for the disposal of sewage. Will this action create a hydraulic or organic overload within 5 years at that facility?

If yes, this planning module for sewage facilities will not be reviewed by the municipality, delegated local agency and/or DEP until this inconsistency with Chapter 94 is resolved or unless there is an approved CAP granting an allocation for this project. A letter granting allocations to this project under the CAP must be attached to the planning module.

If no, the treatment facility permittee must sign below to indicate that this facility has adequate treatment capacity and is able to provide wastewater treatment services for the proposed development in accordance with both §71.53(d)(3) and Chapter 94 requirements and that this proposal will not impact that status.

b. Name of Agency, Authority, Municipality ALCOSAN
Name of Responsible Agent Joe Fedor
Agent Signature Joe Fedor
Date 8-29-22

K. TREATMENT AND DISPOSAL OPTIONS (See Section K of instructions)

This section is for land development projects that propose construction of wastewater treatment facilities. Please note that, since these projects require permits issued by DEP, these projects may **NOT** receive final planning approval from a delegated local agency. Delegated local agencies must send these projects to DEP for final planning approval.

Check the appropriate box indicating the selected treatment and disposal option.

1. Spray irrigation (other than individual residential spray systems (IRSIS)) or other land application is proposed, and the information requested in Section K.1. of the planning module instructions are attached.
2. Recycle and reuse is proposed and the information requested in Section K-2 of the planning module instructions is attached.
3. A discharge to a dry stream channel is proposed, and the information requested in Section K.3. of the planning module instructions are attached.
4. A discharge to a perennial surface water body is proposed, and the information requested in Section K.4. of the planning module instructions are attached.

L. PERMEABILITY TESTING (See Section L of instructions)

- The information required in Section L of the instructions is attached.

M. PRELIMINARY HYDROGEOLOGIC STUDY (See Section M of instructions)

- The information required in Section M of the instructions is attached.

N. DETAILED HYDROGEOLOGIC STUDY (See Section N of instructions)

The detailed hydrogeologic information required in Section N. of the instructions is attached.

O. SEWAGE MANAGEMENT (See Section O of instructions)

(1-3 for completion by the developer(project sponser), 4-5 for completion by the non-municipal facility agent and 6 for completion by the municipality)

Yes No

1. Is connection to, or construction of, a DEP permitted, non-municipal sewage facility or a local agency permitted, community onlot sewage facility proposed.

If Yes, respond to the following questions, attach the supporting analysis, and an evaluation of the options available to assure long-term proper operation and maintenance of the proposed non-municipal facilities. If No, skip the remainder of Section O.

2. Project Flows _____ gpd

Yes No

3. Is the use of nutrient credits or offsets a part of this project?

If yes, attach a letter of intent to purchase the necessary credits and describe the assurance that these credits and offsets will be available for the remaining design life of the non-municipal sewage facility;

(For completion by non-municipal facility agent)

4. Collection and Conveyance Facilities

The questions below are to be answered by the organization/individual responsible for the non-municipal collection and conveyance facilities. The individual(s) signing below must be legally authorized to make representation for the organization.

Yes No

- a. If this project proposes sewer extensions or tap-ins, will these actions create a hydraulic overload on any existing collection or conveyance facilities that are part of the system?

If yes, this sewage facilities planning module will not be accepted for review by the municipality, delegated local agency and/or DEP until this issue is resolved.

If no, a representative of the organization responsible for the collection and conveyance facilities must sign below to indicate that the collection and conveyance facilities have adequate capacity and are able to provide service to the proposed development in accordance with Chapter 71 §71.53(d)(3) and that this proposal will not affect that status.

- b. Collection System

Name of Responsible Organization _____

Name of Responsible Agent _____

Agent Signature _____

Date _____

- c. Conveyance System

Name of Responsible Organization _____

Name of Responsible Agent _____

Agent Signature _____

Date _____

5. Treatment Facility

The questions below are to be answered by a representative of the facility permittee. The individual signing below must be legally authorized to make representation for the organization.

Yes No

- a. If this project proposes the use of an existing non-municipal wastewater treatment plant for the disposal of sewage, will this action create a hydraulic or organic overload at that facility?

If yes, this planning module for sewage facilities will not be reviewed by the municipality, delegated local agency and/or DEP until this issue is resolved.

If no, the treatment facility permittee must sign below to indicate that this facility has adequate treatment capacity and is able to provide wastewater treatment services for the proposed development in accordance with §71.53(d)(3) and that this proposal will not impact that status.

- b. Name of Facility _____
Name of Responsible Agent _____
Agent Signature _____
Date _____

(For completion by the municipality)

6. The **SELECTED OPTION** necessary to assure long-term proper operation and maintenance of the proposed non-municipal facilities is clearly identified with documentation attached in the planning module package.

P. PUBLIC NOTIFICATION REQUIREMENT (See Section P of instructions)

This section must be completed to determine if the applicant will be required to publish facts about the project in a newspaper of general circulation to provide a chance for the general public to comment on proposed new land development projects. This notice may be provided by the applicant or the applicant's agent, the municipality or the local agency by publication in a newspaper of general circulation within the municipality affected. Where an applicant or an applicant's agent provides the required notice for publication, the applicant or applicant's agent shall notify the municipality or local agency and the municipality and local agency will be relieved of the obligation to publish. The required content of the publication notice is found in Section P of the instructions.

To complete this section, each of the following questions must be answered with a "yes" or "no". Newspaper publication is required if any of the following are answered "yes".

