

**Application of Pennsylvania-American Water Company for Acquisition of  
the Water Assets of Valley Township  
66 Pa. C.S. § 1329  
Application Filing Checklist – Water/Wastewater  
Docket No. A-2020-3019859**

20. Proof of Compliance. Provide proof of compliance with applicable design, construction and operation standards of DEP or of the county health department, or both, including:
- a. For **water** system acquisitions, provide copies of the public water supply/water quality management permits for the utility plant.

**RESPONSE:**

- a. Copies of the public water supply/water quality management permits provided by Valley are attached as **Appendix A-20-a**. Additional water permits may be identified going forward. Copies of any additional water permits located will be provided.



1150125

1150197

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES

Post Office Box 8761  
Harrisburg, PA 17105-8761  
April 3, 1992

Bureau of Water Resources Management

717-541-7800

John E. High, Chairman  
Valley Township Board of Supervisors  
890 West Lincoln Highway  
Coatesville, PA 19320

Re: DER File No. WA 15-917

Dear Mr. High:

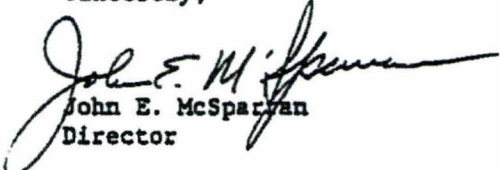
The water allocation application filed by Valley Township has been approved. Water Allocation Permit WA-917 which grants the Township the right to purchase up to a maximum of 250,000 gallons per day, as a 30-day average, from the City of Coatesville Authority in Chester County, is enclosed along with a report prepared on the application. Special attention should be given to the timeframes for completing actions as required by certain conditions of the permit.

Condition 4 of the permit requires that the Township install accurate measuring and recording instruments or devices to determine the amount of water purchased from the City of Coatesville Authority at each interconnection and submit monthly reports of the daily purchases to the Department at the address shown on the enclosed forms that may be used for this purpose.

Condition 5 requires the adoption of a drought contingency plan. For all water purchased from the City of Coatesville Authority, adoption of their drought contingency plan would satisfy this condition. Attention should also be given to Condition 6 which requires the development of a water conservation program. For assistance in the development of a conservation program, you may contact the Water Planning and Conservation Section, at the above address or by telephone at 717-541-7805.

If you have any questions regarding the permit conditions, you may contact Steve Runkle, Chief, Delaware River Basin Section, at the above address or by telephone at 717-541-7805.

Sincerely,

  
John E. McSparyan  
Director

Enclosures



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES

Post Office Box 8761  
Harrisburg, Pennsylvania 17105-8761

Bureau of Water Resources Management

Valley Township  
Chester County

Permit No. WA-917

WATER ALLOCATION PERMIT

The Department of Environmental Resources, established by the Act of December 3, 1970 (71 P.S. 51 et. seq.) and transferring the functions of the Water and Power Resources Board, under and by virtue of the authority vested in and imposed upon it by an Act of the General Assembly of Pennsylvania, entitled "An Act relating to the acquisition of rights to divert water from rivers, streams, natural lakes, ponds, or other surface waters within the Commonwealth or partly within and partly without the Commonwealth" etc., approved the 24th day of June, one thousand nine hundred and thirty-nine, P.L. 842 (Act No. 365) hereby grants leave to Valley Township with its principal offices located in Valley, Pennsylvania, to acquire and use for public water supply purposes, subject to such existing rights and uses as may now be lawful, water rights in the following designated waters of the Commonwealth: the right to purchase up to a maximum of 250,000 gallons per day, as a 30-day average, from the City of Coatesville Authority in Chester County.

This permit is issued in response to an application filed with the Department of Environmental Resources on the 27th day of November, A.D. 1991, and with the understanding that the proposed source of water supply shall be developed as set forth in said application and in accompanying data filed with and made a part thereof, subject, however, to the provisions of the Act of June 24, 1939, P.L. 842 (No. 365), and the following conditions, regulations and restrictions:

1. This permit does not give any property rights, either in real estate or material, nor any exclusive privileges, nor shall it be construed to grant or confer any right, title, easement or interest in, to or over any land belonging to the Commonwealth of Pennsylvania; neither does it authorize any injury to private property nor invasion of private rights, nor any infringement of Federal, State or Local laws or regulations; nor does it obviate the necessity of obtaining Federal assent when necessary;
2. The duration of this permit shall be for the period of the contract between the permittee and the City of Coatesville Authority dated March 6, 1990, but shall in no case exceed 25 years, provided, however, that should the permittee for any reason whatsoever fail to take and use the water or water rights for which this permit is issued within a period of four years, or cease to take and use the water hereby allocated for any period of seven consecutive years, or terminate or fail to renew its purchase agreement with the City of Coatesville Authority, then this permit shall cease and be null and void; unless upon application by the permittee an extension of such period is granted by the Department of Environmental Resources;
3. The permittee shall, within 12 months after the date of this permit, file with the Department of Environmental Resources' State Water Plan Division, proof of the method and extent of its acquisition;



4. The permittee shall install accurate measuring and recording instruments or devices to determine the amount of water purchased from the City of Coatesville Authority at each interconnection. The design and layout of said measuring devices shall be submitted to and be approved by the Department of Environmental Resources' State Water Plan Division before installation. Records of daily flow readings shall be submitted to the State Water Plan Division monthly, and the original field records shall be available at all times for inspection by representatives of the Department. The required measuring devices shall be installed and readings shall begin within one year from the date of this permit, for each existing interconnection;
5. The permittee shall respond to drought conditions as outlined within the City of Coatesville Authority's Drought Contingency Plan. The permittee shall impose water use restrictions upon customers in accordance with and at such time as actions which are required of customers served by the City of Coatesville Authority;
6. The permittee shall adopt and implement a continuous water conservation program for all types of use within the area served by this permit. This program shall include, but is not limited to:
  - a. An ongoing program for installing meters at all existing and new customer connections;
  - b. An ongoing program for regularly testing and repairing or replacing all meters;
  - c. An ongoing leakage/loss control program;
  - d. A water conservation education program;
  - e. A program for reducing customer demand for water by requiring the installation of water-saving plumbing devices in all new accounts or promoting the adoption of water conservation ordinances by Valley Township;

The permittee's water conservation program shall comply with the water conservation policies of the Delaware River Basin Commission and the recommendations of the Department;

7. The permittee shall submit a permit compliance report to the Department of Environmental Resources' State Water Plan Division, on forms provided by the Department, annually, on or before the anniversary date of this permit, unless otherwise specified;
8. The permittee shall not supply any new or additional quantity of water to any public water supply agency until that agency shall have first obtained from the Department of Environmental Resources' State Water Plan Division a subsidiary water allocation permit for the specific withdrawal;
9. This application and permit was reviewed by the Delaware River Basin Commission in accordance with Section 3.8, Referral and Review, of the Delaware River Basin Compact, and was found not to require further approval by the Commission beyond existing Docket D-88-31CP;



10. This permit is subject to review and possible modification of said rights, conditions, or restrictions at a later date or dates, as provided in Section 7 of the Act of June 24, 1939, P.L. 842 (No. 365).

Date: 4/3/92

DEPARTMENT OF ENVIRONMENTAL RESOURCES

By: John E. McSparran  
John E. McSparran, Director  
Bureau of Water Resources Management

ATTEST:

William A. Gast  
William A. Gast, Chief  
State Water Plan Division



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF COMMUNITY ENVIRONMENTAL CONTROL

PUBLIC WATER SUPPLY PERMIT

NO. 1587508

<p><b>A. PERMITTEE: (Name and Address)</b></p> <p>Valley Township Authority 858 Reeceville Road Coatesville, PA 19320</p>	<p><b>B. PROJECT LOCATION</b></p> <p>Municipality <u>Valley Township</u> County <u>Chester</u></p>			
<p><b>C. THIS PERMIT APPROVES FOR:</b> 1. <input checked="" type="checkbox"/> Use as Source of Supply 2. <input type="checkbox"/> Construction 3. <input checked="" type="checkbox"/> Operation</p> <p><b>AS INDICATED BELOW:</b></p> <table style="width:100%; border: none;"> <tr> <td style="width:33%; vertical-align: top;"> <p><u>4X Source</u></p> <p><input type="checkbox"/> Well(s) <input type="checkbox"/> Spring(s) <input type="checkbox"/> Stream <input type="checkbox"/> Lake</p> </td> <td style="width:33%; vertical-align: top;"> <p><u>5. Facilities</u></p> <p><input type="checkbox"/> Impoundment <input checked="" type="checkbox"/> Settling <input checked="" type="checkbox"/> Filtration <input type="checkbox"/> Iron and Manganese Treatment <input type="checkbox"/> Softening <input type="checkbox"/> Fluoridation <input type="checkbox"/> Other _____</p> </td> <td style="width:33%; vertical-align: top;"> <p><input checked="" type="checkbox"/> Stabilization <input checked="" type="checkbox"/> Disinfection <input checked="" type="checkbox"/> Pump Station(s) <input checked="" type="checkbox"/> Transmission Lines <input type="checkbox"/> Distribution Storage <input type="checkbox"/> Distribution System</p> </td> </tr> </table> <p>KNOWN AS <u>Valley Springs Water Company - Wells V-1 and V-2</u></p>		<p><u>4X Source</u></p> <p><input type="checkbox"/> Well(s) <input type="checkbox"/> Spring(s) <input type="checkbox"/> Stream <input type="checkbox"/> Lake</p>	<p><u>5. Facilities</u></p> <p><input type="checkbox"/> Impoundment <input checked="" type="checkbox"/> Settling <input checked="" type="checkbox"/> Filtration <input type="checkbox"/> Iron and Manganese Treatment <input type="checkbox"/> Softening <input type="checkbox"/> Fluoridation <input type="checkbox"/> Other _____</p>	<p><input checked="" type="checkbox"/> Stabilization <input checked="" type="checkbox"/> Disinfection <input checked="" type="checkbox"/> Pump Station(s) <input checked="" type="checkbox"/> Transmission Lines <input type="checkbox"/> Distribution Storage <input type="checkbox"/> Distribution System</p>
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<p><del>This Permit is also subject to the Standard Conditions Relating to Erosion Control (1973).</del></p> <p>Your application, its supporting documents and amendments are hereby made a part of this permit.</p> <p>YOU ARE HEREBY AUTHORIZED TO USE AS SOURCE(S) OF SUPPLY, CONSTRUCT OR OPERATE, AS INDICATED ABOVE, PROVIDED THAT FAILURE TO COMPLY WITH CHAPTER 109, ARTICLE II, OF THE RULES AND REGULATIONS OF THE DEPARTMENT OF ENVIRONMENTAL RESOURCES OR THE TERMS OR CONDITIONS OF THIS PERMIT SHALL VOID THE AUTHORITY GIVEN TO THE PERMITTEE BY THE ISSUANCE OF THE PERMIT.</p> <p>NO DEVIATIONS FROM APPROVED PLANS OR SPECIFICATIONS AFFECTING THE TREATMENT PROCESS OR QUALITY OF WATERS SHALL BE MADE WITHOUT WRITTEN APPROVAL FROM THE DEPARTMENT.</p> <p>THIS PERMIT IS ISSUED BY THE DEPARTMENT OF ENVIRONMENTAL RESOURCES UNDER THE AUTHORITY OF THE PENNSYLVANIA SAFE DRINKING WATER ACT, THE ACT OF MAY 1, 1984 (P.L. 206, NO. 43). OPERATION SHALL COMPLY WITH THE PROVISIONS OF CHAPTER 109 ADOPTED UNDER THE AUTHORITY IN SECTIONS 4 AND 6(e) OF THE PENNSYLVANIA SAFE DRINKING WATER ACT.</p> <p>THIS PERMIT IS SUBJECT TO THE ATTACHED SPECIAL CONDITIONS _____</p> <p>THIS PERMIT IS SUBJECT TO THE FOLLOWING STANDARD CONDITIONS RELATING TO EROSION CONTROL _____</p>				
<p>PERMIT ISSUED <u>JAN 27 1983</u></p> <p>Date _____</p>	<p>DEPARTMENT OF ENVIRONMENTAL RESOURCES</p> <p>By <u><i>Lewis Luchne, Jr.</i></u> LEWIS LUCHNE, JR. Regional Sanitarian Manager</p> <p>Title _____</p>			





