



**TOWAMENCIN TOWNSHIP  
MONTGOMERY COUNTY, PENNSYLVANIA**

**2024-2025 MS4 ANNUAL REPORT**

**AUGUST 2025**

**PREPARED BY:  
CKS Engineers  
4259 W. Swamp Road, Suite 410  
Doylestown, PA 18902**



## ANNUAL MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4) STATUS REPORT

FOR THE PERIOD July 1, 2024 TO JUNE 30, 2025

| GENERAL INFORMATION   |                         |           |                         |                     |      |
|---|-------------------------|-----------|-------------------------|---------------------|------|
| Permittee Name:   | Towamencin Township     |           | NPDES Permit No.:       | PAI130083           |      |
| Mailing Address:  | 1090 Troxel Road        |           | Effective Date:         | 12-1-2022           |      |
| City, State, Zip:   | Lansdale, PA 19446      |           | Expiration Date:        | 11-30-2027          |      |
| MS4 Contact Person:   | David Kraynik           |           | Renewal Due Date:       | 5-30-2027           |      |
| Title:  | Township Manager        |           | Municipality:           | Towamencin Township |      |
| Phone:  | 215-368-7602            |           | County:                 | Montgomery County   |      |
| Email:  | dkraynik@towamencin.org |           |                         |                     |      |
| Co-Permittees (if applicable):  |                         |           |                         |                     |      |
| Appendix(ces) that permittee is subject to (select all that apply):   |                         |           |                         |                     |      |
| <input type="checkbox"/> Appendix A <input type="checkbox"/> Appendix B <input type="checkbox"/> Appendix C <input type="checkbox"/> Appendix D <input checked="" type="checkbox"/> Appendix E <input checked="" type="checkbox"/> Appendix F |                         |           |                         |                     |      |
| WATER QUALITY INFORMATION   |                         |           |                         |                     |      |
| Are there any discharges to waters within the Chesapeake Bay Watershed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |                         |           |                         |                     |      |
| Identify all surface waters that receive stormwater discharges from the permittee's MS4 and provide the requested information (see instructions).   |                         |           |                         |                     |      |
| Receiving Water Name  | Ch. 93 Class.           | Impaired? | Cause(s)                | TMDL?               | WLA? |
| Skippack Creek  | TSF, WF                 | Yes       | Siltation and Nutrients | Yes                 | Yes  |
| Towamencin Creek (Tributary of Skippack Creek)  | TSF, WF                 | Yes       | Siltation and Nutrients | Yes                 | Yes  |
|   |                         |           |                         |                     |      |
|   |                         |           |                         |                     |      |
|   |                         |           |                         |                     |      |
|   |                         |           |                         |                     |      |
|   |                         |           |                         |                     |      |
|   |                         |           |                         |                     |      |

### GENERAL MINIMUM CONTROL MEASURE (MCM) INFORMATION

Have you completed all MCM activities required by the permit for this reporting period? ☒ Yes ☐ No

List the current entity responsible for implementing each MCM of your SWMP, along with contact name and phone number.

| MCM   | Entity Responsible                 | Contact Name                          | Phone            |
|---|------------------------------------|---------------------------------------|------------------|
| #1 Public Education and Outreach on Storm Water Impacts                             | Towamencin Township                | David Kraynik,<br>Township<br>Manager | 215-368-<br>7602 |
| #2 Public Involvement/Participation   | Towamencin Township                | David Kraynik,<br>Township<br>Manager | 215-368-<br>7602 |
| #3 Illicit Discharge Detection and Elimination (IDD&E)                              | Towamencin Township                | David Kraynik,<br>Township<br>Manager | 215-368-<br>7602 |
| #4 Construction Site Storm Water Runoff Control                                     | Towamencin Township/<br>MCCD/PADEP | David Kraynik,<br>Township<br>Manager | 215-368-<br>7602 |
| #5 Post-Construction Storm Water Management in New<br>Development and Redevelopment | Towamencin Township/<br>MCCD/PADEP | David Kraynik,<br>Township<br>Manager | 215-368-<br>7602 |
| #6 Pollution Prevention / Good Housekeeping   | Towamencin Township                | David Hillmantel,<br>Public Works     | 215-368-<br>3476 |

### MCM #1 – PUBLIC EDUCATION AND OUTREACH ON STORM WATER IMPACTS

#### BMP #1: Develop, implement and maintain a written Public Education and Outreach Program.

1. For new permittees only, has the written PEOP been developed and implemented within the first year of permit coverage?

☐ Yes ☐ No

2. Date of latest annual review of PEOP: 6/2025, See App A Were updates made? ☐ Yes ☒ No

3. What were the plans and goals for public education and outreach for the reporting period?

Continue to provide information on stormwater and MS4 related issues on the Township website and in the Township newsletters and Enews. Continue to discuss MS4 related issues at public meetings and to provide educational opportunities to employees and volunteers. Continue to provide information at the Township Office and maintain educational signs at Fischer's Park.

4. Did the MS4 achieve its goal(s) for the PEOP during the reporting period? ☒ Yes ☐ No

5. Identify specific plans and goals for public education and outreach for the upcoming year:

The goal of the public education program is to provide stormwater education to residents and businesses within the Township so that they will have an increased awareness about stormwater and the impacts of stormwater discharges on local and downstream waterways and be encouraged to help the Township reduce pollutants to our streams, lakes and rivers. The following steps will be taken to move toward achieving the goal: include discussions of MS4 and stormwater related information at public meetings of the Board of Supervisors and Environmental Advisory Council, include information in the Township Newsletter at least 2 times in the reporting period, continue to provide information on stormwater and MS4 related issues on the Township website and provide educational opportunities to employees and volunteers. In addition, the Township will continue to provide information at the Township Office and maintain educational signs at Fischer's Park.

**BMP #2: Develop and maintain lists of target audience groups present within the areas served by your MS4.**

1. For new permittees only, have the target audience lists been developed and implemented within the first year of permit coverage?

☐ Yes ☐ No

2. Date of latest annual review of target audience lists: 6/2025 App A      Were updates made? ☐ Yes ☒ No

**BMP #3: Annually publish at least one educational item on your Stormwater Management Program.**

1. For new permittees only, were stormwater educational and informational items produced and published in print and/or on the Internet within the first year of permit coverage?

☒ Yes ☐ No

2. Date of latest annual review of educational materials: 6/2025      Were updates made? ☐ Yes ☒ No

3. Do you have a municipal website? ☒ Yes ☐ No (URL: towamencin.org)



If Yes, what MS4-related material does it contain?

The website includes a description of the MS4 requirements and links to fact sheets on the 6 MCMs. There is a discussion regarding illicit discharges and a telephone number to call if someone observes an illicit discharge. There are links for "Tips for Residents" and "Tips for Contractors" that include a variety of stormwater related issues and how these groups can help improve water quality. There are also links to the PADEP, EPA, MCCD, FEMA and the Center for Watershed Protection. In addition, on the Code Enforcement page of the website there is a link to information on stormwater and the construction industry. (See Appendix B)

4. Describe any other method(s) used during the reporting period to provide information on stormwater to the public:  
Discussions are held at public meetings of the Board of Supervisors and the Environmental Advisory Council (EAC) (See Appendix C) regarding stormwater and MS4 related issues. The Township Newsletter includes information on the MS4 Program and stormwater related issues (See Appendix D). Towamencin Township distributes information with an email list which is a result of residents/community members signing up for the email on the Township website. Several of these E-News emails included information on MS4 Related items and Events (See Appendix E). The Township also posts events on their Facebook page (See Appendix F). Educational information is available at the Township Building. The Township has educational signs at Fischers Park regarding wetlands, rain gardens, native plants, and riparian buffers (See Appendix G). Typically, information is made available on Towamencin Day. Towamencin Day was held May 10, 2025. On April 12, 2025, the EAC participated in the stream clean-up with the Perkiomen Watershed Conservancy where community members were encouraged to participate. In addition, Towamencin Township is a member of the Perkiomen Watershed Conservancy and utilizes their services for public education and public participation. In addition, on 2/25/2025, a public webinar was held by Penn State for Stormwater Solutions which the Township posted on their ENews for anyone to join.
5. Identify specific plans for the publication of stormwater materials for the upcoming year:  
The Township will continue to discuss MS4 related items at the Board of Supervisors and Environmental Advisory Council meetings. The educational signs at Fischer's Park will be maintained. The Township Newsletter and E-News emails will continue to include stormwater related information and information will be available at the Township Building.

**BMP #4: Distribute stormwater educational materials to the target audiences.**

Identify the two additional methods of distributing stormwater educational materials during the previous reporting period (e.g., displays, posters, signs, pamphlets, booklets, brochures, radio, local cable TV, newspaper articles, other advertisements, bill stuffers, posters, presentations, conferences, meetings, fact sheets, giveaways, or storm drain stenciling).

In addition to the website, the Township provides stormwater educational material through the Township Newsletter, the Township E-News distribution, educational signs at Fischer's Park, brochures at the Township Building, discussions at the public meetings of the Board of Supervisors and the Environmental Advisory Council, and through the Perkiomen Watershed Conservancy.

**MCM #1 Comments:**

**MCM #2 – PUBLIC INVOLVEMENT/PARTICIPATION**

**BMP #1: Develop, implement and maintain a written Public Involvement and Participation Program (PIPP)**

1. For new permittees only, was the PIPP developed and implemented within one year of permit coverage?  
☐ Yes ☐ No
2. Date of latest annual review of PIPP: 6/2025, See App H      Were updates made? ☐ Yes ☒ No

**BMP #2: Advertise to the public and solicit public input on ordinances, SOPs, Pollutant Reduction Plans (PRPs) (if applicable) and TMDL Plans (if applicable), including modifications thereto, prior to adoption or submission to DEP:**

1. Was an MS4-related ordinance, SOP, PRP or TMDL Plan developed during the reporting period? ☒ Yes ☐ No
2. If Yes, describe how you advertised the draft document(s) and how you provided opportunities for public review, input and feedback:

The revisions to the Stormwater Ordinance were prepared and discussed at the Board of Supervisors meeting on June 11, 2025. The ordinance was advertised for adoption at the July 9, 2025 Board of Supervisors meeting.

3. If an ordinance, SOP or plan was developed or amended during the reporting period, provide the following information:

| Ordinance / SOP / Plan Name                  | Date of Public Notice | Date of Public Hearing | Date Enacted or Submitted to DEP |
|--|-----------------------|------------------------|----------------------------------|
| Amendment to Stormwater Management Ordinance | 7/1/2025              | 9/5/2025               | 9/5/2025, See Appendix I         |
|  |                       |                        |                                  |

**BMP #3: Regularly solicit public involvement and participation from the target audience groups using available distribution and outreach methods.**

1. At least one public meeting or other MS4 event must be held during the 5-year permit coverage period to solicit participation and feedback from target audience groups. Was this meeting or event held during the reporting period?

☐ Yes ☒ No

If Yes, Date of Meeting or Event: March 8, 2023

2. Report instances of cooperation and participation in MS4 activities; presentations the permittee made to local watershed and conservation organizations; and similar instances of participation or coordination with organizations in the community.

As a member of the Perkiomen Watershed Conservancy (PWC), the Township provides public participation opportunities through this organization. Towamencin Day was held May 10, 2025. The Environmental Advisory Council typically provides an educational booth during Towamencin Day. PWC held a stream clean-up event on April 12, 2025. The Environmental Advisory Council (EAC) participated in the stream clean-up event. (See Appendix J)

A presentation was made at the March 8, 2023 Board of Supervisors meeting that included the status of the Township's MS4 program including discussion of the 6 minimum control measures and the Township's participation in the Skippack Alliance for a joint Pollution Reduction Plan. This meeting fulfills the requirement for at least one public meeting during the permit term.

3. Report activities in which members of the public assisted or participated in the meetings and in the implementation of the SWMP, including education activities or efforts such as cleanups, monitoring, storm drain stenciling, or others.

The public is always welcome to provide public comment on stormwater related issue at the public meetings of the Board of Supervisors and the Environmental Advisory Council. Public involvement opportunities are available through the Township's Environmental Advisory Council and the Perkiomen Watershed Conservancy including their riparian buffer planting events, stream clean-up events, invasive species removal events, and other educational opportunities.

**MCM #2 Comments:**

**MCM #3 – ILLICIT DISCHARGE DETECTION AND ELIMINATION (IDD&E)**

**BMP #1: Develop and implement a written program for the detection, elimination, and prevention of illicit discharges into the regulated small MS4.**

1. For new permittees only, was the written IDD&E program developed within one year of permit coverage?

☐ Yes ☐ No

2. Date of latest annual review of IDD&E program: 6/2025, App K Were updates made? ☐ Yes ☒ No

**BMP #2: Develop and maintain map(s) that show permittee and urbanized area boundaries, the location of all outfalls and, if applicable, observation points, and the locations and names of all surface waters that receive discharges from those outfalls. Outfalls and observation points shall be numbered on the map(s).**

1. Have you completed a map(s) that includes all components of BMP #2? ☒ Yes ☐ No

If Yes and you are a new permittee and have not submitted the map(s) previously, attach the map(s) to this report.

If No, date by which permittee expects map(s) to be completed:

2. Date of last update or revision to map(s): 10-14-2019

3. Total No. of Outfalls in MS4: 213 Total No. of Outfalls Mapped: 213

- |  |   |
|--|---|
| 4. Total No. of Observation Points:  | Total No. of Observation Points Mapped: |
| 5. During the reporting period, have you identified any existing outfalls that have not been previously reported to DEP in an NOI, application or annual report, or are any new MS4 outfalls proposed for the next reporting period? |   |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No      If Yes, select: <input type="checkbox"/> Existing Outfall(s) Identified <input type="checkbox"/> New Outfall(s) Proposed                                    |   |

**BMP #3:** In conjunction with the map(s) created under BMP #2 (either on the same map or on a different map), the permittee shall develop and maintain map(s) that show the entire storm sewer collection system within the permittee's jurisdiction that are owned or operated by the permittee (including roads, inlets, piping, swales, catch basins, channels, and any other components of the storm sewer collection system), including privately-owned components of the collection system where conveyances or BMPs on private property receive stormwater flows from upstream publicly-owned components.