Yes No

1. Does the project propose the construction of a sewage treatment facility ?
2. Will the project change the flow at an existing sewage treatment facility by more than 50,000 gallons per day?
3. Will the project result in a public expenditure for the sewage facilities portion of the project in excess of \$100,000?
4. Will the project lead to a major modification of the existing municipal administrative organizations within the municipal government?
5. Will the project require the establishment of *new* municipal administrative organizations within the municipal government?
6. Will the project result in a subdivision of 50 lots or more? (onlot sewage disposal only)
7. Does the project involve a major change in established growth projections?
8. Does the project involve a different land use pattern than that established in the municipality's Official Sewage Plan?

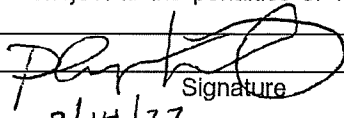
P. PUBLIC NOTIFICATION REQUIREMENT cont'd. (See Section P of instructions)

9. Does the project involve the use of large volume onlot sewage disposal systems (Flow > 10,000 gpd)?
10. Does the project require resolution of a conflict between the proposed alternative and consistency requirements contained in §71.21(a)(5)(i), (ii), (iii)?
11. Will sewage facilities discharge into high quality or exceptional value waters?
- Attached is a copy of:
- the public notice,
 - all comments received as a result of the notice,
 - the municipal response to these comments.
- No comments were received. A copy of the public notice is attached.

Q. FALSE SWEARING STATEMENT (See Section Q of instructions)

I verify that the statements made in this component are true and correct to the best of my knowledge, information and belief. I understand that false statements in this component are made subject to the penalties of 18 PA C.S.A. §4904 relating to unsworn falsification to authorities.

Phil Karanovich
Name (Print)
Project Manager
Title
4314 Old William Penn Hwy, Suite 101 Monroeville PA 15146
Address


Signature
9/14/22
Date
(724) 325-1215 (Ext. 204)
Telephone Number

R. REVIEW FEE (See Section R of instructions)

The Sewage Facilities Act establishes a fee for the DEP planning module review. DEP will calculate the review fee for the project and invoice the project sponsor **OR** the project sponsor may attach a self-calculated fee payment to the planning module prior to submission of the planning package to DEP. (Since the fee and fee collection procedures may vary if a "delegated local agency" is conducting the review, the project sponsor should contact the "delegated local agency" to determine these details.) Check the appropriate box.

- I request DEP calculate the review fee for my project and send me an invoice for the correct amount. I understand DEP's review of my project will not begin until DEP receives the correct review fee from me for the project.
- I have calculated the review fee for my project using the formula found below and the review fee guidance in the instructions. I have attached a check or money order in the amount of \$156.50 payable to "Commonwealth of PA, DEP". Include DEP code number on check. I understand DEP will not begin review of my project unless it receives the fee and determines the fee is correct. If the fee is incorrect, DEP will return my check or money order, send me an invoice for the correct amount. I understand DEP review will NOT begin until I have submitted the correct fee.
- I request to be exempt from the DEP planning module review fee because this planning module creates **only** one new lot and is the **only** lot subdivided from a parcel of land as that land existed on December 14, 1995. I realize that subdivision of a second lot from this parcel of land shall disqualify me from this review fee exemption. I am furnishing the following deed reference information in support of my fee exemption.

County Recorder of Deeds for _____ County, Pennsylvania

Deed Volume _____ Book Number _____

Page Number _____ Date Recorded _____

R. REVIEW FEE (continued)

Formula:

1. For a new collection system (with or without a Clean Streams Law Permit), a collection system extension, or individual tap-ins to an existing collection system use this formula.

$$\#3.13 \quad \text{Lots (or EDUs)} \times \$50.00 = \$ 156.50$$

The fee is based upon:

- The number of lots created or number of EDUs whichever is higher.
 - For community sewer system projects, one EDU is equal to a sewage flow of 400 gallons per day.
2. For a surface or subsurface discharge system, use the appropriate one of these formulae.

- A. A new surface discharge greater than 2000 gpd will use a flat fee:

$$\begin{aligned} & \$ 1,500 \text{ per submittal (non-municipal)} \\ & \$ 500 \text{ per submittal (municipal)} \end{aligned}$$

- B. An increase in an existing surface discharge will use:

$$\# \quad \text{Lots (or EDUs)} \times \$35.00 = \$$$

to a maximum of \$ 1,500 per submittal (non-municipal) or \$ 500 per submittal (municipal)

The fee is based upon:

- The number of lots created or number of EDUs whichever is higher.
 - For community sewage system projects one EDU is equal to a sewage flow of 400 gallons per day.
 - For non-single family residential projects, EDUs are calculated using projected population figures
- C. A sub-surface discharge system that requires a permit under The Clean Streams Law will use a flat fee:
- $$\begin{aligned} & \$ 1,500 \text{ per submittal (non-municipal)} \\ & \$ 500 \text{ per submittal (municipal)} \end{aligned}$$



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.



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

Pittsburgh Cultural Trust - 937 Liberty Avenue

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

1. Date plan received by municipal planning agency 9/7/20222. Date review completed by agency 9/23/2022

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

Yes	No	
<input type="checkbox"/>	<input checked="" 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"/>	N/A <input type="checkbox"/>	2. Is this proposal consistent with the comprehensive plan for land use? If no, describe the inconsistencies _____
<input checked="" 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 checked="" 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 checked="" type="checkbox"/>	5. Does this project propose encroachments, obstructions, or dams that will affect wetlands? If yes, describe impacts _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. Will any known historical or archaeological resources be impacted by this project? If yes, describe impacts _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. Will any known endangered or threatened species of plant or animal be impacted by this project? If yes, describe impacts _____
<input checked="" type="checkbox"/>	<input type="checkbox"/>	8. Is there a municipal zoning ordinance?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	9. Is this proposal consistent with the ordinance? If no, describe the inconsistencies _____
<input type="checkbox"/>	<input checked="" type="checkbox"/>	10. Does the proposal require a change or variance to an existing comprehensive plan or zoning ordinance?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	11. Have all applicable zoning approvals been obtained?
<input checked="" type="checkbox"/>	<input type="checkbox"/>	12. Is there a municipal subdivision and land development ordinance?