1/85

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF COMMUNITY ENVIRONMENTAL CONTROL

Appendix A-20-a

PUBLIC WATER SUPPLY PERMIT

NO. 1588503

<p>A. PERMITTEE: (Name and Address)</p> <p>Valley Township Authority 858 Reeceville Road Coatesville, PA 19320</p>	<p>B. PROJECT LOCATION</p> <p>Municipality <u>Valley Township</u></p> <p>County <u>Chester</u></p>
--	--

C. THIS PERMIT APPROVES FOR: 1.  Use as Source of Supply 2.  Construction 3.  Operation

AS INDICATED BELOW:

<p>4. Source</p> <p><input checked="" type="checkbox"/> Well(s)</p> <p><input type="checkbox"/> Spring(s)</p> <p><input type="checkbox"/> Stream</p> <p><input type="checkbox"/> Lake</p>	<p>5. Facilities</p> <p><input type="checkbox"/> Impoundment</p> <p><input type="checkbox"/> Settling</p> <p><input type="checkbox"/> Filtration</p> <p><input checked="" type="checkbox"/> Iron and Manganese Treatment</p> <p><input type="checkbox"/> Softening</p> <p><input type="checkbox"/> Fluoridation</p> <p><input type="checkbox"/> Other _____</p>	<p><input type="checkbox"/> Stabilization</p> <p><input checked="" type="checkbox"/> Disinfection</p> <p><input checked="" type="checkbox"/> Pump Station(s)</p> <p><input checked="" type="checkbox"/> Transmission Lines</p> <p><input checked="" type="checkbox"/> Distribution Storage</p> <p><input checked="" type="checkbox"/> Distribution System</p>
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KNOWN AS Well No. V4

This Permit is also subject to the Standard Conditions Relating to Erosion Control (1973).  
Your application, its supporting documents and amendments are hereby made a part of this permit.

YOU ARE HEREBY AUTHORIZED TO USE AS SOURCE(S) OF SUPPLY, CONSTRUCT OR OPERATE, AS INDICATED ABOVE, PROVIDED THAT FAILURE TO COMPLY WITH CHAPTER 109, ARTICLE II, OF THE RULES AND REGULATIONS OF THE DEPARTMENT OF ENVIRONMENTAL RESOURCES OR THE TERMS OR CONDITIONS OF THIS PERMIT SHALL VOID THE AUTHORITY GIVEN TO THE PERMITTEE BY THE ISSUANCE OF THE PERMIT.

NO DEVIATIONS FROM APPROVED PLANS OR SPECIFICATIONS AFFECTING THE TREATMENT PROCESS OR QUALITY OF WATERS SHALL BE MADE WITHOUT WRITTEN APPROVAL FROM THE DEPARTMENT.

THIS PERMIT IS ISSUED BY THE DEPARTMENT OF ENVIRONMENTAL RESOURCES UNDER THE AUTHORITY OF THE PENNSYLVANIA SAFE DRINKING WATER ACT, THE ACT OF MAY 1, 1984 (P.L. 206, NO. 43). OPERATION SHALL COMPLY WITH THE PROVISIONS OF CHAPTER 109 ADOPTED UNDER THE AUTHORITY IN SECTIONS 4 AND 6(e) OF THE PENNSYLVANIA SAFE DRINKING WATER ACT.

THIS PERMIT IS SUBJECT TO THE ATTACHED SPECIAL CONDITIONS \_\_\_\_\_

THIS PERMIT IS SUBJECT TO THE FOLLOWING STANDARD CONDITIONS RELATING TO EROSION CONTROL \_\_\_\_\_

RECEIVED

PERMIT ISSUED

Date 4-3-89

DEPARTMENT OF ENVIRONMENTAL RESOURCES

By Lewis Luchie, Jr.

Title Regional Sanitarian Manager







# pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

SOUTHEAST REGIONAL OFFICE

March 18, 2011

Ms. Karen Chandler  
Valley Township  
890 West Lincoln Highway  
Coatesville, PA 19320

Re: Water Supply Permit No. 1511512  
GWR Certification

Dear Ms. Chandler:

The Department of Environmental Protection (Department) agrees that at least 4-log treatment of viruses is achieved at Valley Springs Entry Point 101, provided the parameters outlined in the table below are maintained:

PWS ID No.	Source Name	Source ID	Entry Point ID	Minimum Chlorine Residual (mg/L)	Minimum Temperature (°C)	Maximum Flow Rate (gpm)
1150185	Well V1	001	101	0.40	5.0	150
	Well V2	002				
	Well V4	004				

Referenced permit certifying 4-log treatment of viruses is enclosed. This certification is contingent on conducting compliance monitoring, which you should begin by April 1, 2011. Your submission indicated that a continuous free chlorine analyzer will be installed at your treatment facility; however, due to the size of the population served by the Valley Springs system, you may conduct compliance monitoring via daily grab sampling until the analyzer is installed and online. Below are instructions for both monitoring types.

The compliance monitoring requirements for a public water system conducting grab sampling as described in Title 25 Pa. Code Section 109.1305 of the Department's regulations include:

- Collect a daily grab sample at the entry point or other location approved by the Department during the hour of peak flow indicated on the *CWS Demonstration of 4-Log Treatment of Viruses for Groundwater Sources* or at any other time specified by the Department.
- Maintain the Department approved minimum free chlorine residual every day the public water system serves water from the groundwater source to the public.

Ms. Karen Chandler

- 2 -

March 18, 2011

- If any daily grab sample measurement falls below the Department approved minimum free chlorine residual the system, collect follow up samples at least every four hours until the residual is restored to the Department approved minimum level.

The compliance monitoring requirements for public water systems conducting continuous monitoring as described in Title 25 Pa. Code Section 109.1305 of the Department's regulations include:

- Continuously monitor the free chlorine residual at the entry point or other location approved by the Department, and record the results at least every 15 minutes each day that water from the groundwater source is served to the public.
- Maintain the Department approved minimum free chlorine residual every day the public water system serves water from the groundwater source to the public.
- Conduct grab sampling every four hours until the continuous monitoring equipment is returned to service if there is a failure in the continuous monitoring equipment. The system shall resume continuous residual disinfectant monitoring within 14 days.

The reporting requirements associated with compliance monitoring include:

- Report the date, time, and lowest value each day the free chlorine residual remains equal to or greater than the Department required minimum value.
- Report the initial date, time, and value for each occurrence that the free chlorine residual is less than the Department required minimum, and the subsequent date, time, and value that the free chlorine residual is equal to or greater than the required minimum.
- Report each date the entry point is not in operation.

These reporting requirements can be satisfied by completing an SDWA-1 form on-line and submitting it to the Department within the first 10 days following the end of each monthly monitoring period via DWELR.

Ms. Karen Chandler

- 3 -

March 18, 2011

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717.787.3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800.654.5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board, at 717.787.3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717.787.3483) FOR MORE INFORMATION.

Please study the permit carefully and direct any questions to the Water Supply Management Program, Southeast Regional Office.

Sincerely,



Nancy R. Roncetti  
Regional Manager  
Water Supply Management

Enclosures: Permit

cc: Mr. Ellis – Pennoni Associates, Inc.  
Mr. Robinson – Pennoni Associates, Inc.  
Mr. Corey – WSM (w/enclosure)  
Mr. Johnson – WSM (w/enclosure)  
Re – WSM  
Ms. Lashley  
30 (GJS11WSM)74-6

RECEIVED  
MAR 21 2011  
PENNONI ASSOCIATES, INC.







# pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

SOUTHEAST REGIONAL OFFICE

April 1, 2013

Ms. Patrice Proctor, Chairwoman  
Valley Township  
890 West Lincoln Highway  
P.O. Box 467  
Coatesville, PA 19320

Re: Valley Springs Water System  
Application No. 1513502  
APS No. 801629, AUTH No. 960006  
Valley Township  
Chester County

Dear Ms. Proctor:

Referenced permit for operating the existing Airport Road Interconnection with the Pennsylvania American Water Company (PAWC) is enclosed.

In accordance with the Department of Environmental Protection (Department) issuing an operations permit for the above-referenced interconnection, Valley Township is required to submit a subsidiary water allocation permit renewal application, under the Water Rights Act, Act of June 24, 1939, P.L. 842, 32 P.S. Sections 631-641, for all existing interconnections with the PAWC (Airport Road, Hillview, Mt Pleasant Street, and Red Road).

Valley Township's Subsidiary Water Allocation Permit No. WA-15-917, granting the right to purchase water from the City of Coatesville Authority (water system now owned and operated by the PAWC), expired on April 3, 2007.

Please submit the required permit application to the Department by June 30, 2013. The appropriate permit forms and instructions are available on the Department's website address located in the footer below (select "Water Allocation" from the "DEP Programs A-Z" menu).

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717.787.3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800.654.5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The

Ms. Patrice Proctor, Chairwoman

- 2 -

April 1, 2013

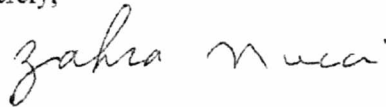
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IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717.787.3483) FOR MORE INFORMATION.

Please study the permit carefully and direct any questions to the Safe Drinking Water program, Southeast Regional Office.

Sincerely,



Zahra Nucci, P.E.  
Regional Manager  
Safe Drinking Water

Enclosures: Permit

cc: Mr. Ellis, P.E. -- Pennoni Associates, Inc.  
Mr. Woolston -- SDW (w/enclosure)  
Mr. Johnson -- SDW (w/enclosure)  
File  
Ms. Lashley  
Re (GJS13SDW)80-8