1. Have you completed a map(s) that includes all components of BMP #3? ☒ Yes ☐ No

If Yes and you are a new permittee and have not submitted the map(s) previously, attach the map(s) to this report.

If No, date by which permittee expects map(s) to be completed:

2. If Yes to #1, is the map(s) on the same map(s) as for outfalls and receiving waters? ☒ Yes ☐ No

3. Date of last update or revision to map(s): 10-14-2019

**BMP #4:** Conduct dry weather screenings of MS4 outfalls to evaluate the presence of illicit discharges. If any illicit discharges are present, the permittee shall identify the source(s) and take appropriate actions to remove or correct any illicit discharges. The permittee shall also respond to reports received from the public or other agencies of suspected or confirmed illicit discharges associated with the storm sewer system, as well as take enforcement action as necessary. The permittee shall immediately report to DEP illicit discharges that would endanger users downstream from the discharge, or would otherwise result in pollution or create a danger of pollution or would damage property.

For new permittees, all identified outfalls (and if applicable observation points) must be screened during dry weather at least twice within the 5-year period following permit coverage. For existing permittees, all identified outfalls (and if applicable observation points) must be screen during dry weather at least once within the 5-year period following permit coverage and, for areas where past problems have been reported or known sources of dry weather flows occur on a continual basis, outfalls must be screened annually during each year of permit coverage.

1. How many unique outfalls (and if applicable observation points) were screened during the reporting period? 50
2. Indicate the percentage of all outfalls screened in the past five years. 100%
3. Indicate the percent of outfalls screened during the reporting period that revealed dry weather flows: 28%
4. Did any dry weather flows reveal color, turbidity, sheen, odor, floating or submerged solids? ☐ Yes ☒ No
5. If Yes for #4, attach all sample results to this report with a map identifying the sample location. Explain the corrective action(s) taken in the attachment.
6. Do you use the MS4 Outfall Field Screening Report form (3800-FM-BCW0521) provided in the permit?  
☒ Yes ☐ No  
If No, attach a copy of your screening report form.

**BMP #5:** Enact a Stormwater Management Ordinance or SOP to implement and enforce a stormwater management program that includes prohibition of non-stormwater discharges to the regulated small MS4.

1. Do you have an ordinance (municipal) or SOP or other mechanism (non-municipal) that prohibits non-stormwater discharges? ☒ Yes ☐ No  
If Yes, indicate the date of the ordinance or SOP: 6-25-2014 & 7-9-2025
2. If Yes to #1, is the ordinance or SOP consistent with DEP's 2022 Model Stormwater Management Ordinance (3800-PM-BCW0100j) with respect to authorized non-stormwater discharges? ☒ Yes ☐ No  
If Yes to #2 and the ordinance or SOP has not been submitted to DEP previously, attach the ordinance or SOP.

3. Were there any violations of the ordinance or SOP during the reporting period? ☐ Yes ☒ No

If Yes to #3, complete the table below (attach additional sheets as necessary).

| Violation Date | Nature of Violation | Responsible Party | Enforcement Taken |
|----------------|---------------------|-------------------|-------------------|
|                |                     |                   |                   |
|                |                     |                   |                   |
|                |                     |                   |                   |

4. Did you approve any waiver or variance during the reporting period that allowed an exception to non-stormwater discharge provisions of an ordinance or SOP? ☐ Yes ☒ No

If Yes to #4, identify the entity that received the waiver or variance and the type of non-stormwater discharge approved.

**BMP #6: Provide educational outreach to public employees, business owners and employees, property owners, the general public and elected officials (i.e., target audiences) about the program to detect and eliminate illicit discharges.**

1. Was IDD&E-related information distributed to public employees, businesses, and the general public during the reporting period? ☒ Yes ☐ No

If Yes, what was distributed? Information regarding illicit discharges is included in the Township Newsletters and the Township website including a telephone number to call to report an illicit discharge.

2. Is there a well-publicized method for employees, businesses and the public to report stormwater pollution incidents?  
☒ Yes ☐ No

3. Do you maintain documentation of all responses, action taken, and the time required to take action? ☒ Yes ☐ No

**MCM #3 Comments:**

Outfall inspection reports are included in Appendix L.

**MCM #4 – CONSTRUCTION SITE STORMWATER RUNOFF CONTROL**

Are you relying on PA's statewide program for stormwater associated with construction activities to satisfy this MCM?

☒ Yes ☐ No

*(If Yes, respond to questions for BMP Nos. 1, 2 and 3 only in this section. If No, respond to questions for all BMPs in this section)*

**BMP #1: The permittee may not issue a building or other permit or final approval to those proposing or conducting earth disturbance activities requiring an NPDES permit unless the party proposing the earth disturbance has valid NPDES Permit coverage (i.e., not expired) under 25 Pa. Code Chapter 102.**

During the reporting period, did you comply with 25 Pa. Code § 102.43 (relating to withholding building or other permits or approvals until DEP or a county conservation district (CCD) has approved NPDES permit coverage)?

☒ Yes ☐ No ☐ Not Applicable (no building permit applications received)

**BMP #2: A municipality or county which issues building or other permits shall notify DEP or the applicable CCD within 5 days of the receipt of an application for a permit involving an earth disturbance activity consisting of one acre or more, in accordance with 25 Pa. Code § 102.42.**

During the reporting period, did you comply with 25 Pa. Code § 102.42 (relating to notifying DEP/CCD within 5 days of receiving an application involving an earth disturbance activity of one acre or more)?

☒ Yes ☐ No ☐ Not Applicable (no building permit applications received)

**BMP #3: Enact, implement and enforce an ordinance or SOP to require the implementation and maintenance of E&S control BMPs, including sanctions for non-compliance, as applicable.**

1. Do you have an ordinance (municipal) or SOP or other mechanism (non-municipal) that requires implementation and maintenance of E&S control BMPs? ☒ Yes ☐ No

If Yes, indicate the date of the ordinance or SOP: 6-25-2014 & 7-9-2025

2. If Yes to #1, is the ordinance or SOP consistent with DEP's 2022 Model Stormwater Management Ordinance (3800-PM-BCW0100j)? ☒ Yes ☐ No

3. If Yes to #2 and the ordinance or SOP has not been submitted previously, attach a copy of the ordinance or SOP.

**BMP #4: Review Erosion and Sediment (E&S) control plans to ensure that such plans adequately consider water quality impacts and meet regulatory requirements.**

Specify the number of E&S Plans you reviewed during the reporting period:

**BMP #5: Conduct inspections regarding installation and maintenance of E&S control measures during earth disturbance activities. Maintain records of site inspections, including dates and inspection results, in accordance with the record retention requirements in this permit.**

Specify the number of E&S inspections you completed during the reporting period:

**BMP #6: Conduct enforcement when installation and maintenance of E&S control measures during earth disturbance activities does not comply with permit and/or regulatory requirements.**

Specify the number of enforcement actions you took during the reporting period for improper E&S:

**BMP #7: Develop and implement requirements for construction site operators to control waste at construction sites that may cause adverse impacts to water quality. The permittee shall provide education on these requirements to construction site operators.**

Specify the method(s) by which you are educating construction site operators on controlling waste at construction sites:

**BMP #8: Develop and implement procedures for the receipt and consideration of public inquiries, concerns, and information submitted by the public to the permittee regarding local construction activities.**

1. A tracking system has been established for receipt of public inquiries and complaints. ☐ Yes ☐ No

2. Specify the number of inquiries and complaints received during the reporting period:

**MCM #4 Comments:**

**MCM #5 – POST-CONSTRUCTION STORM WATER MANAGEMENT IN NEW DEVELOPMENT AND REDEVELOPMENT**

**BMP #1: Enact, implement and enforce an ordinance or SOP to require post-construction stormwater management from new development and redevelopment projects, including sanctions for non-compliance.**

1. Do you have an ordinance (municipal) or SOP or other mechanism (non-municipal) that requires implementation and maintenance of post-construction stormwater management (PCSM) BMPs? ☒ Yes ☐ No  
If Yes, indicate the date of the ordinance or SOP: 6-25-2014 & 7-9-2025
2. If Yes to #1, is the ordinance or SOP consistent with DEP's 2022 Model Stormwater Management Ordinance (3800-PM-BCW0100j)? ☒ Yes ☐ No
3. If Yes to #2 and the ordinance or SOP has not been submitted previously, attach a copy of the ordinance or SOP.

**BMP #2: Develop and implement measures to encourage and expand the use of Low Impact Development (LID) in new development and redevelopment. Measures should also be included to encourage retrofitting LID into existing development. Enact ordinances consistent with LID practices and repeal sections of ordinances that conflict with LID practices.**

1. Do you have an ordinance (municipal) or SOP or other mechanism (non-municipal) that encourages and expands the use of LID in new development and redevelopment? ☒ Yes ☐ No  
If Yes, indicate the date of the ordinance or SOP: 6-25-2014 & 7-9-2025
2. If Yes to #1, is the ordinance or SOP consistent with DEP's 2022 Model Stormwater Management Ordinance (3800-PM-BCW0100j)? ☒ Yes ☐ No
3. If Yes to #2 and the ordinance or SOP has not been submitted previously, attach a copy of the ordinance or SOP.

**BMP #3: Ensure adequate O&M of all post-construction stormwater management BMPs that have been installed at development or redevelopment projects that disturb greater than or equal to one acre, including projects less than one acre that are part of a larger common plan of development or sale.**

1. Do you have an inventory of all PCSM BMPs that were installed to meet requirements in NPDES Permits for Stormwater Discharges Associated with Construction Activities approved since March 10, 2003? ☒ Yes ☐ No  
If Yes to #1, complete Table 1 on the next page.
2. Has proper O&M occurred during the reporting period for all PCSM BMPs? ☒ Yes ☐ No
3. If No to #2, explain what action(s) the permittee has taken or plans to take to ensure proper O&M.

*If you are relying on PA's statewide program for stormwater associated with construction activities, you may skip to MCM #6, otherwise complete all questions for BMPs #4 - #6 in this section.*

**BMP #4: Require the implementation of a combination of structural and/or non-structural BMPs that are appropriate to the local community, that minimize water quality impacts, and that are designed to maintain pre-development runoff conditions.**

1. Specify the number of PCSM Plans reviewed during the reporting period for projects disturbing greater than or equal to one acre (including projects less than one acre that are part of a larger common plan of development or sale):
2. Has a tracking system been established and maintained to record qualifying projects and their associated BMPs?  
☐ Yes ☐ No



## PCSM BMP INVENTORY

**Table 1.** To complete the information needed for MCM #5, BMP #3, list all existing structural BMPs that discharge stormwater to the permittee's MS4 that were installed to satisfy PCSM requirements for earth disturbance activities under Chapter 102, and provide the requested information (see instructions).

| BMP No. | BMP Name       | DA (ac) | Entity Responsible for O&M | Latitude | Longitude | Date Installed | O&M Requirements | NPDES Permit No. |
|---------|----------------|---------|----------------------------|----------|-----------|----------------|------------------|------------------|
| 1       | See Appendix M |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 2       |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 3       |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 4       |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 5       |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 6       |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 7       |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 8       |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 9       |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 10      |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 11      |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 12      |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 13      |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 14      |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 15      |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |
| 16      |                |         |                            | 0 1 "    | 0 1 "     |                |                  |                  |

**BMP #5: Ensure that controls are installed that shall prevent or minimize water quality impacts. The permittee shall inspect all qualifying development or redevelopment projects during the construction phase to ensure proper installation of the approved structural PCSM BMPs. A tracking system (e.g., database, spreadsheet, or written list) shall be implemented to track the inspections conducted and to track the results of the inspections (e.g., BMPs were, or were not, installed properly).**

1. During the reporting period have you inspected all qualifying development and redevelopment projects during the construction phase to ensure proper installation of approved structural BMPs?  
☐ Yes ☐ No ☐ Not Applicable (no qualifying projects during reporting period)
2. Has a tracking system been established and maintained to record results of inspections?  
☐ Yes ☐ No

**BMP #6: Develop a written procedure that describes how the permittee shall address all required components of this MCM.**

Have you developed a written plan that addresses: 1) minimum requirements for use of structural and/or non-structural BMPs in plans for development and redevelopment; 2) criteria for selecting and standards for sizing stormwater BMPs; and 3) implementation of an inspection program to ensure that BMPs are properly installed? ☐ Yes ☐ No

**MCM #5 Comments:**

#### **MCM #6 – POLLUTION PREVENTION / GOOD HOUSEKEEPING**

**BMP #1: Identify and document all operations that are owned or operated by the permittee and have the potential for generating pollution in stormwater runoff to the MS4. This includes activities conducted by contractors for the permittee.**

1. Have you identified all facilities and activities owned and operated by the permittee that have the potential to generate stormwater runoff into the MS4? ☒ Yes ☐ No
2. When was the inventory last reviewed? 6/2025
3. When was it last updated? 2021, See Appendix N

**BMP #2: Develop, implement and maintain a written O&M program for all operations that could contribute to the discharge of pollutants from the MS4, as identified under BMP #1. This program shall address stormwater collection or conveyance systems within the regulated MS4.**

1. Have you developed a written O&M program for the operations identified in BMP #1? ☒ Yes ☐ No
2. Date of last review or update to written O&M program: 6/2025, See Appendix N & O

**BMP #3: Develop and implement an employee training program that addresses appropriate topics to further the goal of preventing or reducing the discharge of pollutants from operations to the regulated small MS4. All relevant employees and contractors shall receive training.**

1. Have you developed an employee training program? ☒ Yes ☐ No
2. Date of last review or update to training program: 6/2025, App P Date of latest training: 6-26-2025

3. Training topics covered:

3/14/2025 – Perkiomen Watershed Conservancy – Perkiomen Stormwater Symposium – attended by Mary R. Stover, P.E., Municipal Engineer's staff.