SECTION C. AGENCY REVIEW (continued)

- | Yes | No | |
|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 13. Is this proposal consistent with the ordinance?
If no, describe the inconsistencies _____ |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 14. Is this plan consistent with the municipal Official Sewage Facilities Plan?
If no, describe the inconsistencies _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 15. Are there any wastewater disposal needs in the area adjacent to this proposal that should be considered by the municipality?
If yes, describe _____ |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 16. Has a waiver of the sewage facilities planning requirements been requested for the residual tract of this subdivision? |
| <input type="checkbox"/> | <input type="checkbox"/> | 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: Kyla Prendergast

Title: Senior Environmental Planner

Signature: *Kyla Prendergast*

Date: September 23, 2021

Name of Municipal Planning Agency: City of Pittsburgh Department of City Planning

Address 200 Ross Street 4th Floor Pittsburgh, PA 15219

Telephone Number: (412) 255-6551

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.

COUNTY OF



ALLEGHENY

RICH FITZGERALD
COUNTY EXECUTIVE

September 7, 2022

Ian Booe
Red Swing Group 1
4314 Old William Penn Highway, Suite 101
Monroeville, PA 15146

**RE: SEWAGE FACILITIES PLANNING MODULE; ALLEGHENY COUNTY
Pittsburgh Cultural Trust – 937 Liberty Avenue, City of Pittsburgh**

Dear Mr. Booe:

Enclosed is a signed copy of Component 4C, County or Joint County Health Department Review, for the above-referenced development. This Planning Module Component was received on September 7, 2022. The project proposes the following:

Project Description:	Pittsburgh Cultural Trust - 937 Liberty Avenue. Proposing the interior renovation work on the existing building to bring utilities up to code/regulations and will involve the addition of bathrooms, sink, lavatories, etc. and separation of storm and sanitary within the building located in the City of Pittsburgh, Allegheny County.
Sewage Flow:	640 GPD
Conveyance:	The flow from this site will be conveyed to the Pittsburgh Water and Sewer Authority (PWSA) collection system to the ALCOSAN POC A-12 to the Allegheny River Interceptor and then to the ALCOSAN Treatment Plant at Woods Run.
Sewer's Owner:	PWSA (collection) and ALCOSAN (interceptor)
Name of Sewage Treatment Plant:	ALCOSAN



DEBRA BOGEN, MD, FAAP, FABM, DIRECTOR
ALLEGHENY COUNTY HEALTH DEPARTMENT

WATER POLLUTION CONTROL & SOLID WASTE MANAGEMENT
3901 PENN AVENUE • BUILDING 5 • PITTSBURGH, PA 15224-1318
PHONE: 412.578.8040 • FAX: 412.578.8053
WWW.ALLEGHENYCOUNTY.US/HEALTHDEPARTMENT



Mr. Ian Booe
September 7, 2022
Page 2

Please be advised that a permit must be obtained from the Allegheny County Health Department's (ACHD) Plumbing Section prior to commencing any plumbing work for the proposed project. Plumbing work for which an ACHD Plumbing Permit must be obtained includes any plumbing work done on the site and any sewers, which will not be owned and operated by a municipality or a sewer authority.

In addition, it should be noted that the approval of this sewage facilities planning module does not include approval of pipe size and/or type. Approval for pipe size and/or type must be obtained by filing a specific plumbing plan with the ACHD's Plumbing Section. If you should have any questions relative to ACHD's plumbing requirements, Drew Grese, Acting Plumbing Chief at 412-578-8055.

The ACHD has no objection to the approval of this project. If you have any questions, please call me at 412-578-8046.

Sincerely,



Freddie Fields, M.B.A.
Environmental Health Engineer III
Water Pollution Control & Solid Waste Management

Enclosure

cc: Thomas Flanagan, PA Department of Environmental Protection w/attachment
Drew Grese, ACHD w/attachment



INSTRUCTIONS FOR COMPLETING COMPONENT 4C COUNTY OR JOINT HEALTH DEPARTMENT 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.

SEWAGE FACILITIES PLANNING MODULE

COMPONENT 4C - COUNTY OR JOINT HEALTH DEPARTMENT 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 county or joint county health department for their comments.

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

Project Name

Pittsburgh Cultural Trust - 937 Liberty Avenue

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

1. Date plan received by county or joint county health department September 7, 2022Agency name Allegheny County Health Department (ACHD)2. Date review completed by agency September 7, 2022

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

Yes No

 1. Is the proposed plan consistent with the municipality's Official Sewage Facilities Plan?

If no, what are the inconsistencies? _____

 2. Are there any wastewater disposal needs in the area adjacent to this proposal that should be considered by the municipality?

If yes, describe _____

 3. Is there any known groundwater degradation in the area of this proposal?

If yes, describe _____

 4. The county or joint county health department recommendation concerning this proposed plan is as follows: ACHD recommends approval. See attached letter.