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
SAFE DRINKING WATER

**SAFE DRINKING WATER PERMIT**

No. 1513502

<p>A. PERMITTEE: (Name and Address)</p> <p style="text-align: center;"><b>Valley Township</b> 890 West Lincoln Highway Coatesville, PA 19320</p>	<p>B. PROJECT/PLANT LOCATION</p> <p>Municipality <u>Valley Township</u></p> <p>County <u>Chester</u></p>						
<p>C. THIS PERMIT APPROVES FOR:    1. <input type="checkbox"/> CONSTRUCTION    2. <input checked="" type="checkbox"/> OPERATION OF FACILITIES</p> <p>AS INDICATED BELOW: <span style="float: right;">Approved Under Construction Permit No. _____</span></p> <table style="width:100%; border: none;"> <tr> <td style="width:33%; vertical-align: top; padding: 5px;"> <p><b>Source</b></p> <p><input type="checkbox"/> Well(s)</p> <p><input type="checkbox"/> Spring(s)</p> <p><input type="checkbox"/> Surface Water</p> <p><input checked="" type="checkbox"/> Finished Water</p> </td> <td style="width:33%; vertical-align: top; padding: 5px;"> <p><b>Facilities</b></p> <p><input type="checkbox"/> Impoundment</p> <p><input type="checkbox"/> Settling</p> <p><input type="checkbox"/> Filtration</p> <p><input type="checkbox"/> Iron and Manganese Treatment</p> <p><input type="checkbox"/> Softening</p> <p><input type="checkbox"/> Fluoridation</p> <p><input type="checkbox"/> Distribution Facility</p> </td> <td style="width:33%; vertical-align: top; padding: 5px;"> <p><b>BVRB</b></p> <p><input type="checkbox"/> Bottled Water System</p> <p><input type="checkbox"/> Bulk Water Hauling System</p> <p><input type="checkbox"/> Vended Water System</p> <p><input type="checkbox"/> Retail Water Facility</p> </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> <p><input type="checkbox"/> General Corrosion Control</p> <p><input type="checkbox"/> Corrosion Control for Lead/Copper</p> <p><input type="checkbox"/> Disinfection</p> <p><input type="checkbox"/> Pump Station(s)</p> <p><input checked="" type="checkbox"/> Transmission Lines</p> <p><input type="checkbox"/> Finished Water Storage</p> <p><input checked="" type="checkbox"/> Other <u>Interconnection</u></p> </td> </tr> </table> <p>KNOWN AS <u>Airport Road Interconnection with Pennsylvania American Water Company</u></p>		<p><b>Source</b></p> <p><input type="checkbox"/> Well(s)</p> <p><input type="checkbox"/> Spring(s)</p> <p><input type="checkbox"/> Surface Water</p> <p><input checked="" type="checkbox"/> Finished Water</p>	<p><b>Facilities</b></p> <p><input type="checkbox"/> Impoundment</p> <p><input type="checkbox"/> Settling</p> <p><input type="checkbox"/> Filtration</p> <p><input type="checkbox"/> Iron and Manganese Treatment</p> <p><input type="checkbox"/> Softening</p> <p><input type="checkbox"/> Fluoridation</p> <p><input type="checkbox"/> Distribution Facility</p>	<p><b>BVRB</b></p> <p><input type="checkbox"/> Bottled Water System</p> <p><input type="checkbox"/> Bulk Water Hauling System</p> <p><input type="checkbox"/> Vended Water System</p> <p><input type="checkbox"/> Retail Water Facility</p>	<p><input type="checkbox"/> General Corrosion Control</p> <p><input type="checkbox"/> Corrosion Control for Lead/Copper</p> <p><input type="checkbox"/> Disinfection</p> <p><input type="checkbox"/> Pump Station(s)</p> <p><input checked="" type="checkbox"/> Transmission Lines</p> <p><input type="checkbox"/> Finished Water Storage</p> <p><input checked="" type="checkbox"/> Other <u>Interconnection</u></p>		
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<p><b>LIMIT OF AUTHORIZATION</b></p> <p>YOU ARE HEREBY AUTHORIZED TO CONSTRUCT OR OPERATE, AS INDICATED ABOVE, PROVIDED THAT FAILURE TO COMPLY WITH CHAPTER 109 OF THE RULES AND REGULATIONS OF THE DEPARTMENT OF ENVIRONMENTAL PROTECTION (DEPARTMENT) OR THE TERMS OR CONDITIONS OF THIS PERMIT SHALL VOID THE AUTHORITY GIVEN TO THE PERMITTEE BY THE ISSUANCE OF THE PERMIT.</p> <p>THE PLANS, SPECIFICATION, REPORTS, AND SUPPORTING DOCUMENTS SUBMITTED AS PART OF THE PERMIT APPLICATION BECOME PART OF THE PERMIT.</p> <p>NO DEVIATIONS FROM APPROVED PLANS OR SPECIFICATIONS AFFECTING THE TREATMENT PROCESS OR QUALITY OF WATERS SHALL BE MADE WITHOUT WRITTEN APPROVAL FROM THE DEPARTMENT.</p> <p>THIS PERMIT IS ISSUED BY THE DEPARTMENT UNDER THE AUTHORITY OF THE PENNSYLVANIA SAFE DRINKING WATER ACT, THE ACT OF MAY 1, 1984 (P.L. 206, NO. 43). OPERATION SHALL COMPLY WITH THE PROVISIONS OF CHAPTER 109 ADOPTED UNDER THE AUTHORITY IN SECTIONS 4 AND 6(e) OF THE PENNSYLVANIA SAFE DRINKING WATER ACT.</p> <p>THIS PERMIT IS SUBJECT TO THE ATTACHED SPECIAL CONDITIONS <u>I</u></p>							
<p><b>PERMIT ISSUED</b></p> <p>Date <u>MAR 29 2018</u></p>	<p><b>DEPARTMENT OF ENVIRONMENTAL PROTECTION</b></p> <p>By <u>Zahra Nucci</u></p> <p>Zahra Nucci, P.E. Regional Manager Safe Drinking Water</p> <p>Title _____</p>						

**Safe Drinking Water Permit No. 1513502  
Valley Township  
Valley Township, Chester County**

**This permit is subject to the following Special Condition(s):**

- I. The Water Rights Act, Act of June 24, 1939, P.L. 842, 32 P.S. Sections 631-641 requires a public water supply agency to hold a valid subsidiary water allocation permit for purchase of surface waters from another public water supply agency.

Re 30 (GJS13SDW)80-8a







# pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

SOUTHEAST REGIONAL OFFICE

July 15, 2013

Ms. Patrice Proctor, Chairwoman  
Valley Township  
890 West Lincoln Highway  
P.O. Box 467  
Coatesville, PA 19320

Re: Villages of Hillview Water System  
Application No. 1513511  
APS No. 806187, AUTH No. 967043  
Valley Township  
Chester County

Dear Ms. Proctor:

Referenced permit for operating the existing Hillview Interconnection with the Pennsylvania American Water Company (PAWC) is enclosed.

As a reminder, in accordance with the Department of Environmental Protection recently issuing an operations permit for the Airport Road Interconnection (Application No. 1513502), Valley Township is required to submit a subsidiary water allocation permit renewal application, under the Water Rights Act, Act of June 24, 1939, P.L. 842, 32 P.S. Sections 631-641, for all existing interconnections with the PAWC (Airport Road, Hillview, Mt. Pleasant Street, and Red Road).

Valley Township's Subsidiary Water Allocation Permit No. WA-15-917, granting the right to purchase water from the City of Coatesville Authority (water system now owned and operated by the PAWC), expired on April 3, 2007.

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717.787.3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800.654.5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board at 717.787.3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

Ms. Patrice Proctor, Chairwoman

- 2 -

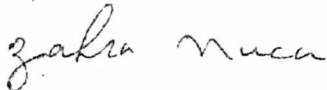
July 15, 2013

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717.787.3483) FOR MORE INFORMATION.

Please study the permit carefully and direct any questions to the Safe Drinking Water program, Southeast Regional Office.

Sincerely,



Zahra Nucci, P.E.  
Regional Manager  
Safe Drinking Water

Enclosures: Permit

cc: Mr. Ellis, P.E. – Pennoni Associates, Inc.  
Mr. Burkett, P.E. – Gilmore & Associates, Inc.  
Mr. Woolston – SDW (w/enclosure)  
Mr. Johnson – SDW (w/enclosure)  
File  
Ms. Lashley  
Re (joh13sdw)191-18

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF SAFE DRINKING WATER

**SAFE DRINKING WATER PERMIT**

No. 1513511

<p>A. PERMITTEE: (Name and Address)</p> <p><b>Valley Township</b> 890 West Lincoln Highway Coatesville, PA 19320</p>	<p>B. PROJECT/PLANT LOCATION</p> <p>Municipality <u>Valley Township</u></p> <p>County <u>Chester</u></p>			
<p>C. THIS PERMIT APPROVES FOR:    1. <input type="checkbox"/> CONSTRUCTION    2. <input checked="" type="checkbox"/> OPERATION OF FACILITIES</p> <p>AS INDICATED BELOW: <span style="float: right;">Approved Under Construction Permit No. _____</span></p> <table style="width:100%; border: none;"> <tr> <td style="width:33%; vertical-align: top; padding: 5px;"> <p><b>Source</b></p> <p><input type="checkbox"/> Well(s)</p> <p><input type="checkbox"/> Spring(s)</p> <p><input type="checkbox"/> Surface Water</p> <p><input checked="" type="checkbox"/> Finished Water</p> </td> <td style="width:33%; vertical-align: top; padding: 5px;"> <p><b>Facilities</b></p> <p><input type="checkbox"/> Impoundment</p> <p><input type="checkbox"/> Settling</p> <p><input type="checkbox"/> Filtration</p> <p><input type="checkbox"/> Iron and Manganese Treatment</p> <p><input type="checkbox"/> Softening</p> <p><input type="checkbox"/> Fluoridation</p> <p><input type="checkbox"/> Distribution Facility</p> </td> <td style="width:33%; vertical-align: top; padding: 5px;"> <p><b>BVRE</b></p> <p><input type="checkbox"/> Bottled Water System</p> <p><input type="checkbox"/> Bulk Water Hauling System</p> <p><input type="checkbox"/> Vended Water System</p> <p><input type="checkbox"/> Retail Water Facility</p> </td> </tr> </table> <p><input type="checkbox"/> General Corrosion Control</p> <p><input type="checkbox"/> Corrosion Control for Lead/Copper</p> <p><input type="checkbox"/> Disinfection</p> <p><input type="checkbox"/> Pump Station(s)</p> <p><input checked="" type="checkbox"/> Transmission Lines</p> <p><input type="checkbox"/> Finished Water Storage</p> <p><input checked="" type="checkbox"/> Other <u>Interconnection</u></p>		<p><b>Source</b></p> <p><input type="checkbox"/> Well(s)</p> <p><input type="checkbox"/> Spring(s)</p> <p><input type="checkbox"/> Surface Water</p> <p><input checked="" type="checkbox"/> Finished Water</p>	<p><b>Facilities</b></p> <p><input type="checkbox"/> Impoundment</p> <p><input type="checkbox"/> Settling</p> <p><input type="checkbox"/> Filtration</p> <p><input type="checkbox"/> Iron and Manganese Treatment</p> <p><input type="checkbox"/> Softening</p> <p><input type="checkbox"/> Fluoridation</p> <p><input type="checkbox"/> Distribution Facility</p>	<p><b>BVRE</b></p> <p><input type="checkbox"/> Bottled Water System</p> <p><input type="checkbox"/> Bulk Water Hauling System</p> <p><input type="checkbox"/> Vended Water System</p> <p><input type="checkbox"/> Retail Water Facility</p>
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<p>KNOWN AS <u>Hillview Interconnection with Pennsylvania American Water Company</u></p>				
<p><b>LIMIT OF AUTHORIZATION</b></p> <p>YOU ARE HEREBY AUTHORIZED TO CONSTRUCT OR OPERATE, AS INDICATED ABOVE, PROVIDED THAT FAILURE TO COMPLY WITH CHAPTER 109 OF THE RULES AND REGULATIONS OF THE DEPARTMENT OF ENVIRONMENTAL PROTECTION (DEPARTMENT) OR THE TERMS OR CONDITIONS OF THIS PERMIT SHALL VOID THE AUTHORITY GIVEN TO THE PERMITTEE BY THE ISSUANCE OF THE PERMIT.</p> <p>THE PLANS, SPECIFICATION, REPORTS, AND SUPPORTING DOCUMENTS SUBMITTED AS PART OF THE PERMIT APPLICATION BECOME PART OF THE PERMIT.</p> <p>NO DEVIATIONS FROM APPROVED PLANS OR SPECIFICATIONS AFFECTING THE TREATMENT PROCESS OR QUALITY OF WATERS SHALL BE MADE WITHOUT WRITTEN APPROVAL FROM THE DEPARTMENT.</p> <p>THIS PERMIT IS ISSUED BY THE DEPARTMENT UNDER THE AUTHORITY OF THE PENNSYLVANIA SAFE DRINKING WATER ACT, THE ACT OF MAY 1, 1984 (P.L. 206, NO. 43). OPERATION SHALL COMPLY WITH THE PROVISIONS OF CHAPTER 109 ADOPTED UNDER THE AUTHORITY IN SECTIONS 4 AND 6(e) OF THE PENNSYLVANIA SAFE DRINKING WATER ACT.</p> <p>THIS PERMIT IS SUBJECT TO THE ATTACHED SPECIAL CONDITIONS <u>I</u></p>				
<p><b>PERMIT ISSUED</b></p> <p>Date <u>JUL 12 2013</u></p>	<p><b>DEPARTMENT OF ENVIRONMENTAL PROTECTION</b></p> <p>By <u>Zahra Nucci</u></p> <p>Zahra Nucci, P.E. Regional Manager Safe Drinking Water</p> <p>Title _____</p>			



**Safe Drinking Water Permit No. 1513511  
Valley Township  
Valley Township, Chester County**

**This permit is subject to the following Special Condition(s):**

- I. The Water Rights Act, Act of June 24, 1939, P.L. 842, 32 P.S. Sections 631-641 requires a public water supply agency to hold a valid subsidiary water allocation permit for purchase of surface waters from another public water supply agency.