3/13/2025 – PSATS – The New (Draft) PA NPDES MS4 General Permit (PAG-13) – The Latest and Greatest - attended by Mary R. Stover, P.E., Municipal Engineer's staff.

3/11/2025 – PennState Extension – Residential Stormwater Solutions: Lawn Care for Clean Water, attended by Camille Basillii, Municipal Engineer's staff.

1/29/2025 – PennState Extension – Water Cooler Talk: Ice Melter Impacts and Reduction Strategy - attended by Mary R. Stover, P.E. and Camille Basillii, Municipal Engineer's staff.

11/24/2024 - Perkiomen Watershed Conservancy and Township EAC - Workshop on Converting Lawn to Garden - attended by Vanessa Gaynor and Rich Costlow, EAC members.

11/13/2024 – 2024 PSATS Stormwater Virtual Conference – Policy Track - attended by Mary R. Stover, P.E., Municipal Engineer's staff.

10/16/2024 & 10/17/2024 – 2024 VUSP Stormwater Symposium – Innovative stormwater solutions for microplastics, climate change resilient solutions, PCSM manual update, impact of new legislation - attended by Meagan McKeon E.I. and Camille Basillii, Municipal Engineer's staff.

10/5/2024 - We Conserve PA EAC Conference - Vanessa Gaynor, EAC member, attended workshops on parking reform and environmental impacts; energy audit on Township Buildings; and meadow conversion in Lansdale Borough.

9/24/2024 – Clean Water Academy – MCMs Part 1 and MCM 3 – Illicit Discharge Detection and Elimination – Outfall Inspections – both attended by Mary R. Stover, P.E., Municipal Engineer's staff.

4. Name(s) of training presenter(s):

See Above.

5. Names of training attendees:

See Above.

**MCM #6 Comments:**

**POLLUTANT CONTROL MEASURES (PCMs)**

*Indicate the status of implementing PCMs in Appendices A, B and/or C by completing the table below. Skip this section if PCMs are not applicable.*

| Task  | Date Completed | Attached                 | Anticipated Completion Date |
|---|----------------|--------------------------|-----------------------------|
| Storm Sewershed Map(s)                      |                | <input type="checkbox"/> |                             |
| Source Inventory                            |                | <input type="checkbox"/> |                             |
| Investigation of Suspected Sources          |                | <input type="checkbox"/> |                             |
| Ordinance/SOP for Controlling Animal Wastes |                | <input type="checkbox"/> |                             |

**PCM Comments:**

No Appendix A, B, or C requirements.

## POLLUTANT REDUCTION PLANS (PRPs) AND TMDL PLANS

1. Complete this section if the development and submission of a PRP and/or TMDL Plan was required as an attachment to the latest NOI or application or was required by the permit, regardless of whether DEP has approved the plan(s).

| Type of Plan   | Submission Date | DEP Approval Date | Surface Waters Addressed by Plan    |
|--|-----------------|-------------------|-------------------------------------|
| <input type="checkbox"/> Chesapeake Bay PRP (Appendix D)               |                 |                   | Chesapeake Bay                      |
| <input checked="" type="checkbox"/> Impaired Waters PRP (Appendix E)   | 9-12-2017       | 11-2-2022         | Skippack Creek and Towamencin Creek |
| <input checked="" type="checkbox"/> TMDL Plan (Appendix F)             | 9-12-2017       | 11-2-2022         | Skippack Creek                      |
| <input type="checkbox"/> Combined Chesapeake Bay / Impaired Waters PRP |                 |                   | Chesapeake Bay,                     |
| <input type="checkbox"/> Combined PRP / TMDL Plan                      |                 |                   |                                     |

- ☐ Joint Plan (if checked, list the name of the MS4 group or names of all entities participating in the joint plan below)  
Joint Plan Participants:

2. Identify the pollutants of concern and pollutant load reduction requirements under the permit (see instructions).

| Type of Plan   | TSS Load Reduction (lbs/yr)                                      | TP Load Reduction (lbs/yr)             | TN Load Reduction (lbs/yr) |
|--|--|--|----------------------------|
| <input type="checkbox"/> Chesapeake Bay PRP (Appendix D)               |  |  |                            |
| <input checked="" type="checkbox"/> Impaired Waters PRP (Appendix E)   | N/A  | Presumptive Approach - 10% TSS + 5% TP | N/A                        |
| <input checked="" type="checkbox"/> TMDL Plan (Appendix F)             | 227,375 (Projects within Towamencin in Multi-Municipal PRP-TMDL) | N/A                                    | N/A                        |
| <input type="checkbox"/> Combined Chesapeake Bay / Impaired Waters PRP |  |  |                            |
| <input type="checkbox"/> Combined PRP / TMDL Plan                      |  |  |                            |

3. Date Final Report Demonstrating Achievement of Pollutant Load Reductions Due: 11-30-2027

4. Have any modifications to the plan(s) occurred since DEP approval? ☐ Yes ☒ No

If Yes to #4, was the updated plan(s) submitted to DEP? ☐ Yes ☐ No

If Yes to #4, did you comply with the public participation requirements of the applicable appendix? ☐ Yes ☐ No

If Yes to #4, describe the plan modifications.

5. Summary of progress achieved during reporting period.

The Multi-Municipal PRP for Skippack Creek includes BMPs in four municipalities. One project including a rain garden and removal of impervious area at Perkioment Valley Airport in Skippack Township is complete.

Design is in progress for the Zacharias Creek Stream Restoration Project in Worcester Township with funds from a Growing Greener Grant. Design is also in progress for two basin retrofit projects in Towamencin Township with funds from the Watershed Restoration Protection Program and Montgomery County MontCo 2040 grant program. In addition design is proceeding on a basin retrofit project in Hatfield Township.

A Growing Greener Grant application has been submitted for the design and permitting of a stream restoration project in Towamencin Township.

6. Anticipated activities for next reporting period.

It is anticipated that bidding and construction will proceed for the basin retrofit projects in Towamencin and Hatfield Townships. The design and permitting for the Zacharais Creek stream restoration should also be completed.

Grant applications will likely be submitted for the construction of the Zacharias Creek Stream Restoration project and the design and permitting for a stream restoration project in Skippack Township in the spring of 2026.

**PRP/TMDL Plan Comments:**

### NEW BMPs FOR PRP/TMDL PLAN IMPLEMENTATION

**Table 2.** List all new structural BMPs installed and ongoing non-structural BMPs implemented during the reporting period that are being used toward achieving load reductions in the permittee's PRP and/or TMDL Plan (see instructions).

| BMP No. | BMP Name | DA (ac) | % Imp. | BMP Extent | Units | Latitude | Longitude | Date Installed or Implemented | Planning Area?           | Ch. 102?                 | Annual Sediment Load Reduction (lbs/yr) |
|---------|----------|---------|--------|------------|-------|----------|-----------|-------------------------------|--------------------------|--------------------------|---|
|         |          |         |        |            |       | O 1 11   | O 1 11    |                               | <input type="checkbox"/> | <input type="checkbox"/> |   |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                               | <input type="checkbox"/> | <input type="checkbox"/> |   |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                               | <input type="checkbox"/> | <input type="checkbox"/> |   |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                               | <input type="checkbox"/> | <input type="checkbox"/> |   |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                               | <input type="checkbox"/> | <input type="checkbox"/> |   |

### BMP INVENTORY FOR PRP/TMDL PLAN IMPLEMENTATION

**Table 3.** List all existing structural BMPs that have been installed in prior reporting periods and are eligible to use toward achieving load reductions in the permittee's PRP and/or TMDL Plan (see instructions).

| BMP No. | BMP Name | DA (ac) | % Imp. | BMP Extent | Units | Latitude | Longitude | Date Installed | Annual Sediment Load Reduction (lbs/yr) | Date of Latest Inspection | Satisfactory?            |
|---------|----------|---------|--------|------------|-------|----------|-----------|----------------|---|---------------------------|--------------------------|
|         |          |         |        |            |       | O 1 11   | O 1 11    |                |   |                           | <input type="checkbox"/> |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                |   |                           | <input type="checkbox"/> |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                |   |                           | <input type="checkbox"/> |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                |   |                           | <input type="checkbox"/> |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                |   |                           | <input type="checkbox"/> |
|         |          |         |        |            |       | O 1 11   | O 1 11    |                |   |                           | <input type="checkbox"/> |

## CERTIFICATION

**For PAG-13 Permittees:** I have read the latest PAG-13 General Permit issued by DEP and agree and certify that (1) the permittee continues to be eligible for coverage under the PAG-13 General Permit and (2) the permittee will continue to comply with the conditions of that permit, including any modifications thereto. I understand that if I do not agree to the terms and conditions of the PAG-13 General Permit, I will apply for an individual permit within 90 days of publication of the General Permit. I also acknowledge that any facility construction needed to comply with the General Permit requirements shall be designed, built, operated, and maintained in accordance with operative laws and regulations.

**For All Permittees:** I certify under penalty of law that this report was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

David Kraynik, Township Manager

Name of Responsible Official

215-368-7602

Telephone No.



Signature

8/25/25

Date

## **LIST OF APPENDICES**

|             |  |
|-------------|--|
| Appendix A: | Public Education & Outreach Plan                       |
| Appendix B: | Township Website                                       |
| Appendix C: | Environmental Advisory Council Minutes                 |
| Appendix D: | Township Newsletters                                   |
| Appendix E: | Township E-News  |
| Appendix F: | Facebook Posts   |
| Appendix G: | Educational Signs at Fischer's Park                    |
| Appendix H: | Public Involvement/Participation Plan                  |
| Appendix I: | Stormwater Management Ordinance & Proof of Publication |
| Appendix J: | 2025 PWC Stream Clean-up Recap                         |
| Appendix K: | Illicit Discharge Detection & Elimination Plan         |
| Appendix L: | Outfall Inspection Reports                             |
| Appendix M: | PSCM BMP Inventory                                     |
| Appendix N: | Operation & Maintenance Plan                           |
| Appendix O: | Public Works Stormwater Maintenance Reports            |
| Appendix P: | Training Program                                       |



# **Appendix A:**

## **Public Education & Outreach Plan**

## MCM #1 – Public Education &amp; Outreach on Stormwater Impacts

Date of Last Revision: June 2025**Public Education & Outreach Plan**

|  |  |                   |                         |
|--|--|-------------------|-------------------------|
| Permittee Name:  | Towamencin Township, Montgomery County, PA   |                   |                         |
| Mailing Address:   | 1090 Troxel Road   | City, State, Zip: | Lansdale, PA 19446      |
| MCM #1 Contact Person:   | David Kraynik  | Title:            | Township Manager        |
| Phone Number:  | 215-368-7602   | Email:            | dkraynik@towamencin.org |
| <p>Plan Goal: To provide stormwater education to residents and businesses within the Township so that they will have an increased awareness about stormwater and the impacts of stormwater discharges on local and downstream waterways and be encouraged to help the Township reduce pollutants to our streams, lakes and rivers.</p> |  |                   |                         |
| <p>Target Audiences: Residents, Schools, Developers, Businesses, Municipal Employees (see attached Strategies and Target Audiences)</p>  |  |                   |                         |
| <p align="center"><b>Stormwater Educational Materials</b><br/>* at least 1 of the outreach methods in the box below is required</p>  |  |                   |                         |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input checked="" type="checkbox"/> Website: (provide url)<br><u>towamencin.org</u><br><br><br>  | Material Name: Municipal Website   |                   |                         |
|  | Distribution Method: Online  |                   |                         |
|  | Distribution Audience: All traffic to municipal website  |                   |                         |
|  | MCM(s) Addressed: 1, 2, 3, 4, & 5  |                   |                         |
|  | Description of Contents: The website includes a description of the MS4 requirements and links to fact sheets on the 6 MCMs. There is a discussion regarding illicit discharges and a telephone number to call if someone observes an illicit discharge. There are links for "Tips for Residents" and "Tips for Contractors" that include a variety of stormwater related issues and how these groups can help improve water quality. There are also links to the PADEP, EPA, MCCD, FEMA and the Center for Watershed Protection. |                   |                         |
|  | Date Material Last Reviewed: 6/2025<br>Date Material Last Updated: 6/2020  |                   |                         |