5. Name, title and signature of person completing this section:

Name: Freddie FieldsTitle: Environmental Health Engineer IIISignature: Date: September 7, 2022Name of County Health Department: ACHDAddress: 3901 Penn Avenue, Building #5, Pittsburgh, PA 15224-1318Telephone Number: 412-578-8046

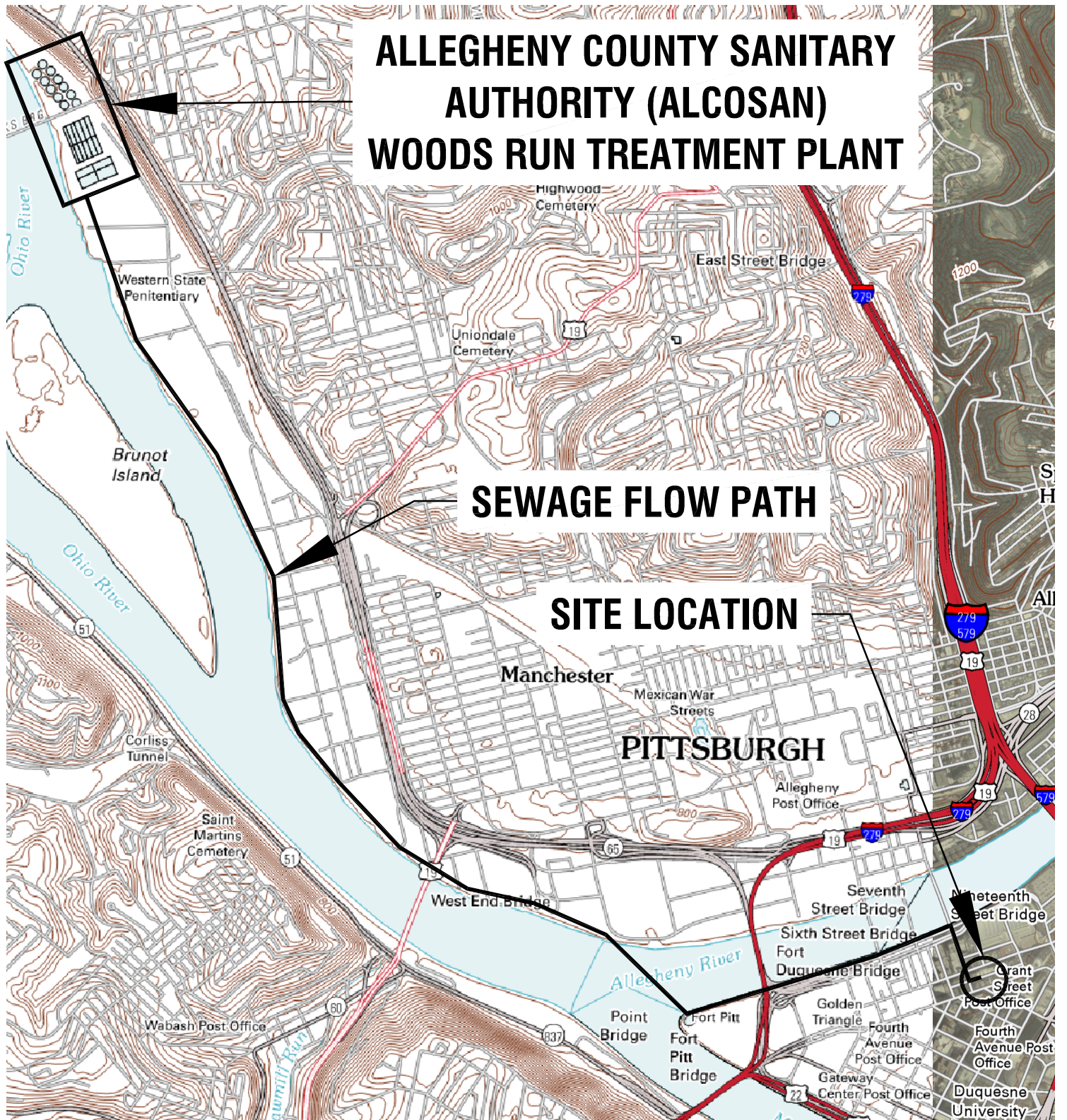
SECTION D. ADDITIONAL COMMENTS (See Section D of instructions)

This component does not limit county 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 county planning agency must complete this component within 60 days.

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

ALLEGHENY COUNTY SANITARY AUTHORITY (ALCOSAN) WOODS RUN TREATMENT PLANT



SEWAGE FLOW PATH

SITE LOCATION

REFERENCES:

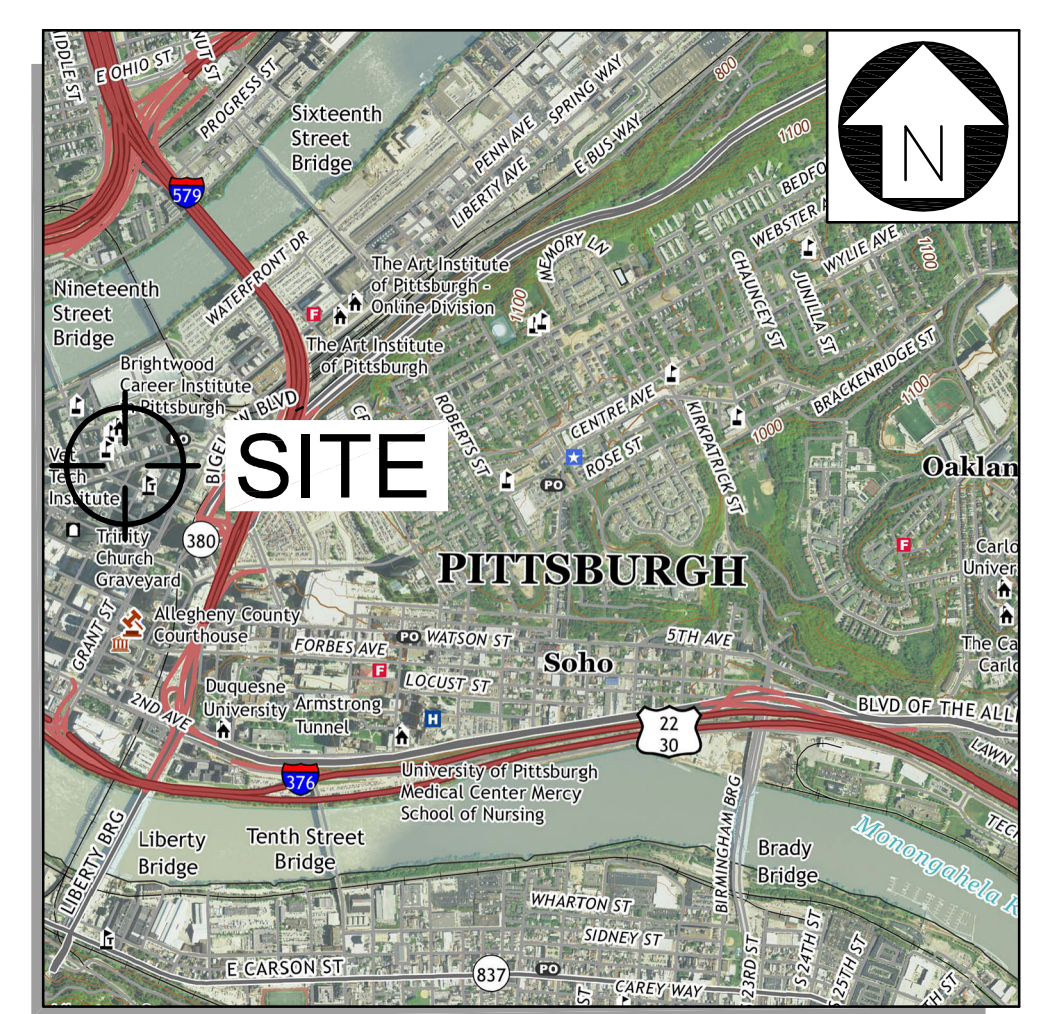
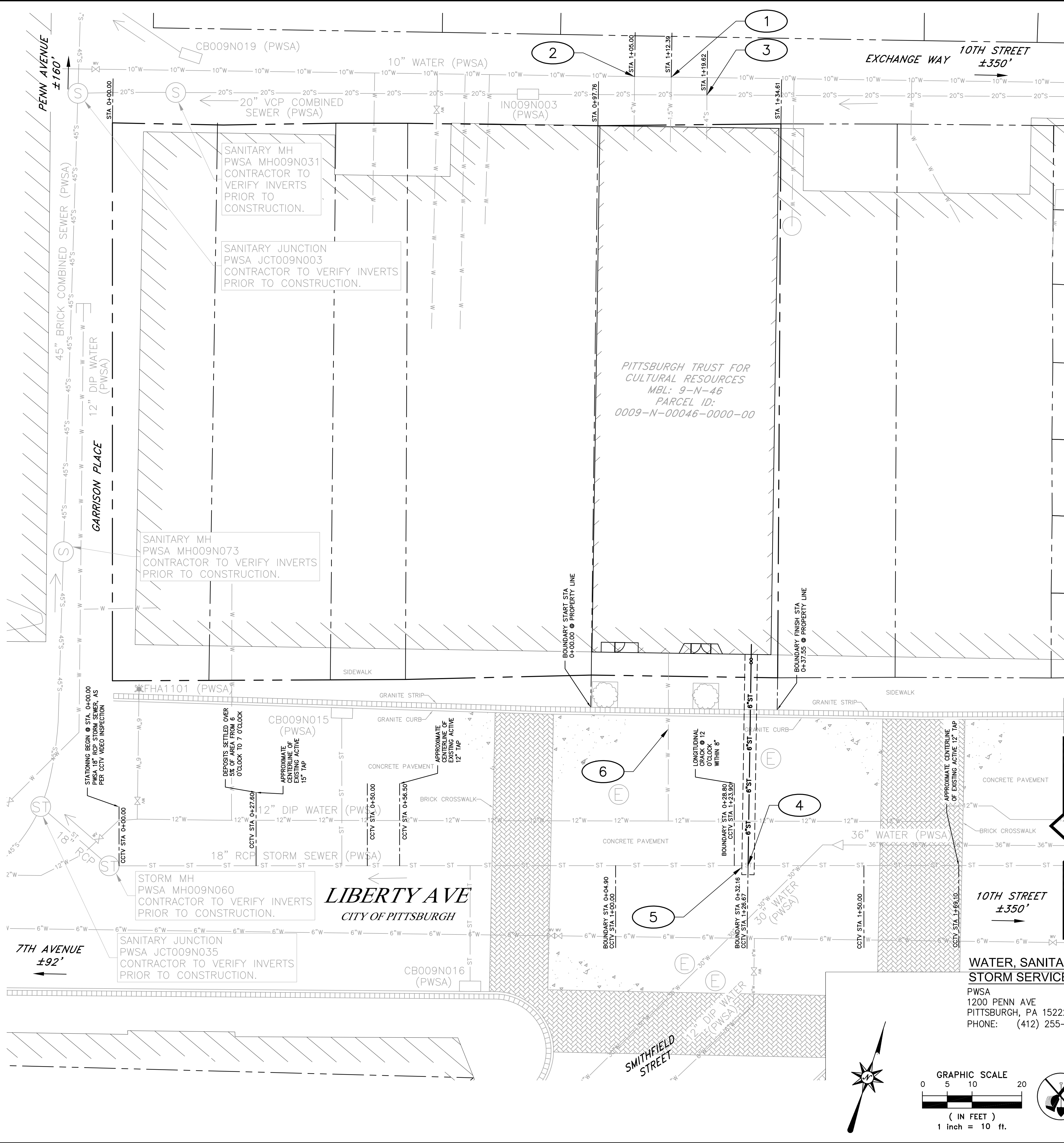
- 1.) PITTSBURGH EAST, PA - 2019
USGS QUADRANGLE
- 2.) PITTSBURGH WEST, PA - 2019
USGS QUADRANGLE