Re 30 (joh13sdw)191-18b





*Interim Final*

## FORM 2: TOTAL COLIFORM SAMPLE SITING PLAN FORM

For Community Water Systems Collecting One Coliform Sample Per Month

Date Plan Updated: April 12, 2019

\*Updated coliform sample siting plans should be submitted to the Department within 30 days of making revisions.

### Part 1: General System Information

Water System Name: Hillview		PWSID: 1150225
Mailing Address: Valley Township, 890 West Lincoln Highway, P.O. Box 467, Coatesville, PA 19320		
Contact Person: Carol Lewis, Township Manager		
Phone: (610) 384-5751	Email: manager@valleytownship.org	
Population Served: Approx. 764		
<b>Source Types:</b> (check all that apply)	<input type="checkbox"/> Surface Water <input type="checkbox"/> Groundwater <input type="checkbox"/> Groundwater under direct influence of surface water GUDI	<input type="checkbox"/> Unfiltered Surface Water or GUDI <input checked="" type="checkbox"/> Purchased Surface Water <input type="checkbox"/> Purchased Groundwater <input type="checkbox"/> Purchased GUDI
		Do you provide finished water to any other public water system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Disinfection Treatment Used:</b> (check all that apply)		
<input type="checkbox"/> Chlorine <input type="checkbox"/> Ultraviolet <input type="checkbox"/> Ozone <input checked="" type="checkbox"/> Chloramination <input type="checkbox"/> Chlorine Dioxide		
Was the distribution map or plumbing diagram reviewed in developing sample siting plan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Name(s) of individual(s) or company collecting samples: Suburban Testing Labs		
Responsible Official Name: Carol Lewis, Township Manager		Phone: (610) 384-5751
Responsible Official Signature: <i>Carol R. Lewis</i>		Date: 4-18-19

Do you collect more than one routine sample in any month?     Yes     No

If yes, please use FORM 3: Total Coliform Sample Siting Plan for Public Water Systems Collecting Two or More Samples Per Month (3930-FM-BSDW0526).

**Note:** If you have identified more than 20 routine locations you should use FORM 4: Total Coliform Sample Siting Plan for Public Water Systems Identifying more than 20 Routine Sample Locations (3930-FM-BSDW0527).



# Appendix A-20-a

3930-FM-BSDW0525 Rev. 6/2015  
Form

**Part 2: Sampling Information**

**A. Sample Location Information Table**

Location ID	Site location (address and tap location)	Sample Type <small>(D) = Distribution (C) = Check*</small>	Is site accessibility limited? <small>(if yes, check box and describe in 2B)</small>	Representative Location Code**
711	Hydrant HV-13 at 374 Randall Lane, Coatesville, PA 19320	D & C	<input type="checkbox"/>	6
	374 Randall Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	378 Randall Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
		D & C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		D & C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	

\*\* Representative Location Codes are defined in the instructions

Note: Routine distribution (D) compliance samples must be collected monthly. It is recommended that a system identify more than one sample location and alternate between the locations to ensure representative monitoring of the distribution system.

**B. Description of Limited Accessibility:** For the location IDs identified as having limited accessibility in Table A, describe the limitation and the means for accessing these locations for sampling:

Contact residence owner 24 hours in advance of any check samples:  
 Thomas and Florence McCallum - 374 Randall Lane, Coatesville, PA 19320  
 Michael and Regina Persiano - 378 Randall Lane, Coatesville, PA 19320

**C. Sampling Frequency:** Use the Location ID to specify where the sample will be collected for each month of the year.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
<b>Loc ID:</b>	711	711	711	711	711	711	711	711	711	711	711	711

**D. Sample Interval Description:** Describe below how you plan to ensure that samples are collected at evenly spaced time intervals.

Samples are collected the 4<sup>th</sup> week of the month.





*Interim Final*

**FORM 3: TOTAL COLIFORM SAMPLE SITING PLAN FORM**

For Public Water Systems Collecting Two or More Samples Per Month

Date Plan Updated: April 12, 2019

\*Updated coliform sample siting plans should be submitted to the Department within 30 days of making revisions.

**Part 1: General System Information**

Water System Name: Valley Springs		PWSID: 1150185
Mailing Address: Valley Township, 890 West Lincoln Highway, P.O. Box 467, Coatesville, PA 19320		
Contact Person: Carol Lewis, Township Manager		
Phone: (610) 384-5751		Email: manager@valleymunicipality.org
System Type: <input checked="" type="checkbox"/> CWS <input type="checkbox"/> NTCWS <input type="checkbox"/> TNCWS		
Seasonal System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Season Begin Date:      Season End Date:
Source Types: (check all that apply) <input type="checkbox"/> Surface Water <input type="checkbox"/> Unfiltered Surface Water or GUDI <input checked="" type="checkbox"/> Groundwater <input checked="" type="checkbox"/> Purchased Surface Water <input type="checkbox"/> Groundwater under direct influence of surface water GUDI <input type="checkbox"/> Purchased Groundwater <input type="checkbox"/> Purchased GUDI		Do you provide finished water to any other public water system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Disinfection Treatment Used: (check all that apply) <input checked="" type="checkbox"/> Chlorine <input type="checkbox"/> Ultraviolet <input type="checkbox"/> Ozone <input checked="" type="checkbox"/> Chloramination <input type="checkbox"/> Chlorine Dioxide <input type="checkbox"/> None		
Was the distribution map reviewed in determining sample siting plan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Name(s) of individual(s) or company collecting coliform samples: Suburban Testing Labs		
Responsible Official Name: Carol Lewis, Township Manager		Phone: (610) 384-5751
Responsible Official Signature: <i>Carol R. Lewis</i>		Date: <i>4-18-19</i>

Do you have more than 20 routine distribution sample locations?       Yes       No

If yes, please switch to *Form 4: Total Coliform Sample Siting Plan for Public Water Systems Identifying more than 20 Routine Sample Locations (3930-FM-BSDW0527)*.



# Appendix A-20-a

3900-FM-BSDW0526 Rev. 6/2015  
Form

## Part 2: Sampling Information

### A. Sample Location Information

Location ID	Site location (address and tap location)	Sample Type (D) = Distribution (C) = Check	Is site accessibility limited?* (If yes, check box)	Representative Location Code**
713	Hydrant BH-7 next to 522 Thomas Circle, Coatesville, PA 19320	D & C	<input type="checkbox"/>	2
	522 Thomas Circle, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	516 Thomas Circle, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
714	Hydrant CR-3 at 116 Arianna Lane, Coatesville, PA 19320	D & C	<input type="checkbox"/>	2
	116 Arianna Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	115 Arianna Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
715	Hydrant TC-5 next to 1060 Franklin Street, Coatesville, PA 19320	D & C	<input type="checkbox"/>	6
	75 Country Club Road, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	65 Country Club Road, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
<i>Please see Addendum B (3930-FM-BSDW0530) for blank Sample Location Information tables.</i>				

\* Use "Addendum A" (3930-FM-BSDW0529) for a location with limited accessibility

\*\* Representative Location Codes are defined in the instructions

# Appendix A-20-a

3930-FM-BSDW0526 Rev. 6/2015  
Form

**B. Sample Schedule**

Month	Population Served*	# of Routine Samples per Month	Number of Samples by Location																
			(Insert routine sample location ID# at the top of a column. Then indicate the number of samples to be collected at that location in each month. Refer to the instructions for an example.)																
			713	714	715														
Jan	±3023	3	1	1	1														
Feb	±3023	3	1	1	1														
March	±3023	3	1	1	1														
April	±3023	3	1	1	1														
May	±3023	3	1	1	1														
June	±3023	3	1	1	1														
July	±3023	3	1	1	1														
Aug	±3023	3	1	1	1														
Sept	±3023	3	1	1	1														
Oct	±3023	3	1	1	1														
Nov	±3023	3	1	1	1														
Dec	±3023	3	1	1	1														

\* Include population fluctuations by month if it varies significantly enough to change the required number of samples.

**C. Sample Interval Description:** Describe below how you plan to ensure that samples are collected at regular intervals throughout the month.

Samples are collected the 4<sup>th</sup> week of the month.

# Appendix A-20-a

3930-FM-BSDW0526 Rev. 6/2015  
Form

## Part 3: Groundwater Rule Source Water Monitoring

Do you provide 4-log treatment of viruses for all of your groundwater sources?

Yes    No

If you answered "No" to the above question, you are required to perform source water monitoring under the Groundwater Rule in the event of a total coliform positive routine sample. Complete the table below.

Source Water Monitoring	
Source ID	Description of location of raw water sample tap







*Interim Final*

**FORM 2: TOTAL COLIFORM SAMPLE SITING PLAN FORM**

**For Community Water Systems Collecting One Coliform Sample Per Month**

Date Plan Updated: April 12, 2019

\*Updated coliform sample siting plans should be submitted to the Department within 30 days of making revisions.

**Part 1: General System Information**

Water System Name: Valley Crossing		PWSID: 1150197
Mailing Address: Valley Township, 890 West Lincoln Highway, P.O. Box 467, Coatesville, PA 19320		
Contact Person: Carol Lewis, Township Manager		
Phone: (610) 384-5751	Email: manager@valleytownship.org	
Population Served: 789		
<b>Source Types:</b> (check all that apply)	<input type="checkbox"/> Surface Water <input type="checkbox"/> Groundwater <input type="checkbox"/> Groundwater under direct influence of surface water GUDI	<input type="checkbox"/> Unfiltered Surface Water or GUDI <input checked="" type="checkbox"/> Purchased Surface Water <input type="checkbox"/> Purchased Groundwater <input type="checkbox"/> Purchased GUDI
		<b>Do you provide finished water to any other public water system?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Disinfection Treatment Used:</b> (check all that apply)	<input type="checkbox"/> Chlorine <input type="checkbox"/> Ultraviolet <input type="checkbox"/> Ozone <input checked="" type="checkbox"/> Chloramination <input type="checkbox"/> Chlorine Dioxide	
Was the distribution map or plumbing diagram reviewed in developing sample siting plan?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name(s) of individual(s) or company collecting samples: Suburban Testing Labs		
Responsible Official Name: Carol Lewis, Township Manager		Phone: (610) 384-5751
Responsible Official Signature: <i>Carol R. Lewis</i>		Date: <i>4-18-19</i>

Do you collect more than one routine sample in any month?  Yes  No

If yes, please use *FORM 3: Total Coliform Sample Siting Plan for Public Water Systems Collecting Two or More Samples Per Month* (3930-FM-BSDW0526).

**Note:** If you have identified **more than 20 routine locations** you should use *FORM 4: Total Coliform Sample Siting Plan for Public Water Systems Identifying more than 20 Routine Sample Locations* (3930-FM-BSDW0527).

# Appendix A-20-a

3930-FM-BSDW0525 Rev. 6/2015  
Form

## Part 2: Sampling Information

### A. Sample Location Information Table

Location ID	Site location (address and tap location)	Sample Type <small>(D) = Distribution (C) = Check*</small>	Is site accessibility limited? <small>(if yes, check box and describe in 2B)</small>	Representative Location Code**
712	Hydrant VX2-8 next to 226 Danielle Lane, Coatesville, PA 19320	D & C	<input type="checkbox"/>	6
	233 Danielle Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	226 Danielle Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
		D & C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		D & C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	

\*\* Representative Location Codes are defined in the instructions

Note: Routine distribution (D) compliance samples must be collected monthly. It is recommended that a system identify more than one sample location and alternate between the locations to ensure representative monitoring of the distribution system.

### B. Description of Limited Accessibility:

For the location IDs identified as having limited accessibility in Table A, describe the limitation and the means for accessing these locations for sampling:

Contact residence owner 24 hours in advance of any check samples:  
Howard and Donna Willmott - 233 Danielle Lane, Coatesville, PA 19320  
Maureen Sciandra - 226 Danielle Lane, Coatesville, PA 19320

### C. Sampling Frequency:

Use the Location ID to specify where the sample will be collected for each month of the year.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
<b>Loc ID:</b>	712	712	712	712	712	712	712	712	712	712	712	712

### D. Sample Interval Description:

Describe below how you plan to ensure that samples are collected at evenly spaced time intervals.

Samples are collected the 4<sup>th</sup> week of the month.