## MCM #1 – Public Education &amp; Outreach on Stormwater Impacts

Date of Last Revision: June 2025

| Additional Stormwater Educational Materials  |   |
|--|---|
| *at least 2 additional educational material distribution methods are required  |   |
| Material Type:<br><input checked="" type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input type="checkbox"/> Other Advertisement:<br>_____ | Material Name: Township Newsletter<br>Distribution Method: Mailed to all Residents/Businesses in Township<br>Distribution Audience: Residents/Businesses<br>MCM(s) Addressed: 1, 2, 3, 4, & 5<br>Description of Educational Material: Stormwater/MS4 related information regarding the Township's Stormwater Management Program and ways the residents/businesses can help reduce pollutants to the waterways.<br>Date Material Last Reviewed: 6/2025<br>Date Material Last Updated: 6/2025   |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input checked="" type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input type="checkbox"/> Other Advertisement:<br>_____ | Material Name: Pamphlets/Flyers related to MS4 and Water Quality<br>Distribution Method: Available in the lobby at the Township Building<br>Distribution Audience: Township residents<br>MCM(s) Addressed: 1, 2 & 5<br>Description of Educational Material: General water quality information, information on thing's homeowners can do to improve water quality, information on illicit discharges and/or other stormwater related issues<br>Date Material Last Reviewed: 6/2025<br>Date Material Last Updated: 6/2020   |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input checked="" type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input type="checkbox"/> Other Advertisement:<br>_____ | Material Name: Public Township Meetings<br>Distribution Method: Public Meetings at Township Building/Minutes on Website<br>Distribution Audience: Residents/Businesses<br>MCM(s) Addressed: 1, 2, 3, 4, 5 & 6 and TMDL/PRP Plan<br>Description of Educational Material: Stormwater/MS4 related information is discussed at regular public meetings of the Township, as needed. A minimum of one public meeting discussion will be held during the permit term to discuss the Township's Stormwater Management Program. Discussions were held at the Board of Supervisors meeting on August 26, 2020, April 13, 2022 and March 8, 2023.<br>Date Material Last Reviewed: 6/2025<br>Date Material Last Updated: 6/2023 |

## MCM #1 – Public Education &amp; Outreach on Stormwater Impacts

Date of Last Revision: June 2025

\* Attach Additional Sheets as Necessary

| Additional Stormwater Educational Materials   |   |
|---|---|
| *at least 2 additional educational material distribution methods are required   |   |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input checked="" type="checkbox"/> Other Advertisement:<br><u>website link</u>        | Material Name: Perkiomen Watershed Conservancy<br>Distribution Method: website link to <a href="https://www.perkiomenwatershed.org/">https://www.perkiomenwatershed.org/</a><br>Distribution Audience: Residents/Businesses<br>MCM(s) Addressed: 1, 2, 3, 4, & 5<br>Description of Educational Material: As a member of the Perkiomen Watershed Conservancy, the Township encourages residents/businesses to take advantage of the educational materials provided by the Conservancy on their website and at their events.<br>Date Material Last Reviewed: 6/2025<br>Date Material Last Updated: 6/2025 |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input checked="" type="checkbox"/> Other Advertisement:<br><u>Educational Signage</u> | Material Name: Informational Signs at Fischer's Park<br>Distribution Method: Available for Public View at Park<br>Distribution Audience: Residents<br>MCM(s) Addressed: 1,2, & 5<br>Description of Educational Material: Educational signs with information about rain gardens, wetlands, native plants and riparian buffers.<br>Date Material Last Reviewed: 6/2025<br>Date Material Last Updated: 6/2021  |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input checked="" type="checkbox"/> Other Advertisement:<br><u>ENews emails</u>        | Material Name: ENews emails<br>Distribution Method: Email to Residents/Businesses that sign up on webpage<br>Distribution Audience: Residents/Businesses<br>MCM(s) Addressed: 1, 2, & 3<br>Description of Educational Material: Enews emails include information regarding Township events, recycling opportunities and hazardous waste collection events.<br>Date Material Last Reviewed: 6/2025<br>Date Material Last Updated: 6/2025   |

## MCM #1 – Public Education &amp; Outreach on Stormwater Impacts

Date of Last Revision: June 2025

| Additional Stormwater Educational Materials  |   |
|--|---|
| *at least 2 additional educational material distribution methods are required  |   |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input checked="" type="checkbox"/> Other Advertisement:<br><u>Facebook</u> | Material Name: Social Media<br>Distribution Method: Towamencin Township Facebook Page<br>Distribution Audience: Residents/Businesses<br>MCM(s) Addressed: 1, 2, & 3<br>Description of Educational Material: Information regarding recycling and hazardous waste collection dates/locations, stream clean-up events, and other MS4 related events are posted to encourage public participation.<br>Date Material Last Reviewed: 6/2025<br>Date Material Last Updated: 6/2025 |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input type="checkbox"/> Other Advertisement:<br>_____                      | Material Name:<br>Distribution Method:<br>Distribution Audience:<br>MCM(s) Addressed:<br>Description of Educational Material:<br>Date Material Last Reviewed:<br>Date Material Last Updated:  |
| Material Type:<br><input type="checkbox"/> Newsletter<br><input type="checkbox"/> Pamphlet/Flyer<br><input type="checkbox"/> Display/Poster<br><input type="checkbox"/> Presentation/Conference<br><input type="checkbox"/> Newspaper<br><input type="checkbox"/> Radio/ TV<br><input type="checkbox"/> Other Advertisement:<br>_____                      | Material Name:<br>Distribution Method:<br>Distribution Audience:<br>MCM(s) Addressed:<br>Description of Educational Material:<br>Date Material Last Reviewed:<br>Date Material Last Updated:  |

**PHASE II STORMWATER MANAGEMENT PROGRAM  
TOWAMENCIN TOWNSHIP  
PUBLIC EDUCATION – STRATEGIES & TARGET AUDIENCES**

| <b>Who are we Trying to Educate?</b> | <b>How Large is the Audience?</b>   | <b>How do they Receive Information?</b>  | <b>What Organizations Focus on Them?</b>   | <b>Strategies for Distributing Educational Materials</b>  |
|--------------------------------------|---|--|--|---|
| Municipal Employees                  | <ul style="list-style-type: none"> <li>• Public Works Employees</li> <li>• Planning Commission Members (9)</li> <li>• Environmental Advisory Council (7)</li> </ul>   | <ul style="list-style-type: none"> <li>• Paychecks</li> <li>• Newsletter</li> <li>• Website: Towamencin.org</li> <li>• Periodic Staff Meetings</li> <li>• Handouts</li> <li>• Seminars</li> </ul>  | <ul style="list-style-type: none"> <li>• Perkiomen Watershed Conservancy</li> <li>• American Public Works Association <ul style="list-style-type: none"> <li>• PSATS</li> </ul> </li> </ul>                                      | <ul style="list-style-type: none"> <li>• Provide Information on Township Website and Perkiomen Watershed Conservancy website</li> <li>• Allow employees to attend appropriate seminars or workshops</li> <li>• Discuss issues at staff meetings and public meetings</li> </ul>  |
| Residents                            | <ul style="list-style-type: none"> <li>• Population: 18,009 (2020 Census)</li> <li>• Households: 7,800 (2020 Census)</li> </ul>   | <ul style="list-style-type: none"> <li>• Local Newspaper: North Penn Reporter</li> <li>• Township Newsletter</li> <li>• Township Website</li> <li>• Lansdale Library</li> <li>• Towamencin Community Day</li> </ul>  | <ul style="list-style-type: none"> <li>• Homeowners Associations</li> <li>• Retirement Communities <ul style="list-style-type: none"> <li>• Towamencin Youth Association (TYA)</li> <li>• Boy/Girl Scouts</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Provide Information on Township Website and Perkiomen Watershed Conservancy website</li> <li>• Provide Information in Newsletter</li> <li>• Discuss issues at Public Meetings</li> <li>• Provide Information at Towamencin Community Day</li> <li>• Provide information on the Township Facebook page</li> </ul> |
| Schools                              | <ul style="list-style-type: none"> <li>• Dock Mennonite Academy (9-12)</li> <li>• North Penn High School</li> <li>• Inglewood Elementary School</li> <li>• Walton Farm Elementary School</li> <li>• General Nash Elementary School</li> <li>• North Montco Technical Career Center</li> </ul> | <ul style="list-style-type: none"> <li>• North Penn H.S. Knight Crier Paper/Web page</li> <li>• Dock Mennonite Academy Lamplighter Paper/Newsline Web page <ul style="list-style-type: none"> <li>• Assemblies</li> <li>• Career Days</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>• Boy/Girl Scouts</li> <li>• Towamencin Youth Association (TYA)</li> </ul>  | <ul style="list-style-type: none"> <li>• Township Newsletter</li> <li>• Provide information and links on Township Website</li> </ul>  |
| Businesses                           | <ul style="list-style-type: none"> <li>• 100+ Businesses in Towamencin Township</li> </ul>  | <ul style="list-style-type: none"> <li>• North Penn Reporter</li> <li>• Penn Suburban Chamber of Commerce</li> </ul>   | <ul style="list-style-type: none"> <li>• Penn Suburban Chamber of Commerce</li> </ul>  | <ul style="list-style-type: none"> <li>• Towamencin Township Newsletter</li> <li>• Provide Information, as needed, to Penn Suburban Chamber of Commerce</li> </ul>  |
| Developers                           | <ul style="list-style-type: none"> <li>• 50+ Developers do work in the Township</li> </ul>  | <ul style="list-style-type: none"> <li>• Township Offices</li> <li>• Township Newsletter</li> <li>• Township Website</li> <li>• North Penn Reporter</li> </ul>   | <ul style="list-style-type: none"> <li>• Home Builders Associations</li> <li>• Penn Suburban Chamber of Commerce</li> </ul>  | <ul style="list-style-type: none"> <li>• Provide Information at the Township Offices</li> <li>• Provide Information on the Township Website and Newsletter</li> </ul>   |

# **Appendix B:**

# **Township Website**

## Towamencin Township

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Home / Information

# Stormwater Management



### [MS4 & Stormwater Projects Presentation - 9/13/23](#)

The Pennsylvania Department of Environmental Protection (PADEP) has a statewide program designed to improve our quality of water. The program requires all municipalities in populated areas to detect and eliminate Non-Point Source Pollution (NPSP). NPSP is a combination of contaminants from various sources that find their way into our streams, lakes, and rivers by way of rainfall and snowmelt. Many of the pollutants include but are not limited to soap, oil, gasoline, litter, cigarette butts and sediments. The main outlet of these contaminants is from storm drain discharge. Storm drains offer no means of filtration and are easy targets for illegal dumping. It is important that residents understand that what goes down storm drains ultimately ends up in lakes, streams, and other bodies of water. To insure healthy water for both aquatic life and human consumption we must first detect and then eliminate NPSP.

The Township is doing its part. The Township has begun monitoring and testing of storm sewer outfalls that have flow during dry periods. The Township is asking for all residents to cooperate with the inspectors, as some outfalls are located on private properties. All information from this inspection will be used to remedy any area deemed polluted.

The Township is asking residents and business owners to do their part. Please dispose of litter properly, keeping soaps, oil, gas, and all chemicals off of the pavement and out of storm drains. Also, use fertilizers sparingly and properly, as this can cause unwanted algae growth in bodies of water. And remember, dumping of anything down a storm drain is illegal and violators may be fined.

Stormwater runoff is generated when precipitation from rain and snow melt events flow over land and impervious surfaces and does not infiltrate into the ground. The runoff from streets, lawns, farms, and construction and industrial sites pick up fertilizers, dirt, pesticides, oil, grease and many other pollutants and discharge into our lakes, streams and rivers. This untreated discharge is detrimental to our water quality as it can adversely affect our drinking water supply and environment. Many Best Management Practices (BMP's) such as detention/retention/infiltration basins, are already in place to help keep our water clean.

Towamencin Township regulates stormwater management which goes above and beyond typical BMP's through a permit that is obtained from the [Pennsylvania Department of Environmental Protection \(PA DEP\)](#) through the National Pollution and Discharge Elimination System Phase II (NPDES)/Municipals Separate Storm Sewer System (MS4). This is a Federal requirement from the [United States Environmental Protection Agency \(USEPA\)](#) that is



administered by the PA DEP. This NPDES Permit is broken up into six minimum control measures to be regulated and enforced by the Township. These minimum control measures include:

1. [Public Education and Outreach](#)
2. [Public Participation/Involvement](#)
3. [Illicit Discharge, Detection and Elimination](#)
4. [Construction Site Runoff Control](#)
5. [Post-Construction Runoff Control](#)
6. [Pollution Prevention / Good Housekeeping](#)

For any questions or concerns regarding stormwater or to report illicit discharges to the storm sewer system please call the Towamencin Township Administration Building at (215) 368-7602.