REVISIONS	
DATE	BY

PITTSBURGH CULTURAL TRUST
937 LIBERTY AVENUE
USGS VICINITY MAP

RED SWING GROUP
DEVELOPMENT SERVICES/DUE DILIGENCE/ ENGINEERS/ OWNERS/ SURVEYORS
4314 OLD WILLIAM PENN HWY
SUITE 101
MONROEVILLE, PA 15146
OFFICE: 724.325.1215



USGS VICINITY MAP
SCALE: 1"=2000'

LEGEND

- PROPERTY LINE
- ADJOINER LINE
- ST STORM SEWER LINES
- W WATER SERVICE LINES
- SANITARY SEWER LINES
- (E) ELECTRIC MANHOLE
- (S) SANITARY MANHOLE
- (ST) STORM MANHOLE
- CATCH BASIN
- ⊗ WATER VALVE
- ⊠ REDUCER
- ⊗ FIRE HYDRANT

NOTE:
1. THIS PLAN INCLUDING ALL LOCATIONS AND DIMENSIONS ARE BASED OFF OF PASDA DATA AND PWSA UTILITY MAPS.



PEAK DAILY SANITARY FLOW DEMANDS
To be completed by the Applicant:

PROJECT FLOW, GPD	1,252
EXISTING FLOW, GPD	612
NET FLOW, GPD	640
DEF SFPM APPROVAL DATE (If required)	

- SITE UTILITY NOTES**
- EXISTING 1-1/2" DOMESTIC WATER TAP INTO EXISTING PWSA 10" WATER LINE TO REMAIN. (STA. 1+12.39)
 - EXISTING 4" FIRE PROTECTION WATER TAP INTO EXISTING PWSA 10" WATER LINE TO REMAIN. (STA. 1+05.00)
 - EXISTING 4" SANITARY CONNECTION TO EXISTING PWSA 20" COMBINED SEWER TO REMAIN. (STA. 1+19.62)
 - PROPOSED 6" PVC STORMWATER CONNECTION TO EXISTING 18" PWSA STORM SEWER. (STA. 1+26.67) REFER TO DETAIL SSC-1, PLAN SHEET TP1.2.
 - APPROXIMATE LIMITS OF TRENCHING. REFER TO DETAILS SA-7 & SA-1C, PLAN SHEET TP1.2.
 - EXISTING WATER LINE TO REMAIN. EXISTING METER LOCATED INSIDE THE BUILDING (METER NUMBER: 60927692). PWSA ACCOUNT NUMBER: 5001259-1009779.

THE PITTSBURGH WATER & SEWER AUTHORITY APPROVAL BLOCK
To be completed by the Applicant:
(Check all that apply)

<input type="checkbox"/>	NEW WATER CONNECTION(S)
<input checked="" type="checkbox"/>	NEW SEWER CONNECTION(S)
<input checked="" type="checkbox"/>	REUSE EXISTING WATER CONNECTION(S)
<input checked="" type="checkbox"/>	REUSE EXISTING SEWER CONNECTION(S)
<input type="checkbox"/>	TERMINATE EXISTING WATER CONNECTION(S)
<input type="checkbox"/>	TERMINATE EXISTING SEWER CONNECTION(S)
<input type="checkbox"/>	PRIVATE CONSTRUCTION OF PUBLIC FACILITIES

To be completed by the PWSA:
(Required for ALL approvals)

REVIEWER, DEPT. OF ENGINEERING AND CONSTRUCTION

SENIOR PROJECT MANAGER, DEPT. OF ENGINEERING AND CONSTRUCTION

DIRECTOR OF OPERATIONS

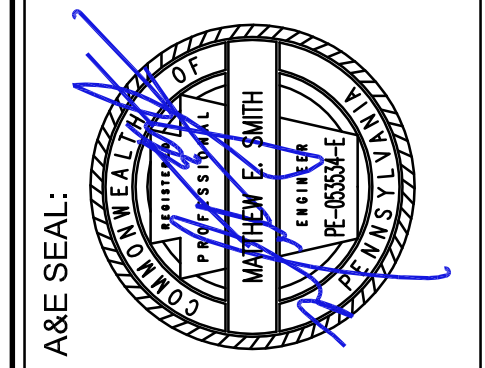
(Required for "Private Construction of Public Facilities" ONLY)

DIRECTOR, DEPT. OF ENGINEERING AND CONSTRUCTION

PWSA PROJECT NUMBER: DEV-60-0322

TAP C RECORD NUMBER: _____

Signatures / Approval by PWSA are for the physical connection(s) to the water and/or sewer system only. Responsibility for the design and work depicted by the drawings, including the floor design for the facilities, is by the Professional Engineer shown by the seal and signature affixed to the drawing. The PWSA does not represent or warrant that the water supply to the facilities is sufficient to support the design.