**Commonwealth of Pennsylvania**  
**Department of Environmental Protection**  
 Bureau of Environmental Cleanup and Brownfields  
 Division of Storage Tanks  
 Rachel Carson State Office Building  
 P.O. Box 8762  
 Harrisburg, Pennsylvania 17105-8762  
 In Pa: 1-800-42-TANKS  
 Outside Pa: 717-772-5599



**All tank owners shall have the current valid Storage Tank Registration/Permit Certificate available, at the facility where the tank(s) is located, for inspection by the Department, certified storage tank inspector or installer and product distributor. At Retail Sales Facilities, the certificate (or copy) shall be publicly displayed at the facility where the tank(s) is located.**

VERIFY PRESENCE OF WATERMARKED      HOLD TO LIGHT TO VIEW

**Commonwealth of Pennsylvania**  
**Department of Environmental Protection**  
**Bureau of Environmental Cleanup and Brownfields**

**STORAGE TANK REGISTRATION/PERMIT CERTIFICATE**  
**EXPIRATION: FEB-04-2020**

SEQ#	CAPACITY	SUBST	PERMIT TYPE	PERMIT STATUS	AST IN-SVC INSP DUE	AST OUT-OF-SVC INSP DUE	UST OPERATIONS INSP DUE	LINING INSP DUE
001A	500	HZSUB	OPR	Approved	*****	*****	*****	*****
****	*****	****	****	*** **	*****	*****	*****	*****
****	*****	****	****	*** **	*****	*****	*****	*****
****	*****	****	****	*** **	*****	*****	*****	*****
****	*****	****	****	*** **	*****	*****	*****	*****
****	*****	****	****	*** **	*****	*****	*****	*****
****	*****	****	****	*** **	*****	*****	*****	*****
****	*****	****	****	*** **	*****	*****	*****	*****
****	*****	****	****	*** **	*****	*****	*****	*****

Client ID: 81247  
 Owner: VALLEY TWP CHESTER CNTY  
 Id: 15-55391  
 JANIS RAMBO  
 VALLEY TWP  
 890 W LINCOLN HWY  
 COATESVILLE PA 19320-1943

Site ID: 253070  
 Facility Kind: PADMN  
 Facility Id: 15-55391  
 MINERAL SPRINGS WTP  
 118 MINERAL SPRINGS RD  
 COATESVILLE PA 19320

**WARNING:** THIS DOCUMENT IS PRINTED ON SECURITY WATERMARK PAPER AND CONTAINS SECURITY FIBERS. DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATERMARK.

1150125



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES 1150197

Post Office Box 8761  
Harrisburg, PA 17105-8761  
April 3, 1992

Bureau of Water Resources Management

717-541-7800

John E. High, Chairman  
Valley Township Board of Supervisors  
890 West Lincoln Highway  
Coatesville, PA 19320

Re: DER File No. WA 15-917

Dear Mr. High:

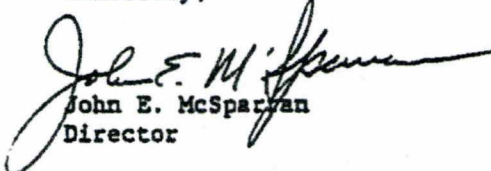
The water allocation application filed by Valley Township has been approved. Water Allocation Permit WA-917 which grants the Township the right to purchase up to a maximum of 250,000 gallons per day, as a 30-day average, from the City of Coatesville Authority in Chester County, is enclosed along with a report prepared on the application. Special attention should be given to the timeframes for completing actions as required by certain conditions of the permit.

Condition 4 of the permit requires that the Township install accurate measuring and recording instruments or devices to determine the amount of water purchased from the City of Coatesville Authority at each interconnection and submit monthly reports of the daily purchases to the Department at the address shown on the enclosed forms that may be used for this purpose.

Condition 5 requires the adoption of a drought contingency plan. For all water purchased from the City of Coatesville Authority, adoption of their drought contingency plan would satisfy this condition. Attention should also be given to Condition 6 which requires the development of a water conservation program. For assistance in the development of a conservation program, you may contact the Water Planning and Conservation Section, at the above address or by telephone at 717-541-7805.

If you have any questions regarding the permit conditions, you may contact Steve Runkle, Chief, Delaware River Basin Section, at the above address or by telephone at 717-541-7805.

Sincerely,

  
John E. McSparran  
Director

Enclosures





COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES

Post Office Box 8761  
Harrisburg, Pennsylvania 17105-8761

Bureau of Water Resources Management

Valley Township  
Chester County

Permit No. WA -917

WATER ALLOCATION PERMIT

The Department of Environmental Resources, established by the Act of December 3, 1970 (71 P.S. 51 et. seq.) and transferring the functions of the Water and Power Resources Board, under and by virtue of the authority vested in and imposed upon it by an Act of the General Assembly of Pennsylvania, entitled "An Act relating to the acquisition of rights to divert water from rivers, streams, natural lakes, ponds, or other surface waters within the Commonwealth or partly within and partly without the Commonwealth" etc., approved the 24th day of June, one thousand nine hundred and thirty-nine, P.L. 842 (Act No. 365) hereby grants leave to Valley Township with its principal offices located in Valley, Pennsylvania, to acquire and use for public water supply purposes, subject to such existing rights and uses as may now be lawful, water rights in the following designated waters of the Commonwealth: the right to purchase up to a maximum of 250,000 gallons per day, as a 30-day average, from the City of Coatesville Authority in Chester County.

This permit is issued in response to an application filed with the Department of Environmental Resources on the 27th day of November, A.D. 1991, and with the understanding that the proposed source of water supply shall be developed as set forth in said application and in accompanying data filed with and made a part thereof, subject, however, to the provisions of the Act of June 24, 1939, P.L. 842 (No. 365), and the following conditions, regulations and restrictions:

1. This permit does not give any property rights, either in real estate or material, nor any exclusive privileges, nor shall it be construed to grant or confer any right, title, easement or interest in, to or over any land belonging to the Commonwealth of Pennsylvania; neither does it authorize any injury to private property nor invasion of private rights, nor any infringement of Federal, State or Local laws or regulations; nor does it obviate the necessity of obtaining Federal assent when necessary;
2. The duration of this permit shall be for the period of the contract between the permittee and the City of Coatesville Authority dated March 6, 1990, but shall in no case exceed 25 years, provided, however, that should the permittee for any reason whatsoever fail to take and use the water or water rights for which this permit is issued within a period of four years, or cease to take and use the water hereby allocated for any period of seven consecutive years, or terminate or fail to renew its purchase agreement with the City of Coatesville Authority, then this permit shall cease and be null and void; unless upon application by the permittee an extension of such period is granted by the Department of Environmental Resources;
3. The permittee shall, within 12 months after the date of this permit, file with the Department of Environmental Resources' State Water Plan Division, proof of the method and extent of its acquisition;



4. The permittee shall install accurate measuring and recording instruments or devices to determine the amount of water purchased from the City of Coatesville Authority at each interconnection. The design and layout of said measuring devices shall be submitted to and be approved by the Department of Environmental Resources' State Water Plan Division before installation. Records of daily flow readings shall be submitted to the State Water Plan Division monthly, and the original field records shall be available at all times for inspection by representatives of the Department. The required measuring devices shall be installed and readings shall begin within one year from the date of this permit, for each existing interconnection;
5. The permittee shall respond to drought conditions as outlined within the City of Coatesville Authority's Drought Contingency Plan. The permittee shall impose water use restrictions upon customers in accordance with and at such time as actions which are required of customers served by the City of Coatesville Authority;
6. The permittee shall adopt and implement a continuous water conservation program for all types of use within the area served by this permit. This program shall include, but is not limited to:
  - a. An ongoing program for installing meters at all existing and new customer connections;
  - b. An ongoing program for regularly testing and repairing or replacing all meters;
  - c. An ongoing leakage/loss control program;
  - d. A water conservation education program;
  - e. A program for reducing customer demand for water by requiring the installation of water-saving plumbing devices in all new accounts or promoting the adoption of water conservation ordinances by Valley Township;

The permittee's water conservation program shall comply with the water conservation policies of the Delaware River Basin Commission and the recommendations of the Department;
7. The permittee shall submit a permit compliance report to the Department of Environmental Resources' State Water Plan Division, on forms provided by the Department, annually, on or before the anniversary date of this permit, unless otherwise specified;
8. The permittee shall not supply any new or additional quantity of water to any public water supply agency until that agency shall have first obtained from the Department of Environmental Resources' State Water Plan Division a subsidiary water allocation permit for the specific withdrawal;
9. This application and permit was reviewed by the Delaware River Basin Commission in accordance with Section 3.8, Referral and Review, of the Delaware River Basin Compact, and was found not to require further approval by the Commission beyond existing Docket D-88-31CP;

10. This permit is subject to review and possible modification of said rights, conditions, or restrictions at a later date or dates, as provided in Section 7 of the Act of June 24, 1939, P.L. 842 (No. 365).

Date: 4/3/92

DEPARTMENT OF ENVIRONMENTAL RESOURCES

By: John E. McSparran  
John E. McSparran, Director  
Bureau of Water Resources Management

ATTEST:

William A. Gast  
William A. Gast, Chief  
State Water Plan Division





COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL RESOURCES  
BUREAU OF COMMUNITY ENVIRONMENTAL CONTROL

PUBLIC WATER SUPPLY PERMIT

NO. 1587508

<p><b>A. PERMITTEE: (Name and Address)</b></p> <p>Valley Township Authority 858 Reeceville Road Coatesville, PA 19320</p>	<p><b>B. PROJECT LOCATION</b></p> <p>Municipality <u>Valley Township</u> County <u>Chester</u></p>			
<p><b>C. THIS PERMIT APPROVES FOR:</b> 1. <input checked="" type="checkbox"/> Use as Source of Supply 2. <input type="checkbox"/> Construction 3. <input checked="" type="checkbox"/> Operation</p> <p><b>AS INDICATED BELOW:</b></p> <table style="width:100%; border: none;"> <tr> <td style="width:33%; vertical-align: top;"> <p><u>4X Source</u></p> <p><input type="checkbox"/> Well(s) <input type="checkbox"/> Spring(s) <input type="checkbox"/> Stream <input type="checkbox"/> Lake</p> </td> <td style="width:33%; vertical-align: top;"> <p><u>5. Facilities</u></p> <p><input type="checkbox"/> Impoundment <input checked="" type="checkbox"/> Settling <input checked="" type="checkbox"/> Filtration <input type="checkbox"/> Iron and Manganese Treatment <input type="checkbox"/> Softening <input type="checkbox"/> Fluoridation <input type="checkbox"/> Other _____</p> </td> <td style="width:33%; vertical-align: top;"> <p><input checked="" type="checkbox"/> Stabilization <input checked="" type="checkbox"/> Disinfection <input checked="" type="checkbox"/> Pump Station(s) <input checked="" type="checkbox"/> Transmission Lines <input type="checkbox"/> Distribution Storage <input checked="" type="checkbox"/> Distribution System</p> </td> </tr> </table> <p>KNOWN AS <u>Valley Springs Water Company - Wells V-1 and V-2</u></p>		<p><u>4X Source</u></p> <p><input type="checkbox"/> Well(s) <input type="checkbox"/> Spring(s) <input type="checkbox"/> Stream <input type="checkbox"/> Lake</p>	<p><u>5. Facilities</u></p> <p><input type="checkbox"/> Impoundment <input checked="" type="checkbox"/> Settling <input checked="" type="checkbox"/> Filtration <input type="checkbox"/> Iron and Manganese Treatment <input type="checkbox"/> Softening <input type="checkbox"/> Fluoridation <input type="checkbox"/> Other _____</p>	<p><input checked="" type="checkbox"/> Stabilization <input checked="" type="checkbox"/> Disinfection <input checked="" type="checkbox"/> Pump Station(s) <input checked="" type="checkbox"/> Transmission Lines <input type="checkbox"/> Distribution Storage <input checked="" type="checkbox"/> Distribution System</p>
<p><u>4X Source</u></p> <p><input type="checkbox"/> Well(s) <input type="checkbox"/> Spring(s) <input type="checkbox"/> Stream <input type="checkbox"/> Lake</p>	<p><u>5. Facilities</u></p> <p><input type="checkbox"/> Impoundment <input checked="" type="checkbox"/> Settling <input checked="" type="checkbox"/> Filtration <input type="checkbox"/> Iron and Manganese Treatment <input type="checkbox"/> Softening <input type="checkbox"/> Fluoridation <input type="checkbox"/> Other _____</p>	<p><input checked="" type="checkbox"/> Stabilization <input checked="" type="checkbox"/> Disinfection <input checked="" type="checkbox"/> Pump Station(s) <input checked="" type="checkbox"/> Transmission Lines <input type="checkbox"/> Distribution Storage <input checked="" type="checkbox"/> Distribution System</p>		
<p><del>This Permit is also subject to the Standard Conditions Relating to Erosion Control (1973).</del></p> <p>Your application, its supporting documents and amendments are hereby made a part of this permit.</p> <p>YOU ARE HEREBY AUTHORIZED TO USE AS SOURCE(S) OF SUPPLY, CONSTRUCT OR OPERATE, AS INDICATED ABOVE, PROVIDED THAT FAILURE TO COMPLY WITH CHAPTER 109, ARTICLE II, OF THE RULES AND REGULATIONS OF THE DEPARTMENT OF ENVIRONMENTAL RESOURCES OR THE TERMS OR CONDITIONS OF THIS PERMIT SHALL VOID THE AUTHORITY GIVEN TO THE PERMITTEE BY THE ISSUANCE OF THE PERMIT.</p> <p>NO DEVIATIONS FROM APPROVED PLANS OR SPECIFICATIONS AFFECTING THE TREATMENT PROCESS OR QUALITY OF WATERS SHALL BE MADE WITHOUT WRITTEN APPROVAL FROM THE DEPARTMENT.</p> <p>THIS PERMIT IS ISSUED BY THE DEPARTMENT OF ENVIRONMENTAL RESOURCES UNDER THE AUTHORITY OF THE PENNSYLVANIA SAFE DRINKING WATER ACT, THE ACT OF MAY 1, 1984 (P.L. 206, NO. 43). OPERATION SHALL COMPLY WITH THE PROVISIONS OF CHAPTER 109 ADOPTED UNDER THE AUTHORITY IN SECTIONS 4 AND 6(e) OF THE PENNSYLVANIA SAFE DRINKING WATER ACT.</p> <p>THIS PERMIT IS SUBJECT TO THE ATTACHED SPECIAL CONDITIONS _____</p> <p>THIS PERMIT IS SUBJECT TO THE FOLLOWING STANDARD CONDITIONS RELATING TO EROSION CONTROL _____</p>				
<p>PERMIT ISSUED <u>JAN 21 1988</u></p> <p>Date _____</p>	<p>DEPARTMENT OF ENVIRONMENTAL RESOURCES</p> <p>By <u><i>Lewis Luchne, Jr.</i></u> LEWIS LUCHNE, JR. Regional Sanitarian Manager</p> <p>Title _____</p>			





PUBLIC WATER SUPPLY PERMIT

NO. 1588503

<p><b>A. PERMITTEE: (Name and Address)</b>          Valley Township Authority          858 Reeceville Road          Coatesville, PA 19320</p>	<p><b>B. PROJECT LOCATION</b>          Municipality <u>Valley Township</u>          County <u>Chester</u></p>			
<p><b>C. THIS PERMIT APPROVES FOR:</b> 1. <input type="checkbox"/> Use as Source of Supply 2. <input checked="" type="checkbox"/> Construction 3. <input checked="" type="checkbox"/> Operation</p> <p>AS INDICATED BELOW:</p> <table style="width:100%;"> <tr> <td style="width:33%; vertical-align: top;"> <p><b>4. Source</b></p> <input checked="" type="checkbox"/> Well(s)  <input type="checkbox"/> Spring(s)  <input type="checkbox"/> Stream  <input type="checkbox"/> Lake </td> <td style="width:33%; vertical-align: top;"> <p><b>5. Facilities</b></p> <input type="checkbox"/> Impoundment  <input type="checkbox"/> Settling  <input type="checkbox"/> Filtration  <input checked="" type="checkbox"/> Iron and Manganese Treatment  <input type="checkbox"/> Softening  <input type="checkbox"/> Fluoridation  <input type="checkbox"/> Other _____ </td> <td style="width:33%; vertical-align: top;"> <input type="checkbox"/> Stabilization  <input checked="" type="checkbox"/> Disinfection  <input checked="" type="checkbox"/> Pump Station(s)  <input checked="" type="checkbox"/> Transmission Lines  <input checked="" type="checkbox"/> Distribution Storage  <input checked="" type="checkbox"/> Distribution System</td> </tr> </table> <p>KNOWN AS <u>Well No. V4</u></p>		<p><b>4. Source</b></p> <input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Spring(s) <input type="checkbox"/> Stream <input type="checkbox"/> Lake	<p><b>5. Facilities</b></p> <input type="checkbox"/> Impoundment <input type="checkbox"/> Settling <input type="checkbox"/> Filtration <input checked="" type="checkbox"/> Iron and Manganese Treatment <input type="checkbox"/> Softening <input type="checkbox"/> Fluoridation <input type="checkbox"/> Other _____	<input type="checkbox"/> Stabilization <input checked="" type="checkbox"/> Disinfection <input checked="" type="checkbox"/> Pump Station(s) <input checked="" type="checkbox"/> Transmission Lines <input checked="" type="checkbox"/> Distribution Storage <input checked="" type="checkbox"/> Distribution System
<p><b>4. Source</b></p> <input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Spring(s) <input type="checkbox"/> Stream <input type="checkbox"/> Lake	<p><b>5. Facilities</b></p> <input type="checkbox"/> Impoundment <input type="checkbox"/> Settling <input type="checkbox"/> Filtration <input checked="" type="checkbox"/> Iron and Manganese Treatment <input type="checkbox"/> Softening <input type="checkbox"/> Fluoridation <input type="checkbox"/> Other _____	<input type="checkbox"/> Stabilization <input checked="" type="checkbox"/> Disinfection <input checked="" type="checkbox"/> Pump Station(s) <input checked="" type="checkbox"/> Transmission Lines <input checked="" type="checkbox"/> Distribution Storage <input checked="" type="checkbox"/> Distribution System		
<p>This Permit is also subject to the Standard Conditions Relating to Erosion Control (1973).          Your application, its supporting documents and amendments are hereby made a part of this permit.</p> <p>YOU ARE HEREBY AUTHORIZED TO USE AS SOURCE(S) OF SUPPLY, CONSTRUCT OR OPERATE, AS INDICATED ABOVE, PROVIDED THAT FAILURE TO COMPLY WITH CHAPTER 109, ARTICLE II, OF THE RULES AND REGULATIONS OF THE DEPARTMENT OF ENVIRONMENTAL RESOURCES OR THE TERMS OR CONDITIONS OF THIS PERMIT SHALL VOID THE AUTHORITY GIVEN TO THE PERMITTEE BY THE ISSUANCE OF THE PERMIT.</p> <p>NO DEVIATIONS FROM APPROVED PLANS OR SPECIFICATIONS AFFECTING THE TREATMENT PROCESS OR QUALITY OF WATERS SHALL BE MADE WITHOUT WRITTEN APPROVAL FROM THE DEPARTMENT.</p> <p>THIS PERMIT IS ISSUED BY THE DEPARTMENT OF ENVIRONMENTAL RESOURCES UNDER THE AUTHORITY OF THE PENNSYLVANIA SAFE DRINKING WATER ACT, THE ACT OF MAY 1, 1984 (P.L. 206, NO. 43). OPERATION SHALL COMPLY WITH THE PROVISIONS OF CHAPTER 109 ADOPTED UNDER THE AUTHORITY IN SECTIONS 4 AND 6(e) OF THE PENNSYLVANIA SAFE DRINKING WATER ACT.</p> <p>THIS PERMIT IS SUBJECT TO THE ATTACHED SPECIAL CONDITIONS _____</p> <p>THIS PERMIT IS SUBJECT TO THE FOLLOWING STANDARD CONDITIONS RELATING TO EROSION CONTROL _____</p>				
<p>PERMIT ISSUED</p> <p>Date <u>4-3-89</u></p>	<p>DEPARTMENT OF ENVIRONMENTAL RESOURCES</p> <p>By <u>Lewis Luchie, Jr.</u></p> <p>LEWIS LUCHIE, JR.          Regional Sanitarian Manager</p> <p>Title _____</p>			







# pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

SOUTHEAST REGIONAL OFFICE

March 18, 2011

Ms. Karen Chandler  
Valley Township  
890 West Lincoln Highway  
Coatesville, PA 19320

Re: Water Supply Permit No. 1511512  
GWR Certification

Dear Ms. Chandler:

The Department of Environmental Protection (Department) agrees that at least 4-log treatment of viruses is achieved at Valley Springs Entry Point 101, provided the parameters outlined in the table below are maintained:

PWS ID No.	Source Name	Source ID	Entry Point ID	Minimum Chlorine Residual (mg/L)	Minimum Temperature (°C)	Maximum Flow Rate (gpm)
1150185	Well V1	001	101	0.40	5.0	150
	Well V2	002				
	Well V4	004				

Referenced permit certifying 4-log treatment of viruses is enclosed. This certification is contingent on conducting compliance monitoring, which you should begin by April 1, 2011. Your submission indicated that a continuous free chlorine analyzer will be installed at your treatment facility; however, due to the size of the population served by the Valley Springs system, you may conduct compliance monitoring via daily grab sampling until the analyzer is installed and online. Below are instructions for both monitoring types.

The compliance monitoring requirements for a public water system conducting grab sampling as described in Title 25 Pa. Code Section 109.1305 of the Department's regulations include:

- Collect a daily grab sample at the entry point or other location approved by the Department during the hour of peak flow indicated on the *CWS Demonstration of 4-Log Treatment of Viruses for Groundwater Sources* or at any other time specified by the Department.
- Maintain the Department approved minimum free chlorine residual every day the public water system serves water from the groundwater source to the public.

Ms. Karen Chandler

- 2 -

March 18, 2011

- If any daily grab sample measurement falls below the Department approved minimum free chlorine residual the system, collect follow up samples at least every four hours until the residual is restored to the Department approved minimum level.

The compliance monitoring requirements for public water systems conducting continuous monitoring as described in Title 25 Pa. Code Section 109.1305 of the Department's regulations include:

- Continuously monitor the free chlorine residual at the entry point or other location approved by the Department, and record the results at least every 15 minutes each day that water from the groundwater source is served to the public.
- Maintain the Department approved minimum free chlorine residual every day the public water system serves water from the groundwater source to the public.
- Conduct grab sampling every four hours until the continuous monitoring equipment is returned to service if there is a failure in the continuous monitoring equipment. The system shall resume continuous residual disinfectant monitoring within 14 days.

The reporting requirements associated with compliance monitoring include:

- Report the date, time, and lowest value each day the free chlorine residual remains equal to or greater than the Department required minimum value.
- Report the initial date, time, and value for each occurrence that the free chlorine residual is less than the Department required minimum, and the subsequent date, time, and value that the free chlorine residual is equal to or greater than the required minimum.
- Report each date the entry point is not in operation.

These reporting requirements can be satisfied by completing an SDWA-1 form on-line and submitting it to the Department within the first 10 days following the end of each monthly monitoring period via DWELR.

Ms. Karen Chandler

- 3 -

March 18, 2011

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717.787.3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800.654.5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board, at 717.787.3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717.787.3483) FOR MORE INFORMATION.

Please study the permit carefully and direct any questions to the Water Supply Management Program, Southeast Regional Office.