There are many ways you can help the Township with its stormwater program and participate in volunteering programs that will keep trash, debris and other pollutants out of the storm sewer system. For more information on ways you get involved with your community, please visit the following site:

- [Adopt-A-Highway](#)

## Tips for Residents

- ☐ [Thirsty](#)
- ☐ [Catch Of The Day](#)
- ☐ [GRASSCYCLING](#)
- ☐ [RAIN GARDEN](#)
- ☐ [Canines For Clean Creeks](#)
- ☐ [Car Washing Information](#)
- ☐ [Septic System Information](#)
- ☐ [Winter Deicing Tips](#)
- ☐ [Vehicle Maintenance Tips](#)
- ☐ [Pet Waste Tips](#)
- ☐ [Fertilizing Tips](#)
- ☐ [Water Conservation Tips](#)
- ☐ [Solution To Pollution](#)
- ☐ [An Overview For Auto Recyclers](#)
- ☐ [Protecting Water Quality From Urban Runoff](#)
- ☐ [DEP Reminds Pool Owners To Handle Waste Water Safely](#)

☐ [New Guidelines For Swimming Pools](#)

## Tips for Contractors

- ☐ [Stormwater And The Construction Industry](#)
- ☐ [Stormwater Pollution Prevention](#)
- ☐ [When It Rains It Drains](#)
- ☐ [Stormwater And Runoff Primer](#)

## For More Information on Stormwater Management, Please Visit:

- [USEPA](#)
  - [Stormwater Basic Information](#)
  - [Stormwater Management Program](#)
  - [Stormwater Discharge From MS4's](#)
  - [Stormwater Outreach Materials and Reference Documents](#)
- [PA DEP](#)
  - [Stormwater Management Program](#)
  - [PA DEP Southeast Region Office](#)
- [\(MCCD\) Montgomery County Conservation District](#)
- [\(FEMA\) Federal Emergency Management Agency](#)
- [\(CWP\) Center for Watershed Protection](#)
- [The Perkiomen Watershed](#)

# **Appendix C:**

## **Environmental Advisory Council Minutes**

**Towamencin Township  
Environmental Advisory Council  
Minutes of the July 9, 2024 Meeting**

**Present:** Brett MacKay, Joseph (Joe) Meehan, Donna Hegge, Vanessa Gaynor, David McCreary, Kelly Bonsignore, Rich Costlow

Dave Kraynik- Township Supervisor  
Joyce Snyder- Board of Supervisors Representative  
Joe Silverman - Guest, Towamencin resident

Absent: Rory Kelley

1. Call to order: 7pm
2. Opening comments- no opening comments
3. Public Comments-Joe Silverman re Dark Sky. Joe indicates that the four street lights Bustard Rd/Sumneytown Pike are too harsh. He recommends 40 degree downlight to replace these lights to minimize the strength of the lighting. Perhaps hiring a bucket truck would be necessary to change the lights. Per ordinance, Street Level lighting needs to be globelights but Joe suggested installing a parabolic light inside the globe.
4. Approval of minutes David made a motion to and Vanessa seconded
5. Old Business
  - a. 2024 project updates - (Informational)
    - i. **No Mow** - Brett/Vanessa:
      1. Mary clarified that for the permit for the no-mow areas it can be mowed twice a year (spring and fall) and we could remove invasive weeds.
      2. General thoughts about no mow areas: Nut trees could be planted to reduce the thistle. Stormwater management needs taller growth to have deeper roots.
      3. Possible areas to target: Township front, Keebler Meadow, Pollinator Garden at Morgan Log House.
      4. Vanessa suggested that we identify and inventory the various areas in the township. David McCreary offered to go out and see what's out there and Vanessa offered to assist. DCNR has a list of invasive plants to assist to identify what is out there.
      5. Mary Stover, Township Engineer, and Jesse Kemper from Perkiomen Watershed Conservancy should be involved in making suggestions once areas to target are identified .

- ii. Annual State EAC Fall Gathering update (Rory)- tabled until next meeting
- iii. Dark Skies- Supervisor Kofi Osei checked the land development ordinances and it does mention globe lights. To change the lights for future development, ordinances would need to be rewritten. Brett indicated Planning Commission is working on that so that moving forward, new buildings would need to be Dark Skies compliant (lower than 90 degrees).

6. New Business

- a. Develop Agenda for Public Works Meeting- have a meeting to discuss areas of mutual environmental concern with Public Works and establish a working relationship between EAC & Public Works will create a document for EAC members to add suggestions for discussion. Dave K would like to attend as well.
- b. North Penn Area EAC Joint Letter to NPSD recommending LEED certification during high school renovation project- Donna made a motion to continue working with other EACs on draft letter. A formal vote on whether to sign the letter would occur at a later time after draft complete (additionally, at the suggestion of Dave K, at that time we would clarify that it's an EAC suggestion, not a formal action of township).. David seconded the motion. Motion carried.

7. Township Updates (Informational) - Dave/Colleen/Joyce- grants for MS4 project at Grist Mill retention basin submitted., Retrievr Recycling agreement to get some revenue for Towamencin is slow to get resolution.

8. Upcoming Events

- a. We Conserve PA EAC Conference - October 5, 2024 8am- 5pm at Temple U Ambler.

9. Any other business and closing

10. Adjournment- Donna made a motion to adjourn, Brett seconded at 8:21

11. Next meeting: August 13, 2024, 7pm

**Towamencin Township  
Environmental Advisory Council  
Minutes of the August 13, 2024 Meeting**

**Attended:**

Donna Hegge -Vice Chair *delayed*  
Vanessa Gaynor - *Meeting Leader*  
Brett MacKay  
Joseph Meehan  
Kelly Bonsignore  
Dr. Richard Costlow

Colleen Ehrle - Towamencin Dir. Admin.  
Joyce Snyder – Towamencin BOS Liaison

**Excused:**

Rory Kelley (Chair)

Dr. David McCreary

The meeting agenda is included as a reference appendix.

Agenda Item 1. Call to Order

The EAC meeting was called to order: 7:06 PM.

Items were added to AOB, agenda item 9.

Agenda Item 2. Opening Comments

There were no opening comments.

Agenda Item 3. Public Comments

There were no public comments.

Agenda Item 4. Approval of Minutes

Additions, corrections or deletions were entered on the on-line draft.

A motion to approve minutes as amended: Mr. Meehan;

Motion second: Mr. MacKay.

Passed without objection.

Agenda Item 5. Old Business

a. 2024 Project Updates

i. **No Mow**

Invasive species & appearance survey updates (species observed)

Kibler Meadow – Bradford pear, multiflora rose, other unspecified herbaceous invasives. This park was identified as needing removal of invasive shrubs and trees. Removal of herbaceous invasives would be extremely labor intensive due to the size of the area.

Fisher's Park – some unspecified invasives, but in general, acceptable at this time with continued monitoring and regular volunteer events to remove invasives.

Kriebel & Bustard Rds. - some multiflora rose, crown vetch, and other unspecified invasives. Generally, there are abundant herbaceous natives. The EAC recommendation would be removal of invasive shrubs and trees.

Kriebel Rd. Trails – significant bank erosion along Towamencin Creek. Bank stabilization was discussed then tabled to await additional information on possible solutions based on pending inventory.

Township Building (field) – consensus is that it is a good demonstration of concept opportunity. Plans would include an assessment of needs and objectives  
[a recommendation is needed from EAC for either a forest or a meadow as the preferred outcome; neither activity will adversely impact MS4 program; any program would liaise with Public Works; requisite information from EAC is not anticipated to be available by 24SEP2024 for a 2025 budget proposal; action is to develop a detailed plan for 2026 budget. OPTIONS CONSIDERED: mow X2 per year is a “low-tech, low-cost starter option”; soil removal & replacement would likely be the highest cost and would take the longest ; use of a burn-down broad-spectrum herbicide with or without a soil sterilant prior to re-seeding as appropriate was also considered; Mr. MacKay will research other possible processes for meadow creation at this location and report to EAC.

ii. Finalize Agenda for Public Works Meeting

Reference: PW draft meeting document is on the EAC on-line drive  
Add a discussion of training opportunities at PW possibly using PWC training. Consider adding PHS “Tree Tenders”. it would be a cost to Towamencin Township, but an on-line course is a possibility at a reduced cost. Encourage PW to investigate the on-line course, and add these two items to the PW meeting agenda. Action: Ms. Gaynor]. Invite Dave Kraynik and Dave Hillmantel [action: Rory Kelley]

Agenda Item 6. New Business

- a. Newsletter; due Friday 23AUG24. A discussion of a draft article prepared by Dr. Costlow for the OSPAC and possible joint submission by OSPAC and EAC. The draft focused on removal of invasive species. EAC supported removal of invasives, but was not in favor of encouraging personal efforts to remove invasives on Towamencin Township properties without instruction/supervision. The article will be submitted by the OSPAC after consultation with Dr. McCreary, and EAC will write a separate submission using suggestions from the EAC meeting [Action: Ms. Hegge].

b. **PWC Workshop**

Reference:

<https://www.perkiomenwatershed.org/for-municipalities>

Per Jessie Kemper of PWC, they have three options:

- 1) managing stormwater runoff (private property),
- 2) installing a rain garden, and

3) lawn-to-garden conversion.

Cost is \$5 per attendee, or an additional \$25 for the last 2 options if we elect to have attendees receive 3 native plants.

The EAC prefers the lawn to garden option with native plants and proposed subsidizing a maximum of 20 Towamencin residents \$15 of the \$30 registration fee.

EAC will reach out to PWC for dates of the workshop and put it in the Towamencin Township news [Action: Ms. Gaynor, Ms. Hegge].

Agenda Item 7. Township Updates (Informational)

- a. No relevant updates to report from the Township liaison or administration.
- b. EAC flag previously purchased was reported as looking good where it's been flown.

Agenda Item 8. Upcoming Events

- a. We Conserve PA EAC Conference  
Scheduled for October 5, 2024, 8am- 5pm at Temple Univ. Ambler Campus. It was noted this is a Jewish calendar holiday (Rosh Hashanah) which may influence overall attendance. EAC does not plan to make a presentation; EAC member attendance will likely be modest. Registration not yet open.

Agenda Item 9. Any other business and closing

- a. Comment on water quality binder. Dr. Costlow indicated a binder on EPA-validated procedures and methods for measurement of water quality was made available to him [official title: Pennsylvania Senior Environmental Core Service, water quality monitoring Field Manual]. EAC decided to ask Towamencin Township if there was any interest. The document will be circulated to PW for comment/disposition [Action: Ms. Ehrle].
- b. Comment on Towamencin population. Dr. Costlow indicated that of Towamencin's population, 35% are over age 50. In contrast, the population of ages 10-19 is 13%. This dynamic is projected to persist and EAC should consider it when planning activities and policies for Towamencin Township.
- c. **Bird Town, PA** – Ms. Gaynor presented information on a non-profit group called Bird Town Pennsylvania. Reference <https://birdtownpa.org/> . They are dedicated to cooperatively promote community-based conservation actions to create a **healthier, more sustainable environment** for birds, wildlife, and people. They are aligned with the objectives of the EAC. There is a 4-stage certification plan for townships [Upper Moreland was the first Bird Town] with increasing accomplishments required for each level. EAC will survey for citizen interest [Action: Mr. Meehan to contact Andrew Dolan-who has previously hosted bird walks at Fischer's, Ms. Gaynor to share registration info with EAC, Ms. Snyder to survey Supervisors for interest], and will investigate the certification requirements.
- d. Letter to NPSD (from previous meeting agenda). EAC voted to participate in preparing draft, not to sign the draft letter (vote would occur once draft



is final). There has been no further action on the draft letter that EAC is aware of. A discussion of LEED certification of the high school renovation ensued. No action was taken at the meeting. Action: Mr. Kelley update status of the letter.

- e. Parking on Kriebel Rd across from Fisher's Park was discussed. The space is not approved for parking, but some individuals use it, unauthorized, for park activities. Safety is an issue.

Agenda Item 10. Adjournment

- a. Motion to adjourn – Ms. Bonsignore  
Second – Mr. Meehan  
Passed without objection.

Action Items noted:

- Research processes to create meadow at Township Building – Brett MacKay
- Add items to the PW meeting agenda -Vanessa Gaynor
- Invite Dave Kraynik and Dave Hillmantel to EAC – - Rory Kelley.
- Write EAC article for Towamencin Newsletter - Donna Hegge
- Contact PWC for dates of the workshop; put them and the \$15 citizen rebate in the Towamencin Township news – Vanessa Gaynor and Donna Hegge.
- Circulate the water quality field manual to Towamencin Township for disposition – Colleen Ehrle
- EAC survey for interest in Bird Town Certification
  - Contact Andrew Dolan as birder's rep - Joe Meehan
  - Share Bird Town registration info with EAC – Vanessa Gaynor
  - Survey Supervisors for their interest - Joyce Snyder
  - Investigate the Township's certification requirements – Joyce Snyder
- Update EAC on status of the NPSD draft letter - Rory Kelley

Next meeting: September 10, 2024, 7:00 PM

**Towamencin Township  
Environmental Advisory Council  
Minutes for the September 10th, 2024**

Present: Rory Kelley, Joe Meehan, Donna Hegge, Vanessa Gaynor, Kelly Bonsignore, Rich Costlow, Dave McCreary

Dave Kraynik- Township Supervisor

Joyce Snyder- Board of Supervisors Liaison

1. Call to order- 7pm
2. Opening comments- no opening comments
3. Public Comments- no public
4. Approval of minutes- Rory proposed we postpone approval of the minutes until next meeting, Vanessa seconded
5. Old Business
  - a. 2024 project updates - (Informational)
    - i. **No Mow inventory update**- Brett/Vanessa- finish inventory this month. Brett is investigating info on meadow. David reached out to Wissahickon Watershed Conservancy and the River Trail and native habitat. Inquired how to achieve that signage.
    - ii. Finalized agenda for future meeting with D Hillmantel, Public Works
      1. Overview of Public Works department staff & responsibilities
      2. Environmental challenges township & Public Works faces
      3. EAC goals for environmental stewardship (township & community)
      4. Opportunities for Public Works staff training
      5. Ongoing partnership between EAC and Public Works
    - iii. **PWC Workshop- On November 14, the Lawn to Garden workshop will be offered to township residents.** Towamencin and the PWC will offer the workshop for \$30 for 20 township residents. \$200 for PWC staffing, and \$15 will be subsidized by the EAC.
    - iv. NPHS renovation letter- Local EACs (Lansdale, Towamencin, and Upper Gwynedd) are making recommendations for environmental impact on high school renovations, especially regarding stormwater runoff. Rory will further edit the

letter, get approval from the Towamencin EAC members, present to the other EACs for approval of the others before it's sent to North Penn Administration.

- v. **Birdtown PA**- Health of bird population is an indicator of the health of the ecosystem. \$100 registration, 3 people committee to provide an annual report. Could be under the EAC as we are already doing many of the requirements. Participating in Birdtown could increase outreach into the community and provide education. Perhaps Andrew Dolan would be interested as he provides bird walk opportunities in Fischer's Park. Motion to propose for application Vanessa, Donna seconded. Vote carried.