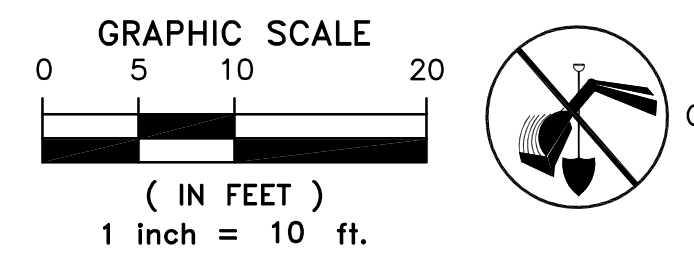


ACKNOWLEDGEMENT OR SIGN-OFF BY
OWNER OR CONTRACTOR
DRAWING OR CONSTRUCTION
DATE: _____
ALTERATION OF THIS SET OF DOCUMENTS IS PROPRIETARY BY NATURE. ANY USE OR DISCLOSURE OTHER THAN THAT WHICH RELATES TO THIS PROJECT IS A VIOLATION OF LAW FOR ANY PERSON, UNLESS THEY ARE WORKING UNDER THE DIRECTION OF A LICENSED PROFESSIONAL ENGINEER TO ALTER THIS DOCUMENT.

PITTSBURGH CULTURAL TRUST
PWSA TAP-IN PLANS
937 LIBERTY AVENUE
PITTSBURGH, PA 15222
ALLEGHENY COUNTY - 2ND WARD

REVISIONS:

MARK	DATE	DESCRIPTION
E	8/26/2022	REVISED PER PWSA COMMENTS
D	7/28/2022	REVISED PER PWSA COMMENTS
C	6/30/2022	REVISED PER PWSA COMMENTS
B	6/2/2022	REVISED PER PWSA COMMENTS
A	3/28/2022	ISSUED FOR CLIENT REVIEW



DEVELOPER
PITTSBURGH CULTURAL TRUST
803 LIBERTY AVENUE
PITTSBURGH, PA 15222
PHONE: (412) 456-6666

ONE CALL SERIAL NUMBER:
20221162828

CALL BEFORE YOU DIG!
PENNSYLVANIA LAW REQUIRES
3 WORKING DAYS NOTICE FOR
CONSTRUCTION PHASE AND 10 WORKING
DAYS NOTICE IN DESIGN STAGE.
STOP CALL
PENNSYLVANIA ONE CALL SYSTEM, INC.
1-800-242-1776

PITTSBURGH CULTURAL TRUST

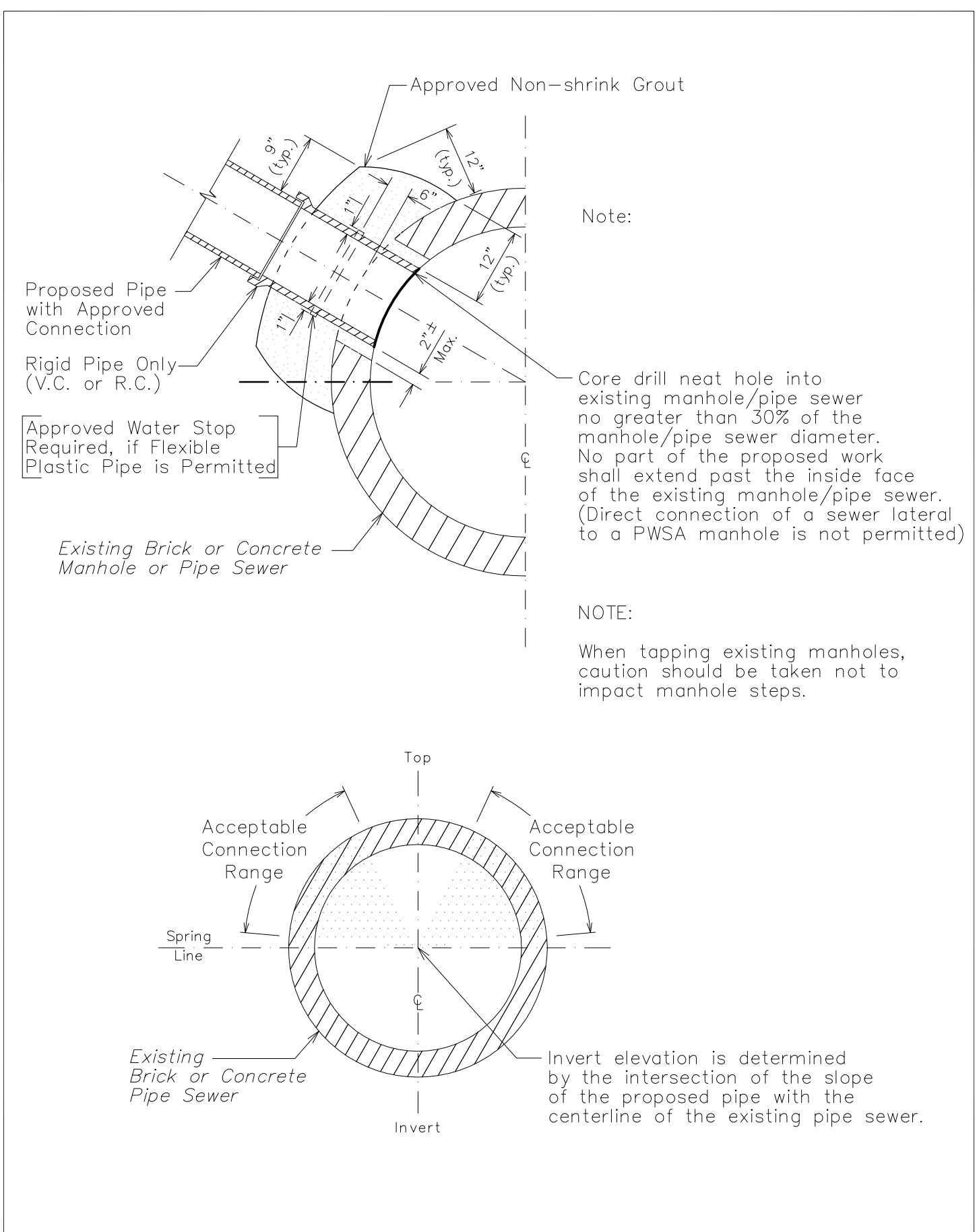
PITTSBURGH CULTURAL TRUST
PWSA TAP-IN PLAN
937 LIBERTY AVENUE
PITTSBURGH, PA 15222
ALLEGHENY COUNTY - 2ND WARD