Sincerely,



Nancy R. Roncetti  
Regional Manager  
Water Supply Management

Enclosures: Permit

cc: Mr. Ellis – Pennoni Associates, Inc.  
Mr. Robinson – Pennoni Associates, Inc.  
Mr. Corey – WSM (w/enclosure)  
Mr. Johnson – WSM (w/enclosure)  
Re – WSM  
Ms. Lashley  
30 (GJS11WSM)74-6

RECEIVED  
MAR 21 2011  
PENNONI ASSOCIATES INC









# pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

SOUTHEAST REGIONAL OFFICE

April 1, 2013

Ms. Patrice Proctor, Chairwoman  
Valley Township  
890 West Lincoln Highway  
P.O. Box 467  
Coatesville, PA 19320

Re: Valley Springs Water System  
Application No. 1513502  
APS No. 801629, AUTH No. 960006  
Valley Township  
Chester County

Dear Ms. Proctor:

Referenced permit for operating the existing Airport Road Interconnection with the Pennsylvania American Water Company (PAWC) is enclosed.

In accordance with the Department of Environmental Protection (Department) issuing an operations permit for the above-referenced interconnection, Valley Township is required to submit a subsidiary water allocation permit renewal application, under the Water Rights Act, Act of June 24, 1939, P.L. 842, 32 P.S. Sections 631-641, for all existing interconnections with the PAWC (Airport Road, Hillview, Mt Pleasant Street, and Red Road).

Valley Township's Subsidiary Water Allocation Permit No. WA-15-917, granting the right to purchase water from the City of Coatesville Authority (water system now owned and operated by the PAWC), expired on April 3, 2007.

Please submit the required permit application to the Department by June 30, 2013. The appropriate permit forms and instructions are available on the Department's website address located in the footer below (select "Water Allocation" from the "DEP Programs A-Z" menu).

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717.787.3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800.654.5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The

Ms. Patrice Proctor, Chairwoman

- 2 -

April 1, 2013

appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board at 717.787.3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717.787.3483) FOR MORE INFORMATION.

Please study the permit carefully and direct any questions to the Safe Drinking Water program, Southeast Regional Office.

Sincerely,



Zahra Nucci, P.E.  
Regional Manager  
Safe Drinking Water

Enclosures: Permit

cc: Mr. Ellis, P.E. -- Pennoni Associates, Inc.  
Mr. Woolston -- SDW (w/enclosure)  
Mr. Johnson -- SDW (w/enclosure)  
File  
Ms. Lashley  
Re (GJS13SDW)80-8

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
SAFE DRINKING WATER

**SAFE DRINKING WATER PERMIT**

No. 1513502

<p>A. PERMITTEE: (Name and Address)</p> <p style="text-align: center;"><b>Valley Township</b> 890 West Lincoln Highway Coatesville, PA 19320</p>	<p>B. PROJECT/PLANT LOCATION</p> <p>Municipality <u>Valley Township</u></p> <p>County <u>Chester</u></p>						
<p>C. THIS PERMIT APPROVES FOR:    1. <input type="checkbox"/> CONSTRUCTION    2. <input checked="" type="checkbox"/> OPERATION OF FACILITIES</p> <p>AS INDICATED BELOW: <span style="float: right;">Approved Under Construction Permit No. _____</span></p>							
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<p>KNOWN AS <u>Airport Road Interconnection with Pennsylvania American Water Company</u></p>							
<p><b>LIMIT OF AUTHORIZATION</b></p> <p>YOU ARE HEREBY AUTHORIZED TO CONSTRUCT OR OPERATE, AS INDICATED ABOVE, PROVIDED THAT FAILURE TO COMPLY WITH CHAPTER 109 OF THE RULES AND REGULATIONS OF THE DEPARTMENT OF ENVIRONMENTAL PROTECTION (DEPARTMENT) OR THE TERMS OR CONDITIONS OF THIS PERMIT SHALL VOID THE AUTHORITY GIVEN TO THE PERMITTEE BY THE ISSUANCE OF THE PERMIT.</p> <p>THE PLANS, SPECIFICATION, REPORTS, AND SUPPORTING DOCUMENTS SUBMITTED AS PART OF THE PERMIT APPLICATION BECOME PART OF THE PERMIT.</p> <p>NO DEVIATIONS FROM APPROVED PLANS OR SPECIFICATIONS AFFECTING THE TREATMENT PROCESS OR QUALITY OF WATERS SHALL BE MADE WITHOUT WRITTEN APPROVAL FROM THE DEPARTMENT.</p> <p>THIS PERMIT IS ISSUED BY THE DEPARTMENT UNDER THE AUTHORITY OF THE PENNSYLVANIA SAFE DRINKING WATER ACT, THE ACT OF MAY 1, 1984 (P.L. 206, NO. 43). OPERATION SHALL COMPLY WITH THE PROVISIONS OF CHAPTER 109 ADOPTED UNDER THE AUTHORITY IN SECTIONS 4 AND 6(e) OF THE PENNSYLVANIA SAFE DRINKING WATER ACT.</p> <p>THIS PERMIT IS SUBJECT TO THE ATTACHED SPECIAL CONDITIONS <u>I</u></p>							
<p><b>PERMIT ISSUED</b></p> <p>Date <u>MAR 29 2013</u></p>	<p><b>DEPARTMENT OF ENVIRONMENTAL PROTECTION</b></p> <p>By <u>Zahra Nucci</u></p> <p><b>Zahra Nucci, P.E.</b> Regional Manager Safe Drinking Water</p> <p>Title _____</p>						



**Safe Drinking Water Permit No. 1513502  
Valley Township  
Valley Township, Chester County**

**This permit is subject to the following Special Condition(s):**

- I. The Water Rights Act, Act of June 24, 1939, P.L. 842, 32 P.S. Sections 631-641 requires a public water supply agency to hold a valid subsidiary water allocation permit for purchase of surface waters from another public water supply agency.

Re 30 (GJS13SDW)80-8a





# pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

SOUTHEAST REGIONAL OFFICE

July 15, 2013

Ms. Patrice Proctor, Chairwoman  
Valley Township  
890 West Lincoln Highway  
P.O. Box 467  
Coatesville, PA 19320

Re: Villages of Hillview Water System  
Application No. 1513511  
APS No. 806187, AUTH No. 967043  
Valley Township  
Chester County

Dear Ms. Proctor:

Referenced permit for operating the existing Hillview Interconnection with the Pennsylvania American Water Company (PAWC) is enclosed.

As a reminder, in accordance with the Department of Environmental Protection recently issuing an operations permit for the Airport Road Interconnection (Application No. 1513502), Valley Township is required to submit a subsidiary water allocation permit renewal application, under the Water Rights Act, Act of June 24, 1939, P.L. 842, 32 P.S. Sections 631-641, for all existing interconnections with the PAWC (Airport Road, Hillview, Mt. Pleasant Street, and Red Road).

Valley Township's Subsidiary Water Allocation Permit No. WA-15-917, granting the right to purchase water from the City of Coatesville Authority (water system now owned and operated by the PAWC), expired on April 3, 2007.

Any person aggrieved by this action may appeal, pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. Section 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A, to the Environmental Hearing Board, Second Floor, Rachel Carson State Office Building, 400 Market Street, P.O. Box 8457, Harrisburg, PA 17105-8457, 717.787.3483. TDD users may contact the Board through the Pennsylvania Relay Service, 800.654.5984. Appeals must be filed with the Environmental Hearing Board within 30 days of receipt of written notice of this action unless the appropriate statute provides a different time period. Copies of the appeal form and the Board's rules of practice and procedure may be obtained from the Board. The appeal form and the Board's rules of practice and procedure are also available in braille or on audiotape from the Secretary to the Board at 717.787.3483. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.



Ms. Patrice Proctor, Chairwoman

- 2 -

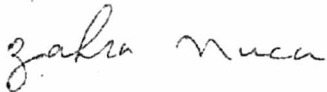
July 15, 2013

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST REACH THE BOARD WITHIN 30 DAYS. YOU DO NOT NEED A LAWYER TO FILE AN APPEAL WITH THE BOARD.

IMPORTANT LEGAL RIGHTS ARE AT STAKE, HOWEVER, SO YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD (717.787.3483) FOR MORE INFORMATION.

Please study the permit carefully and direct any questions to the Safe Drinking Water program, Southeast Regional Office.

Sincerely,



Zahra Nucci, P.E.  
Regional Manager  
Safe Drinking Water

Enclosures: Permit

cc: Mr. Ellis, P.E. – Pennoni Associates, Inc.  
Mr. Burkett, P.E. – Gilmore & Associates, Inc.  
Mr. Woolston – SDW (w/enclosure)  
Mr. Johnson – SDW (w/enclosure)  
File  
Ms. Lashley  
Re (joh13sdw)191-18

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF SAFE DRINKING WATER

**SAFE DRINKING WATER PERMIT**

No. 1513511

<p>A. PERMITTEE: (Name and Address)</p> <p><b>Valley Township</b> 890 West Lincoln Highway Coatesville, PA 19320</p>	<p>B. PROJECT/PLANT LOCATION</p> <p>Municipality <u>Valley Township</u></p> <p>County <u>Chester</u></p>						
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<p><b>PERMIT ISSUED</b></p> <p>Date <u>JUL 12 2013</u></p>	<p><b>DEPARTMENT OF ENVIRONMENTAL PROTECTION</b></p> <p>By <u>Zahra Nucci</u></p> <p><b>Zahra Nucci, P.E.</b> <b>Regional Manager</b> Safe Drinking Water</p> <p>Title _____</p>						

**Safe Drinking Water Permit No. 1513511  
Valley Township  
Valley Township, Chester County**

**This permit is subject to the following Special Condition(s):**

- I. The Water Rights Act, Act of June 24, 1939, P.L. 842, 32 P.S. Sections 631-641 requires a public water supply agency to hold a valid subsidiary water allocation permit for purchase of surface waters from another public water supply agency.

Re 30 (joh13sdw)191-18b







COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF SAFE DRINKING WATER

*Interim Final*

## FORM 2: TOTAL COLIFORM SAMPLE SITING PLAN FORM

For Community Water Systems Collecting One Coliform Sample Per Month

Date Plan Updated: April 12, 2019

\*Updated coliform sample siting plans should be submitted to the Department within 30 days of making revisions.

### Part 1: General System Information

Water System Name: Hillview		PWSID: 1150225
Mailing Address: Valley Township, 890 West Lincoln Highway, P.O. Box 467, Coatesville, PA 19320		
Contact Person: Carol Lewis, Township Manager		
Phone: (610) 384-5751	Email: manager@valleytownship.org	
Population Served: Approx. 764		
<b>Source Types:</b> (check all that apply)	<input type="checkbox"/> Surface Water <input type="checkbox"/> Groundwater <input type="checkbox"/> Groundwater under direct influence of surface water GUDI	<input type="checkbox"/> Unfiltered Surface Water or GUDI <input checked="" type="checkbox"/> Purchased Surface Water <input type="checkbox"/> Purchased Groundwater <input type="checkbox"/> Purchased GUDI
		<b>Do you provide finished water to any other public water system?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Disinfection Treatment Used:</b> (check all that apply)		
<input type="checkbox"/> Chlorine <input type="checkbox"/> Ultraviolet <input type="checkbox"/> Ozone <input checked="" type="checkbox"/> Chloramination <input type="checkbox"/> Chlorine Dioxide		
Was the distribution map or plumbing diagram reviewed in developing sample siting plan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Name(s) of individual(s) or company collecting samples: Suburban Testing Labs		
Responsible Official Name: Carol Lewis, Township Manager		Phone: (610) 384-5751
Responsible Official Signature: <i>Carol R. Lewis</i>		Date: 4-18-19

Do you collect more than one routine sample in any month?     Yes     No

If yes, please use FORM 3: Total Coliform Sample Siting Plan for Public Water Systems Collecting Two or More Samples Per Month (3930-FM-BSDW0526).

**Note:** If you have identified more than 20 routine locations you should use FORM 4: Total Coliform Sample Siting Plan for Public Water Systems Identifying more than 20 Routine Sample Locations (3930-FM-BSDW0527).

# Appendix A-20-a

3930-FM-BSDW0525 Rev. 6/2015  
Form

## Part 2: Sampling Information

### A. Sample Location Information Table

Location ID	Site location (address and tap location)	Sample Type (D) = Distribution (C) = Check*	Is site accessibility limited? (if yes, check box and describe in 2B)	Representative Location Code**
711	Hydrant HV-13 at 374 Randall Lane, Coatesville, PA 19320	D & C	<input type="checkbox"/>	6
	374 Randall Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	378 Randall Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
		D & C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		D & C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	

\*\* Representative Location Codes are defined in the instructions

Note: Routine distribution (D) compliance samples must be collected monthly. It is recommended that a system identify more than one sample location and alternate between the locations to ensure representative monitoring of the distribution system.