#### 6. New Business

- a. **Pollinator Palooza**- Journeywork work on lawn conversions, would like advertising and perhaps funding. We will advertise through the township newsletter, and inquire more about their services.
- b. Budget discussion ('24 and '25)- donate \$500 to We Conserve Conference. Motion by Vanessa, seconded by Donna. All in favor

- 7. Township Updates (Informational) - Dave/Joyce- **Retrievr recycling** agreement will be signed tomorrow night. Township is planning dome lights replacement with bulbs with lower lumens (when bulbs need to be replaced) to be more in compliance with Dark Skies.

#### 8. Upcoming Events

- a. We Conserve PA EAC Conference - October 2024 [Registration Page](#)

- 9. Adjournment Kelly motioned, Vanessa seconded 8:56pm

- 10. Next meeting, October 8th, 7pm.

**Towamencin Township  
Environmental Advisory Council  
Agenda for the October 8th, 2024 Meeting**

**Present:** Rory Kelley, Brett MacKay, Vanessa Gaynor, David McCreary, Kelly Bonsignore  
Rich Costlow- Associate Member  
Joyce Snyder - Board of Supervisors Liaison  
Colleen Ehrle- Director of Administration

**Absent:** Joseph (Joe) Meehan  
Donna Hegge

1. Call to order, 7:02pm
2. Opening comments- 2nd associate member plans to be interviewed tomorrow. Not confirmed.
3. Public Comments- none
4. Approval of minutes: August minutes- motion to approve Kelly, David McCreary seconded  
September minutes- motion to approve with corrections: Rory, David McCreary seconded
5. Old Business
  - a. 2024 project updates
    - i. **No Mow inventory update-** Brett/Vanessa- David and Vanessa have one more site to visit. Still sensible to use Township building to start due to the amount of thistle. Property owners are required to control the spread of thistle, as per township ordinance. Meadow revitalization is recommended for the township front. When the Veterans Memorial Park becomes a park so it would no longer be a No Mow and another area would need to be identified.  
BeeandButterflyFund.org recommends an organic, year and a half long process for creating a Meadow. Bradford and Callery Pears and thistle need to be eliminated with chemicals using DCNR for best practices. Need to talk to Public Works for what is feasible, with a plan for continued maintenance. Funding and manpower maintenance could be an issue. The goal is less expense and less maintenance. Mary Stover is willing to brainstorm ideas and do site visits later this month to apply for the 2025 PWC \$5000 grant. The Anders Road area may be a good area to control stormwater and meadow maintenance.
    - ii. Public Works Meeting- Rory will let us know when the meeting with Public Works and Dave Kraynik will be.
    - iii. NPHS renovation letter- Energy Star Certification could be a more attainable goal during the renovations, compared to LEEDS certification. Energy Star Certifications requires a Professional Engineer to verify. Aspects of both environmental measures are beneficial and feasible. After approval of the letter with the other EACs, Rory will discuss with EnAct and offer them support for their initiative. Plans for voting on the letter in November.
    - iv. **Birdtown PA-** To move forward, the committee plans to speak with Dave about approval. January board meeting is the target date. \$100, registration form, to formalize the committee. Report submitted annually. The township board needs to formally approve a resolution for Birdtown. Rory made a motion for EAC to approve a birdtown subcommittee. Vanessa seconded.
  - b. Budget discussion ('24 and '25)- Reviewed 2024 expenditures to date.
6. New Business

a. We Conserve PA EAC Conference review- Vanessa attended three workshops, parking reform and environmental impacts; energy audit on the township buildings; meadow conversion in Lansdale. She will share the slides when she receives them.

7. Township Updates- Colleen shared that Retreivr was finally signed and our township is on the site now to publicize it. Board of Supervisors will be advertising a new recycling ordinance for recycling performance grant adjustment. There's a new coordinator for the county.

8. Upcoming Events

a. Electronics Recycling Collection by Pennsylvania Resources Council - White's Road Park - Thursday, October 10 (9am - 1pm)

b. NPHS EnAct Electronics Recycling November 9th (10am-1pm)

c. PWC Workshop - Converting Lawn To Garden - November 14, 2024 (6:30-7:30)

9. Any other business and closing

10. Adjournment Rory made a motion to adjourn, Brett seconded it. Meeting adjourned at 9:22pm

11. Next meeting November 12, 2024 at 7pm

**Towamencin Township  
Environmental Advisory Council  
Minutes of the November 12, 2024 Meeting**

**Present:** Rory Kelley, Joseph (Joe) Meehan, Donna Hegge, Vanessa Gaynor, David McCreary, Richard (Rich) Costlow, Michael (Mike) Bush

David Kraynik – Township Manager

Casey Adams, Jim Dunn and Bruce Bailey - Guests, Towamencin residents

**Absent:** Kelly Bonsignore, Brett MacKay

1. Call to order: 7:01 pm
2. Opening comments: Associate Member Mike Bush was confirmed by the Board of Supervisors (BOS).
3. Public Comments: Jim asked about the Converting Lawn to Garden workshop.
4. Minute Approval: Vanessa made a motion to approve the October Minutes with corrections and David M. seconded the motion. Motion approved.
5. Old Business:
  - a. 2024 Project Updates
    - i. **No Mow Area**- Vanessa gave overview of issues and suggested that the no-mow areas be divided into the Township Building Meadow Restoration Area and the Perkiomen Watershed Conservancy (PWC) Grant Areas. Mary Stover of CKS Engineers is willing to brainstorm and do site visits to apply for the 2025 PWC \$5000 grant.
    - ii. Public Works Meeting – Rorey will let us know when the meeting will be with Public Works and David K.
    - iii. **Birdtown PA** – Registration fee of \$100 is in the EAC 2025 budget. Committee to prepare presentation for January BOS meeting asking BOS to approve a resolution supporting Birdtown. Joe suggested Kibbler Meadow for bird habitat; although Callery Pear and Multiflora Rose will need to be controlled.
  - b. Budget Discussion – Draft 2025 budget reviewed. Draft budget to be approved by BOS on 11/13, final budget to be voted on by BOS on 12/11. Vanessa to order 2<sup>nd</sup> feather flag for EAC. A motion was made by Rory and seconded by David M. to allocate up to \$2,000 on trees. Motion approved.

6. New Business:

a. 2025 Goals/Planning –

- i. Birdtown – Vanessa to lead (see above)
- ii. PWC MS4 Stormwater Grant – Donna to lead, 5/2025 submittal
- iii. Township Building Meadow Restoration – Brett and Vanessa to lead
- iv. Invasive Species Removal – discuss at December meeting
- v. PWC Stream Cleanup – EAC will provide education, but EAC will not be a site leader
- vi. Towamencin Day on 5/10 – EAC to invite environmental vendors, Rich to look into tree saplings, David M. to lead invasive species removal
- vii. Workshops – Rory to lead, PWC workshop for children
- viii. Journeyworks – discussing meeting with them at December meeting
- ix. Newsletter Articles - discuss at December meeting

7. Township Updates: David K. indicated that the 2025 budget is acceptable and that the agreement with Retrievr is done.

8. Upcoming Events:

a. Converting Lawn to Garden Workshop- 11/14

b. Towamencin Day – 5/10

9. Other Business:

- a. Comprehensive Plan Meeting – Simone & Collins updating the Comprehensive Plan, EAC should attend on 11/21 at 7 pm at the Township Building
- b. GIS Mapping – PWC has GIS mapping, David M. asked for stormwater basin GIS, PWC to put together Perkiomen Mapping and Flood Mitigation Study
- c. Informal EAC gathering with Lansdale, Upper Gwynedd and Montgomeryville – 11/14 at 7 pm at Imprint

10. Adjournment: 8:40 pm.

11. Next Meeting: 12/10 at 7 pm.

Respectfully submitted by Donna Hegge, Vice Chairperson

**Towamencin Township  
Environmental Advisory Council  
Minutes of the December 10, 2024 Meeting**

**Present:** Joseph (Joe) Meehan, Vanessa Gaynor, Brett MacKay, Richard (Rich) Costlow, Donna Hegge

Joyce Snyder – Township Supervisor

Andrew Dolan and Bruce Bailey - Guests, Towamencin residents

**Absent:** Rory Kelley, David McCreary, Kelly Bonsignore, Michael (Mike) Bush

1. Call to order: 7:00 pm
2. Opening comments: None.
3. Public Comments: Bruce commented that he is impressed with the tree plantings along the Kriebel Road Trail.
4. Minute Approval: Vanessa made a motion to approve the November Minutes and Joe seconded the motion. Motion approved.
5. Old Business:
  - a. 2024 Project Updates
    - i. **No Mow Area**- Brett indicated that the next step is to meet with David Hillmantel from the Public Works Department to discuss the Township Building Meadow Restoration Area.
    - ii. **Converting Lawn to Garden Workshop** – Vanessa and Rich attended the workshop along with 15 residents. They indicated that Jessie Kemper gave an interesting presentation.
    - iii. **Birdtown PA** – Vanessa indicated that the committee is working on the application and a presentation for the Board of Supervisors (BOS) meeting on the 2<sup>nd</sup> or 4<sup>th</sup> Wednesday in January. Joyce asked to be given notice of the presentation 7 days prior to the BOS meeting.
  - b. Budget Discussion – The funds remaining in the 2024 budget were used to purchase a 2<sup>nd</sup> feather flag and trees to be planted in the Township.
6. New Business:
  - a. Towamencin Comprehensive Plan – EAC-related items.



- i. Energy Conservation and Stormwater Management – Draft plan to most likely be submitted in January. The draft plan may propose changes to ordinances. The review of and comment on the plan will be added to the list of 2025 Goals.
  - b. Review Document summarizing 2024 and 2025 planning – For the Tree Tenders, Joe is taking the class in January, Rich and Bruce are already Tree Tenders. Rich indicated that he hopes the EAC can support another member, as well as residents, to take the class in 2026.
  - c. Journeywork demonstration pollinator garden – Journeywork is looking to get a PA Native Plant Society grant. Rory to meet with Molly from Morgan Log House so that the EAC can be the connection between the Morgan Log House and Journeywork.
7. Township Updates (Informational): Joyce had no Township updates.
8. Upcoming Events:
- a. Towamencin Day – 5/10/2025
9. Any Other Business and Closing: No other business.
10. Adjournment: 8:54 pm.
11. Next Meeting: 1/14/25 at 7 pm.

Respectfully submitted by Donna Hegge, Vice Chairperson

**Towamencin Township  
Environmental Advisory Council  
Minutes of the January 14, 2025 Meeting**

**Present:** Rory Kelley, David McCreary, Kelly Bonsignore, Joseph (Joe) Meehan, Vanessa Gaynor, Donna Hegge

Joyce Snyder – Township Supervisor

Colleen Ehrle – Township Director of Administration

Bruce Bailey - Guests, Towamencin residents

**Absent:** Brett MacKay, Richard (Rich) Costlow, Michael (Mike) Bush

1. Call to order: 7:10 pm
2. Opening comments: None.
3. Election of Officers: Chair – Rory, Vice Chair – Donna, Secretary – Kelly, Treasurer - David
4. Public Comments: None.
5. Minute Approval: Joe made a motion to approve the December Minutes as revised and Vanessa seconded the motion. Motion approved.
6. Old Business:
  - a. 2024 Project Updates
    - i. **Birdtown PA** – The committee will have a virtual meeting on 1/22/25 at 7 pm. The committee is working on the application and a presentation for the Board of Supervisors (BOS) meeting on 2/25/25. Send the presentation to Colleen the Friday before the BOS meeting.
    - ii. **No Mow** - EAC members met with Public Works. Public Works is supportive of maintaining an improved No Mow area at the Township Building. Public Works will not use their pesticide application certification to apply herbicide to thistle. The EAC will need to hire someone to apply herbicide. A brush hog is the correct equipment to mow the No Mow area once a year. Township does not own one; capital request would need to be submitted to purchase one. Jenkins Arboretum is a good example of a native landscape. Steps for Township Building No Mow Area: 1) Determine ecosystem desired. 2) Obtain Perkiomen Watershed Conservancy (PWC) recommendations. 3) Develop construction plan. 4) Eliminate invasives in autumn 2025. 5) Implement planting plan.

- iii. **Morgan Log House (MLH) Demonstration Pollinator Garden** - EAC members met with Molly from MLH in December and discussed having Public Works spray herbicide and turn over the area of the pollinator garden, then plant seeds and plant plugs. Also discussed moving the beehive to the kitchen garden. MLH volunteers will maintain the pollinator garden. Molly can help find grants to fund this project. Journeyworks more interested in doing project in grassy area adjacent to the stream, they will decide if they want to collaborate on pollinator garden project. EAC members to meet with MLH and Journeyworks on 1/17/25 at 10 am.
- iv. Towamencin Comprehensive Plan - Draft plan to be issued soon. EAC to review and comment on EAC related sections. Comment period ends 3/12. EAC members should review the draft plan and be ready to discuss at the February EAC meeting.
- v. Towamencin Day (5/10/25) - Rory has started inviting environmental groups.
- vi. **Invasive Species Removal - Resident volunteers to be led by David on 4/19/25 from 10 am - 2 pm. David has supplies. Short education session followed by hands-on removal.**
- vii. MS4 Workshops - PWC Stormwater Management Workshop, possible Master Gardener Bluebird House workshop for children, possible tree planting workshop by Tree Tenders group, possible lawn conversion workshop by Journeyworks.
- viii. Project Plan – Rory has a document outlining 2025 plans
- ix. PWC Municipal Grant – Donna to invite CKS Engineers to February meeting to discuss No Mow and possible PWC Municipal Grant projects.
- b. Budget Discussion – 2025 budget is \$4,100.
- c. 2024 Report - Rory developing the report to submit to Board of Supervisors, as recommended in WeConserve EAC Handbook

#### 7. New Business:

- a. Spring Newsletter Topics - David will prepare articles on fabric recycling and dark skies. Rory to prepare an article on upcoming EAC activities. An article on proper disposal of yard waste will be prepared for the fall newsletter.
- b. **Public Works Meeting Recap - Public Works would appreciate the EAC's help to educate residents on yard waste disposal. Public Works is interested in providing Tree Tenders and other training to its staff.**

#### 8. Township Updates (Informational):

- a. Old Forty Foot Road Townhouse Development - Joyce informed the EAC that the old Bird Farm is to be developed into townhouses.