SCALE: _____ SHEET _____ ACCESSION NO. C-
DATE: 1 OF 2 CASE NO. _____

PROJ NO: 19-1251
SCALE: AS SHOWN
DATE: 5/30/2019
DESIGNED BY: RSG
DRAWN BY: RSG
CHECKED BY: RLS

SHEET TITLE:
TAP-IN PLAN

SHEET NO.
TP1.1



REVISIONS		DATE

Approved by: _____

Scale: N.T.S. Supplemental Detail Drawing: SSC-1

The Pittsburgh Water and Sewer Authority
Manhole / Pipe Sewer Cored Wye Connection

THE PITTSBURGH WATER & SEWER AUTHORITY APPROVAL BLOCK
 To be completed by the Applicant:
 (Check all that apply)

NEW WATER CONNECTION(S)
 NEW SEWER CONNECTION(S)
 REUSE EXISTING WATER CONNECTION(S)
 REUSE EXISTING SEWER CONNECTION(S)
 TERMINATE EXISTING WATER CONNECTION(S)
 TERMINATE EXISTING SEWER CONNECTION(S)
 PRIVATE CONSTRUCTION OF PUBLIC FACILITIES

To be completed by the PWSA:
 (Required for ALL approvals)

REVIEWER, DEPT. OF ENGINEERING AND CONSTRUCTION

SENIOR PROJECT MANAGER, DEPT. OF ENGINEERING AND CONSTRUCTION

DIRECTOR OF OPERATIONS

(Required for "Private Construction of Public Facilities" ONLY)

DIRECTOR, DEPT. OF ENGINEERING AND CONSTRUCTION

PWSA PROJECT NUMBER: DEV-60-0322
 TAP C RECORD NUMBER: _____

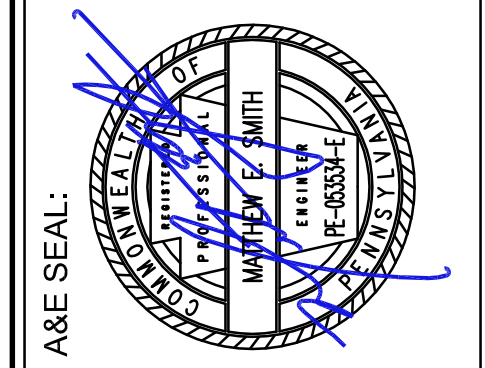
Signatures / Approval by PWSA are for the physical connection(s) to the water and/or sewer system only. Responsibility for the design and work depicted by the drawings, including the floor design for the facilities, is by the Professional Engineer shown by the seal and signature affixed to the drawing. The PWSA does not represent or warrant that the water supply to the facilities is sufficient to support the design.

PITTSBURGH CULTURAL TRUST

PITTSBURGH CULTURAL TRUST
 PWSA TAP-IN PLAN
 937 LIBERTY AVENUE
 PITTSBURGH, PA 15222
 ALLEGHENY COUNTY - 2ND WARD

SCALE: SHEET 2 OF 2 ACCESSION NO. C-
 DATE: CASE NO.

RED SWING GROUP
 ONE MONROEVILLE CENTER
 3824 NORTHERN PIKE, SUITE 800
 MONROEVILLE, PA 15146
 OFFICE: 724-325-1216



ACKNOWLEDGEMENT OR SIGN-OFF BY APPLICANT TO BE COMPLETED ON DRAWING PRIOR TO CONSTRUCTION. ALTERATION OF LEASE TERMS. THE INFORMATION CONTAINED IN THIS SET OF DOCUMENTS IS PROPRIETARY BY NATURE. ANY USE OR DISCLOSURE OTHER THAN THAT WHICH RELATES TO THIS PROJECT IS A VIOLATION OF LAW FOR ANY PERSON, UNLESS THEY ARE WORKING UNDER THE DIRECTION OF A LICENSED PROFESSIONAL ENGINEER TO ALTER THIS DOCUMENT.

PITTSBURGH CULTURAL TRUST
PWSA TAP-IN PLANS
 937 LIBERTY AVENUE
 PITTSBURGH, PA 15222
 ALLEGHENY COUNTY - 2ND WARD

REVISIONS:	MARK	DATE	DESCRIPTION
E	8/26/2022	REVISED PER PWSA COMMENTS	
D	7/28/2022	REVISED PER PWSA COMMENTS	
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PROJ NO: 19-1251
 SCALE: AS SHOWN
 DATE: 5/30/2019
 DESIGNED BY: RSG
 DRAWN BY: RSG
 CHECKED BY: RLS

SHEET TITLE:
TAP-IN DETAILS

SHEET NO.
TP1.2