**B. Description of Limited Accessibility:** For the location IDs identified as having limited accessibility in Table A, describe the limitation and the means for accessing these locations for sampling:

Contact residence owner 24 hours in advance of any check samples:  
 Thomas and Florence McCallum - 374 Randall Lane, Coatesville, PA 19320  
 Michael and Regina Persiano - 378 Randall Lane, Coatesville, PA 19320

**C. Sampling Frequency:** Use the Location ID to specify where the sample will be collected for each month of the year.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
<b>Loc ID:</b>	711	711	711	711	711	711	711	711	711	711	711	711

**D. Sample Interval Description:** Describe below how you plan to ensure that samples are collected at evenly spaced time intervals.

Samples are collected the 4<sup>th</sup> week of the month.





3930-FM-BSDW0526 Rev. 6/2015  
Form



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF SAFE DRINKING WATER

*Interim Final*

**FORM 3: TOTAL COLIFORM SAMPLE SITING PLAN FORM**

**For Public Water Systems Collecting Two or More Samples Per Month**

Date Plan Updated: April 12, 2019

\*Updated coliform sample siting plans should be submitted to the Department within 30 days of making revisions.

**Part 1: General System Information**

Water System Name: Valley Springs		PWSID: 1150185
Mailing Address: Valley Township, 890 West Lincoln Highway, P.O. Box 467, Coatesville, PA 19320		
Contact Person: Carol Lewis, Township Manager		
Phone: (610) 384-5751		Email: manager@valleytownship.org
System Type: <input checked="" type="checkbox"/> CWS <input type="checkbox"/> NTNCWS <input type="checkbox"/> TNCWS		
Seasonal System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Season Begin Date:      Season End Date:
Source Types: (check all that apply) <input type="checkbox"/> Surface Water <input type="checkbox"/> Unfiltered Surface Water or GUDI <input checked="" type="checkbox"/> Groundwater <input checked="" type="checkbox"/> Purchased Surface Water <input type="checkbox"/> Groundwater under direct influence of surface water <input type="checkbox"/> Purchased Groundwater <input type="checkbox"/> GUDI <input type="checkbox"/> Purchased GUDI		Do you provide finished water to any other public water system? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Disinfection Treatment Used: (check all that apply) <input checked="" type="checkbox"/> Chlorine <input type="checkbox"/> Ultraviolet <input type="checkbox"/> Ozone <input checked="" type="checkbox"/> Chloramination <input type="checkbox"/> Chlorine Dioxide <input type="checkbox"/> None		
Was the distribution map reviewed in determining sample siting plan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Name(s) of individual(s) or company collecting coliform samples: Suburban Testing Labs		
Responsible Official Name: Carol Lewis, Township Manager		Phone: (610) 384-5751
Responsible Official Signature: <i>Carol R. Lewis</i>		Date: <i>4-18-19</i>

Do you have more than 20 routine distribution sample locations?       Yes       No

If yes, please switch to **Form 4: Total Coliform Sample Siting Plan for Public Water Systems Identifying more than 20 Routine Sample Locations** (3930-FM-BSDW0527).

# Appendix A-20-a

3900-FM-BSDW0526 Rev. 6/2015  
Form

## Part 2: Sampling Information

### A. Sample Location Information

Location ID	Site location (address and tap location)	Sample Type <small>(D) = Distribution (C) = Check</small>	Is site accessibility limited?* <small>(If yes, check box)</small>	Representative Location Code**
713	Hydrant BH-7 next to 522 Thomas Circle, Coatesville, PA 19320	D & C	<input type="checkbox"/>	2
	522 Thomas Circle, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	516 Thomas Circle, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
714	Hydrant CR-3 at 116 Arianna Lane, Coatesville, PA 19320	D & C	<input type="checkbox"/>	2
	116 Arianna Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	115 Arianna Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
715	Hydrant TC-5 next to 1060 Franklin Street, Coatesville, PA 19320	D & C	<input type="checkbox"/>	6
	75 Country Club Road, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	65 Country Club Road, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
<i>Please see Addendum B (3930-FM-BSDW0530) for blank Sample Location Information tables.</i>				

\* Use "Addendum A" (3930-FM-BSDW0529) for a location with limited accessibility

\*\* Representative Location Codes are defined in the instructions



# Appendix A-20-a

3930-FM-BSDW0526 Rev. 6/2015  
Form

## B. Sample Schedule

Month	Population Served*	# of Routine Samples per Month	Number of Samples by Location																
			(Insert routine sample location ID# at the top of a column. Then indicate the number of samples to be collected at that location in each month. Refer to the instructions for an example.)																
			713	714	715														
Jan	±3023	3	1	1	1														
Feb	±3023	3	1	1	1														
March	±3023	3	1	1	1														
April	±3023	3	1	1	1														
May	±3023	3	1	1	1														
June	±3023	3	1	1	1														
July	±3023	3	1	1	1														
Aug	±3023	3	1	1	1														
Sept	±3023	3	1	1	1														
Oct	±3023	3	1	1	1														
Nov	±3023	3	1	1	1														
Dec	±3023	3	1	1	1														

\* Include population fluctuations by month if it varies significantly enough to change the required number of samples.

## C. Sample Interval Description: Describe below how you plan to ensure that samples are collected at regular intervals throughout the month.

Samples are collected the 4<sup>th</sup> week of the month.

# Appendix A-20-a

3930-FM-BSDW0526 Rev. 6/2015  
Form

## Part 3: Groundwater Rule Source Water Monitoring

Do you provide 4-log treatment of viruses for all of your groundwater sources?

Yes    No

If you answered "No" to the above question, you are required to perform source water monitoring under the Groundwater Rule in the event of a total coliform positive routine sample. Complete the table below.

Source Water Monitoring	
Source ID	Description of location of raw water sample tap





# Appendix A-20-a



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF SAFE DRINKING WATER

*Interim Final*

## FORM 2: TOTAL COLIFORM SAMPLE SITING PLAN FORM

For Community Water Systems Collecting One Coliform Sample Per Month

Date Plan Updated: April 12, 2019

\*Updated coliform sample siting plans should be submitted to the Department within 30 days of making revisions.

### Part 1: General System Information

Water System Name: Valley Crossing		PWSID: 1150197
Mailing Address: Valley Township, 890 West Lincoln Highway, P.O. Box 467, Coatesville, PA 19320		
Contact Person: Carol Lewis, Township Manager		
Phone: (610) 384-5751	Email: manager@valleytownship.org	
Population Served: 789		
<b>Source Types:</b> (check all that apply)	<input type="checkbox"/> Surface Water <input type="checkbox"/> Groundwater <input type="checkbox"/> Groundwater under direct influence of surface water GUDI <input type="checkbox"/> Unfiltered Surface Water or GUDI <input checked="" type="checkbox"/> Purchased Surface Water <input type="checkbox"/> Purchased Groundwater <input type="checkbox"/> Purchased GUDI	<b>Do you provide finished water to any other public water system?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Disinfection Treatment Used:</b> (check all that apply)	<input type="checkbox"/> Chlorine <input type="checkbox"/> Ultraviolet <input type="checkbox"/> Ozone <input checked="" type="checkbox"/> Chloramination <input type="checkbox"/> Chlorine Dioxide	
Was the distribution map or plumbing diagram reviewed in developing sample siting plan?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Name(s) of individual(s) or company collecting samples: Suburban Testing Labs		
Responsible Official Name: Carol Lewis, Township Manager		Phone: (610) 384-5751
Responsible Official Signature: <i>Carol R. Lewis</i>		Date: <i>4-18-19</i>

Do you collect more than one routine sample in any month?  Yes  No

If yes, please use FORM 3: Total Coliform Sample Siting Plan for Public Water Systems Collecting Two or More Samples Per Month (3930-FM-BSDW0526).

Note: If you have identified more than 20 routine locations you should use FORM 4: Total Coliform Sample Siting Plan for Public Water Systems Identifying more than 20 Routine Sample Locations (3930-FM-BSDW0527).

# Appendix A-20-a

3930-FM-BSDW0525 Rev. 6/2015  
Form

**Part 2: Sampling Information**

**A. Sample Location Information Table**

Location ID	Site location (address and tap location)	Sample Type <small>(D) = Distribution (C) = Check*</small>	Is site accessibility limited? <small>(if yes, check box and describe in 2B)</small>	Representative Location Code**
712	Hydrant VX2-8 next to 226 Danielle Lane, Coatesville, PA 19320	D & C	<input type="checkbox"/>	6
	233 Danielle Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
	226 Danielle Lane, Coatesville, PA 19320	C	<input checked="" type="checkbox"/>	
		D & C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		D & C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	
		C	<input type="checkbox"/>	

\*\* Representative Location Codes are defined in the instructions

Note: Routine distribution (D) compliance samples must be collected monthly. It is recommended that a system identify more than one sample location and alternate between the locations to ensure representative monitoring of the distribution system.

**B. Description of Limited Accessibility:** For the location IDs identified as having limited accessibility in Table A, describe the limitation and the means for accessing these locations for sampling:

Contact residence owner 24 hours in advance of any check samples:  
Howard and Donna Willmott - 233 Danielle Lane, Coatesville, PA 19320  
Maureen Sciandra - 226 Danielle Lane, Coatesville, PA 19320

**C. Sampling Frequency:** Use the Location ID to specify where the sample will be collected for each month of the year.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
<b>Loc ID:</b>	712	712	712	712	712	712	712	712	712	712	712	712

**D. Sample Interval Description:** Describe below how you plan to ensure that samples are collected at evenly spaced time intervals.

Samples are collected the 4<sup>th</sup> week of the month.





**Commonwealth of Pennsylvania**  
**Department of Environmental Protection**  
 Bureau of Environmental Cleanup and Brownfields  
 Division of Storage Tanks  
 Rachel Carson State Office Building  
 P.O. Box 8762  
 Harrisburg, Pennsylvania 17105-8762  
 In Pa: 1-800-42-TANKS  
 Outside Pa: 717-772-5599



**All tank owners shall have the current valid Storage Tank Registration/Permit Certificate available, at the facility where the tank(s) is located, for inspection by the Department, certified storage tank inspector or installer and product distributor. At Retail Sales Facilities, the certificate (or copy) shall be publicly displayed at the facility where the tank(s) is located.**

VERIFY PRESENCE OF WATERMARKED      HOLD TO LIGHT TO VIEW

**Commonwealth of Pennsylvania**  
**Department of Environmental Protection**  
**Bureau of Environmental Cleanup and Brownfields**

**STORAGE TANK REGISTRATION/PERMIT CERTIFICATE**  
**EXPIRATION: FEB-04-2020**

SEQ#	CAPACITY	SUBST	PERMIT TYPE	PERMIT STATUS	AST IN-SVC INSP DUE	AST OUT-OF-SVC INSP DUE	UST OPERATIONS INSP DUE	LINING INSP DUE
001A	500	HZSUB	OPR	Approved	*****	*****	*****	*****
****	****	****	****	****	*****	*****	*****	*****
****	****	****	****	****	*****	*****	*****	*****
****	****	****	****	****	*****	*****	*****	*****
****	****	****	****	****	*****	*****	*****	*****
****	****	****	****	****	*****	*****	*****	*****
****	****	****	****	****	*****	*****	*****	*****
****	****	****	****	****	*****	*****	*****	*****
****	****	****	****	****	*****	*****	*****	*****

Client ID: 81247  
 Owner: VALLEY TWP CHESTER CNTY  
 Id: 15-55391  
 JANIS RAMBO  
 VALLEY TWP  
 890 W LINCOLN HWY  
 COATESVILLE PA 19320-1943

Site ID: 253070  
 Facility Kind: PADMN  
 Facility Id: 15-55391  
 MINERAL SPRINGS WTP  
 118 MINERAL SPRINGS RD  
 COATESVILLE PA 19320

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