9. Upcoming Events:

- a. Newsletter Deadline - 2/14/25
- b. Invasive Species Removal - 4/19/25
- c. PWC Stream Clean-up - 4/12/25
- d. Towamencin Day – 5/10/2025

10. Any Other Business and Closing: No other business.

11. Adjournment: At 9:20 pm

12. Next Meeting: 2/11/25 at 7:00 pm

Respectfully submitted by Donna Hegge, Vice Chairperson

**Towamencin Township  
Environmental Advisory Council  
Minutes of the February 11, 2025 Meeting**

**Present:** Rory Kelley (late), David McCreary, Kelly Bonsignore, Joseph (Joe) Meehan, Vanessa Gaynor, Donna Hegge, Rich Costlow, Brett MacKay, Mike Bush

Joyce Snyder – Township Supervisor

David Kraynik – Township Manager

Bruce Bailey - Guests, Towamencin residents

Mary Stover- Township Civil Engineer

1. Call to order: 7:04 pm
2. Opening comments: None.
3. Public Comments: None.
4. Minute Approval: Joe made a motion to approve the January Minutes as revised and Vanessa seconded the motion. Brett abstained. Motion approved.
5. Old Business:
  - a. 2024 Project Updates
    - i. **Birdtown PA** – This week the resolution will be sent to Colleen and Dave for approval at the February 25 Board of Supervisors meeting. Three dates will be booked for public Birdtown meetings. The dates are April 10th, June 12th, September 11, 2025.
    - ii. **No Mow** - The process for the front of the township building will include low-mowing, herbicide application to kill invasive canada thistle, then placement of mulch. Timing is to eliminate invasives in autumn 2025. Determine cost this year, including overseeding, plugs, and trees. Obtain 2 or 3 quotes from landscapers to place herbicide, chip drop and spread. Current 2025 budget for all EAC projects is \$4,100. Some options for trees are white oak, black locust, for shade, beauty and a pollinator. Tree Tenders could promote trees in the No Mow area. It's important to keep the public informed with signage, "Future Site of", and to let the church know of the herbicide and the goal of Open Space and Environmental Friendliness.
    - iii. **PWC Municipal Grant**- May 1st is the application deadline. **Consideration for a rain garden at Bustard Road**. It has water run-off onto the field that impacts local residents. It would be beneficial to create a vegetative swale or a rain garden near the powerline. Donna will walk through with Mary to consider other possibilities or confirm. The stream bank restoration would be much more

expensive and black willow trees could inhibit erosion. Another option is Fischer's rain garden but Jessie said it's functioning. We could overseed and remove thistle at a future nature walk.

- iv. **Morgan Log House (MLH) Demonstration Pollinator Garden** - EAC members met with Molly three times. Her goal is to excavate to get to the archaeological remains under the pollinator garden. She wants to scrape away grass to expose the building. We would relocate the flower garden to the patch of grass in front of the gated area. Journeyworks can assist with grants as it would go from grass to garden. Cardboard or lasagna mulch will be used this fall. The township will write a letter of support to present for approval at the April 15th meeting. The bees will stay in the excavated area.
- v. Towamencin Comprehensive Plan - Draft plan has been issued. EAC to review and comment on EAC related sections. Comment period ends 3/12. EAC members should review the draft plan and provide input by MARCH 4th. Rich will collate the comments.
- vi. Spring Newsletter Topics - David prepared an article on dark skies. Vanessa prepared an article on upcoming EAC activities. An article on proper disposal of yard waste will be prepared for the fall newsletter.
- vii. 2024 report - no report

#### 6. Township Updates - June 14th Electronic Recycling at NPHS

#### 7. Upcoming Events-

- a. **Invasive Species Removal - 4/19/25 from 10 am - 12 pm. David will lead volunteers to remove canada thistle from the rain garden as Fischer's. He has supplies. Short education session followed by hands-on removal.**
- b. **PWC Stream Cleanup- 4/12/25 - PWC will include local sites, such as Towamencin Creek near pool and Fischer's Park.**
- c. **Towamencin Day (5/10/25) - PWC, Journeyworks, other EACs, EnAct, Bird Town. A bluebird house can be raffled. EAC member coverage to be discussed at the March meeting.**

6. Any Other Business and Closing: No other business.

7. Adjournment: At 9:10 pm

8. Next Meeting: 3/11/25 at 7:00 pm

Respectfully submitted by Kelly Bonsignore, Secretary

**Towamencin Township  
Environmental Advisory Council  
Minutes of the March 11, 2025 Meeting**

**Present:** Rory Kelley, David McCreary, Kelly Bonsignore, Joseph (Joe) Meehan, Vanessa Gaynor, Donna Hegge, Rich Costlow, Brett MacKay, Mike Bush  
Joyce Snyder – Township Supervisor  
Colleen Ehrle– Township Director of Administration  
Bruce Bailey, Casey Hennings - Guests, Towamencin residents

1. Call to order: 7:04 pm
2. Opening comments: None.
3. Public Comments: Township resident expressed concern regarding the sale and building of current Freddy Hill and Walton farm properties. Joyce's response was that the township has no jurisdiction on private property sales of land. The 140 acres of properties are zoned for residential building (R175). Houses will bring tax revenue. Hopefully the builders will build homes closer together under the possible zoning change being reviewed by the Planning Commission for a conservation overlay for cluster housing, to allow for more open spaces and pathways.
4. Minute Approval: Vanessa made a motion to approve the February Minutes and Brett seconded the motion.
5. Old Business:
  - a. 2025 Project Updates
    - i. **No Mow** - The area in front of the township building is about 10,022 square yards and therefore mulch to suppress canada thistle is not feasible. Virginia, from Penn State extension who is also a master gardener, was consulted and suggested using triclopyr to manage the thistle and crown vetch. Northern sea oats by seed, and plugs can be planted to grow in place of the invasive plants. The plan is to apply herbicide, mow, seed decorative sea oats in the center, place more decorative plants in the outer perimeter, and leave the trees as they are there. Master gardener will volunteer for consultation. A request will be written to the PA State Extension for planning support. We will need the township to approve a plan before any action occurs. David M will prepare a plan for EAC consideration . We proposed using the township newsletter to publicly communicate an overview of the plan and timing; this will require Township

cooperation This late spring will begin with the mow, and herbicide. Second treatment is expected in September or October. The plan is three years.

- ii. PWC Municipal Grant- application deadline is May 1st.. Donna and Mary will take a look to consider a rain garden at Bustard Road. It has water run-off onto the field that impacts local residents. It would be beneficial to create a vegetative swale or a rain garden near the powerline.
- iii. Morgan Log House (MLH) Vanessa said that Journeywork can help convert the grass in front of the existing beehive garden to meadow. The C2P2 grant Journeywork is applying for will be work in 2026. The process will begin with grass smothering in the spring followed by planting and watering new gardens in the fall. Morgan Log House will need assistance with watering from Public Works in fall and occasionally in spring/summer the following year until the garden is established. The current pollinator garden inside the fence that is overrun by crown vetch will be dug out by Public Works to expose archaeological remains of the original barn. Grant would also provide education support and free 'lawn conversion' kits with native plants for residents over several years.
- iv. Towamencin Comprehensive Plan - EAC members provided input to contribute to feedback regarding environmental perspective.
- v. Towamencin Day - (5/10/25) - PWC, Journeyworks, other EACs, EnAct, Bird Town. A bluebird house can be raffled. Bruce and Dave will make birdhouses.
- vi. Workshops - can be determined through email
- vii. 2024 report - not reported at meeting

6. Bird Town Subcommittee – Township participation in Bird Town Pennsylvania was approved at Towamencin Board meeting in February. Township application was accepted by Bird Town Pennsylvania outreach committee. The program will provide two street signs and we have a budget for more signs. Three dates for the public meetings are April 10th, June 12th, September 11, 2025.

## 7. Upcoming Events-

- a. NPHS EnAct Spring event (Plant Sale and Hop into Spring for kids) - 4/5/25
- b. PWC Stream Clean-up - 4/12/25 includes local sites, such as Towamencin Creek near the pool and Fischer's Park.
- c. Invasive Species Removal - 4/19/25 10 am - 12 pm
- d. Towamencin Day – 5/10/2025 12 pm - 4 pm
- e. Electronics Recycling at NPHS



8. Next Meeting: 4/8/25 at 7:00 pm
9. Other business - 30 day expiration of burn ban from fall 2024 discussed
10. Brett motioned to adjourn, Dave seconded the motion. Meeting adjourned at 9:23pm.

Respectfully submitted by Kelly Bonsignore, Secretary

**Towamencin Township  
Environmental Advisory Council  
Minutes of the April 8, 2025 Meeting**

**Present:**

EAC members: Rory Kelley, David McCreary, Kelly Bonsignore, Joseph (Joe) Meehan, Vanessa Gaynor, Donna Hegge, Rich Costlow, Brett MacKay

Township Manager: Dave Kraynik

Towamencin residents: Bruce Bailey, Casey Hennings, Corina Fiore, Kimberly Libby, Jenn Foster

1. Call to order: 7pm

2. Opening comments:

3. Public Comments: Public concern regarding Freddy Hill sale, especially from a stance of open space, recreation, and being near creek tributary.

4. Approval of minutes- Joe Meehan approved the minutes, Brett seconded. Minutes were approved.

5. New Business

a. America 250 Committee- In preparation for the 250 anniversary of the USA- representative from our committee, needed by the end of April. Each township committee requested to have a member.

b. Feral Cat Ordinance discussion- Jenn Foster talked about the feral cat issue at Towamencin Condominium. The cats pose a danger to the local environment. She would like an ordinance to permit TNR (trap, neuter, and release). Towamencin Condominium HOA doesn't permit TNR in place and an ordinance would be beneficial to contribute to the township safety as well being in alignment with Bird Town. Stray Cat Blues could assist. Dave K would like more information from township perspective. Jenn suggested offering traps from the township for the public to use. The police or an Animal Control Agent would be necessary to ensure compliance. Township would be included in the discussion for enforcement. Benefit to TNR is to slowly reduce the cat colony and prevent another colony from coming in. If the cat is able to be socialized, that would be preferred to releasing. Bird Town goals include educating and creating ordinances regarding stray and feral cats. Concern for environment when releasing the cats was discussed. Plan to talk to other townships with other Bird Town committees who have these ordinances.

6. Old Business

a. 2025 projects

i. **No Mow**- Regarding the area in front of the township building, the EAC will get a quote for the herbicide two times this year. Bruce will assist in getting quotes.

ii. PWC Municipal Grant- Donna and Mary met at Bustard Road Park to look at the potential site for a 75 foot long swale. The area backs up to a resident and the water goes into

the neighbor's yard. Jessie Kemper from PWC will meet with Donna to provide feedback for the validity of the project for the grant, by May 1. Need to talk to Public Works to get them to help with moving dirt to prepare space for the swale. Volunteers from the township can help with the PWC.

iii. Morgan Log House Demonstration Pollinator Garden- Journeywork has submitted the DCNR C2P2 grant to the state. Township has agreed to support by watering the native plants in the fall and providing marketing for resident education. Grant will be reviewed in 2025 for implementation starting 2026.

iv. Towamencin Day- May 10th 12-4p. 10:30am set up. Bruce and Rich are planning to plant a tree at Fischer's. Journeywork and EnAct will join the EAC and Bird Town tables. PWC could possibly come. Giveaways include birdhouses and a pollinator set from Journeywork

v. Workshops- Rory to investigate another Rain Barrel workshop. Dave can give a workshop on natural lawn conversion and native plants. Corina Fiore offered to do a children's workshop. She will come up with a proposal for an educational workshop.

vi. 2024 report- No discussion during the meeting

#### b. Budget

7. Bird Town PA Subcommittee- committee met with Heidi Shiver a few weeks ago to review resources and annual reporting. She recommended we focus on three projects this year. First public meeting will be this Thursday, at 7pm to introduce Bird Town and determine the projects. The street signs for the township will be presented by Bird Town PA during the April 23rd supervisors meeting .

8. Township Updates (Informational) - Dave/Colleen/Joyce-The EAC met with Public Works in December 2024 to ask how they can assist public works with environmental education. Public Works reported that some people dump leaves into the creeks. Mary Stover would be aware of issues for her MS4 report. A newsletter could provide information to educate people about how to prevent flooding.

#### 9. Upcoming Events -

a. PWC Stream Clean-up - 4/12/25

b. Invasive Species Removal - 4/19/25 9 am - 12 pm

c. Towamencin Day – 5/10/2025 12 pm - 4 pm

d. Electronics Recycling at NPHS 9-12 June 14, 2025

#### 10. Any other business and closing

11. Adjournment Brett, proposed adjournment; Donna seconded at 8:53pm.

12. Next meeting May 13, 2025 at 7pm at Township Building

**Towamencin Township  
Environmental Advisory Council  
Minutes of the May 13, 2025 Meeting**

**Present:**

EAC members: Brett MacKay, David McCreary, Donna Hegge, Joseph (Joe) Meehan, Rich Costlow, Rory Kelley, Vanessa Gaynor

Board Liaison: Joyce Snyder

Towamencin residents: Bruce Bailey, Corina Fiore, Stacy Spizziri

1. Call to order: 7pm
2. Opening comments: Rory requested attendees to avoid side conversations until the adjournment of the meeting
3. Public Comments: None
4. Approval of minutes- Brett motioned to approve the April 2025 minutes, Joe seconded. All voted in favor. Minutes were approved.
5. **Bird Town PA Subcommittee:** Vanessa reviewed list of completed projects so far, including information sharing at the EAC Invasive species removal in April and tabling at Towamencin Day. Reception at Towamencin Day was positive and the committee gave out 10 birdhouses. A bird walk is planned at Fischer's Park on June 14 at 7:30 AM. Potential future projects include a bird house building workshop and native plant sale. Bruce Bailey is contacting other Bird Towns that have municipal ordinances regarding feral cats. 2 street signs will be posted by Public Works soon. Discussion occurred regarding Bird Town PA's budget. Rory indicated that the subcommittee can allocate the remaining \$300 to street signs, and any other costs can come from EAC budget (for operational needs and bird house building workshop).
6. New Business
  - a. America 250 Committee- This is a township committee helping to prepare for the 250 anniversary of the USA. The Board of Supervisors has requested a representative from EAC. No volunteers at this time.
7. Old Business
  - a. 2025 projects

i. **No Mow**- Bruce and Dave solicited bids from 3 companies and 2 vendors provided quotes. Vendors and quotes were discussed. The EAC decided to recommend Weeds Inc rather than a general landscaper due to Weeds Inc's specific knowledge base and experience working on naturalization projects at environmental conservation areas in Southeastern PA. Quote was \$2,300 and includes 3 treatments this year. Treatments will be customized based on the company's assessment of the vegetation. After the last treatment in the fall, the area will be overseeded with native northern oat grass to outcompete remaining invasives and provide deep root structure. Quote does not include seeding, but EAC will obtain a quote for that. If the quote is not favorable, seeds can be purchased in bulk for about \$250 and seeded by volunteers. In 2026, the area will be assessed to determine if another treatment is required. Plans for 2026 and 2027 could include adding diverse native plants around the perimeter, mown paths, trees in center, and bird houses. Project will be presented at the May 28th Board of Supervisors meeting for approval of the project and spending.

ii. **Towamencin Day** - The mini-environmental fair at Towamencin Day was successful. Tables included EAC, Bird Town PA, journeywork, and North Penn High School ENACT club. Rory would like the township to send thank you letters to the high school volunteers. Next year consider doing some of the giveaways half way through the event. At the EAC table, families enjoyed making native seed bombs. The EAC distributed 72 native seedlings. A tree was planted by Bruce and Rich. 6 individuals signed up for converting part of their lawn to native gardens with journeywork, and EAC will subsidize half the price as part of the planned budget line for lawn conversion. In the future, EAC would like to consider participating in joint events with other local EACs outside of Towamencin Day.

iii. **PWC Municipal Grant**- Donna met with Jessie Kemper of Perkiomen Watershed Conservancy (PWC) for a site visit of the potential swale location within Bustard Road Park. Donna submitted the municipal grant application to the PWC. Jessie indicated that the project will also be considered for a separate North Penn Water Authority grant. Donna will coordinate any questions from PWC for Public Works. If the grant is approved, Towamencin will need to provide volunteers for the install.

iv. **Workshops**- EAC will support Bird Town PA bird house workshop. David will run a workshop with a presentation on permaculture with plant

giveaways. Resident Corina Fiore will run a stream water survey workshop for children at Fischer's Park in July or August. She will coordinate with the township for signups and waivers.

v. 2024 report- Rory will submit the prepared report to the township.

b. Budget- Budget was reviewed.

8. Township Updates (Informational) - Dave/Colleen/Joyce- Joyce advised that the new Supervisor, Amer Barghouth, will be sworn in on Wednesday, May 14.

9. Upcoming Events -

a. Bird Town PA meeting June 12th at 7 pm

b. Bird Walk June 14th at 7:30 AM

c. Electronics Recycling at NPHS 9-12 June 14, 2025

10. Any other business and closing: Rory advised that the feral cat ordinance will be discussed at the June meeting. Rory also requested that future tree plantings be 100% native when the EAC is involved, to support native wildlife and ensure we are not introducing species that are either invasive, do not help local wildlife, or are not on the PA Native Tree list.

11. Adjournment: The meeting was adjourned at 8:42 PM.

12. Next meeting June 10, 2025 at 7pm at Township Building

**Towamencin Township  
Environmental Advisory Council  
Minutes of the June 10, 2025 Meeting**

**Present:**

EAC members: Brett MacKay, David McCreary, Donna Hegge, Joseph (Joe) Meehan, Rich Costlow, Rory Kelley, Vanessa Gaynor, Corina Fiore

Board Liaison: Joyce Snyder

Towamencin residents: Bruce Bailey, Casey Hennings

1. Call to Order: 7 pm
2. Opening Comments: Rory Kelly called the meeting to order and announced that Kelly Bonsignore was resigning effective immediately. He asked Rich Costlow and Corina Fiore if either of them would be interested in moving from an associate member to a voting member. Rich said that he would like to continue as an associate member due to his position on the Open Space Committee. Corina Fiore agreed she would like to advance as a voting member. Joyce Snyder said this agenda item would be added to the Supervisor meeting on June 25th.
3. Public Comments: Casey Henning spoke about the Freddy Hill development plan and his concerns for the native wildlife that is there, specifically in the grassland that was the old cattle grazing field. He says that he has identified over 20 species of birds and that he is concerned about the environmental impact of development. He thanked the EAC for allowing him to speak.
4. Approval of minutes: Rory asked if everyone had time to review the minutes and asked for any revisions. Upon hearing none, he asked for a motion to approve the minutes. There was a motion, and a second. The motion passed and the minutes were approved.
5. Bird Town PA subcommittee: There was a notification from the state that there is an upcoming Bird Clutch meeting, but they do not know the date and time. There is going to be a Bird Walk at Fischer Park on Saturday, June 14, at 7:30 am.
6. New Business
  - a. Potential EAC Review and Comment on Development Plans:
    - i. There is a suggestion on the table that the EAC, perhaps in concert with Open Space, review the tree plan for Freddy Hill Farm and Walton Farm development properties to include native plantings.
  - b. Ordinance Review Discussion
    - i. The current ordinances need updating as they include non-native species including some potential invasive species. We reviewed the process for suggesting a rewrite of the ordinance.

1. Send the updated language to Will Brugger, with a cc to Mary Stover.
  2. Mr. Brugger will review the language and forward it to the solicitor.
  3. Once the language is approved by the solicitor, it will be sent to the Supervisors for a vote and for adoption
  - ii. It was suggested that the ordinance include more native plants, eliminate the invasives, and link back to the Penn State Extension for best practices.
  - iii. The question arose on whether we should include meadow suggestions as well. There was no resolution on this matter.
  - iv. Joyce was asked when we can present or discuss this with the developer. It was suggested that the time to present this would be during the land development process when the landscape plan is being discussed.
  - v. The EAC members were tasked with looking at Code 360 to identify which ordinances need updating. We will write drafts of the updated copies in the ordinances folder in google drive. Brett said that he could identify them since he was familiar with where they were in the code and he could place them in the folder for review.
  - c. Giant Grant: There is a \$4000 grant available from Giant to Plant Native trees. Rich is going to follow up with Open Space to write the grant. It is unclear if we can apply for the grant as a municipality.
7. Old Business
- a. 2025 Projects
    - i. **Journeywork Giveaway**
      1. There were 6 people who signed up for the Journeywork Giveaway for Pollinator Pallooza. There was a motion to increase the budget for the giveaway from \$350 to \$450 so that all six could be covered by the giveaway. The motion passed. It was suggested that all that received the giveaway write a review for Journeyworks to let us know what they thought of the service.
    - ii. **No Mow Project**
      1. The Supervisors gave unanimous approval for us to proceed with the invasive elimination project. The contract was signed with Weeds Inc. The issue now is scheduling as Weeds Inc. is tight on schedule and they need 24 hours of no rain. The question was raised if we go with the other contractor if Weeds Inc. could not do it by the end of June. It



was decided to wait on that decision based on whether or not Weeds Inc. could schedule us.

2. The EAC will put up signage to include a QR code so that residents can be informed about what is occurring
3. Information will also be sent out in an email blast for full transparency
- iii. PWC Municipal Grant:
  1. Bad news was that, despite filling out the form online, PWC did not receive the grant application, and the grants have already been awarded.
  2. NPWA also has a grant that will provide money for the same project. We will follow up with PWC to get more details.
- iv. Workshops
  1. **Stream Explorers: Corina will offer a Stream Explorers workshop in Fischer Park from 10-11:30.** The pavilion has been reserved, we are waiting on the waiver approval from the solicitor. The course description was sent to the township for advertisement.
  2. Permaculture Workshop: David will offer a permaculture workshop in September or October. More details are coming soon
  3. Bird Town: a third workshop may be added later in the year with Bird Town.
- v. 2024 Report : The 2024 EAC annual report was sent to the Township and is not on the website.
- vi. Feral Cat Ordinance
  1. Research has been completed about neighboring municipalities that have a feral cat ordinance and are also Bird Towns. The language of those ordinances are being considered
  2. Decided that more information about the full extent of the problem needs to be considered before we move forward with the proposed ordinance
- b. Budget:
  - i. The EAC is looking at projects for the next year and are in the information gathering phase to look at the scope of the projects as well as potential costs. We will have a proposed budget request for 2026 in the coming months.

- ii. Current budget considerations include
  - 1. Resident workshops - time is being donated, but some supplies may be needed.
  - 2. Signage for the for No Mow project: Most likely around \$25 per piece according to some preliminary research.
  - 3. More permanent signage is being considered.
- 8. Township Updates (informational)
  - a. 2026 spending should be submitted
  - b. Need approval for \$5000 for a single item is due by the end of July
  - c. Consideration of stream crossing signs in the budget
- 9. Upcoming Events
  - a. Bird Town PA meeting June 12 at 7 pm
  - b. Bird Walk June 14 at 7:30 am at Fischers Park
  - c. Electronics Recycling at NPHS June 14th 9-12 pm
  - d. Stream Explorer workshop July 26th 10 am Fischer's Park
- 10. Any other business and closing
  - a. No other business was discussed
- 11. Adjournment

# **Appendix D:**

## **Township Newsletters**



WELCOME TO TOWAMENCIN TOWNSHIP

**MONTGOMERY COUNTY, PA**

**SPRING 2025**

**INSIDE THIS ISSUE:**

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## Improvement Projects & Comprehensive Plan Update Underway



*Construction at Grist Mill Park*

Several long-awaited projects are moving forward, either advancing to construction or finishing up this spring.

Construction of the Grist Mill Park Improvements Project has started and will include: an inclusive playground, a pavilion, a basketball court, a handicapped parking area, fencing and a perimeter trail. The Township was awarded a \$250,000 grant by PA Department of Conservation and Natural Resources and \$175,000 via a PA Local Share Assessment Grant to help fund this project.

Weikel Road drainage and sidewalk improvements (from Township Pool to Snyder Road) began last fall and will continue this spring. This project provides pedestrian connectivity between various neighborhoods, the Township pool and North Penn High School and will address stormwater issues. To date, 11 new storm sewer inlets, over 1,100 feet of new concrete piping, and a new concrete end wall were installed. Most curbing and driveway aprons have been completed. The spring work will include: completing sidewalk installations and regrading yards, roadway milling and full width pavement overlay - giving Weikel Road a "crown" for

proper drainage. A crosswalk installation at Snyder Road and proper line striping throughout the project area will also be completed. This project is primarily funded by remaining ARPA funds and a Montco 2040 Grant for the sidewalk component.

Phase 2 of the Skippack Creek Sewer Interceptor Project was recently released for bid with construction to start later this year. The interceptor project includes the replacement of approximately 1,200 linear feet of existing 18 inch diameter asbestos cement pipe – running from where the interceptor crosses beneath the Northeast PA Turnpike to its crossing at Wambold Road and an un-named tributary of the Skippack Creek. In October, the Towamencin Municipal Authority was awarded \$400,000 through the PA Local Share Assessment Program to help fund this project.

The final public meeting for the Comprehensive Plan Update will be later this spring. Residents are urged to attend. The draft document is available on the Township website. The public comment period has just concluded. This update will set the course for the future of our community.

The Township has been working on several grant submissions since last fall, including the following projects: Welsh and Orvilla Road intersection improvements, the Central Drive Storm Sewer Project, Municipal Complex Improvements, Skippack Creek Interceptor Phase 3, Grist Mill Basin Conversations, Kriebel Road Trail Extension, Phase 3, Butch Clemens Park Pickleball Courts, Grist Mill Park Connector Trail and the Tennis-Lukens Cemetery restoration. Check out a review of grant submissions and awards received



*Weikel Road sidewalk improvements*

over the last few years by visiting the Township website's Finance section.

On the development front, construction for the Mattress Warehouse and Chipotle Restaurant continues at the shopping center at Forty Foot and Allentown Roads. These retailers are expected to open this summer.

In December, the Board approved a waiver of land development for the proposed Goddard School at 1390 S. Valley Forge Road, with minimum site improvements planned. The property is situated at the former Rite Aid site. Construction is set for later this year.

The construction of the Delp Drive Warehouse Development, a 267,648 square foot warehouse, located at the end of Delp Drive, is nearing completion. The site should be finished this summer.

Core5 Industrial Partners received land development approval for a 591,360 square foot warehouse facility on Wambold Road at Allentown Road.

*Continued on page 2*

**Please visit our website at [www.towamencin.org](http://www.towamencin.org)**



*Continued from page 1*

Two of the three buildings have been constructed. The developer recently submitted modified plans for the third building.

Reminder, last year the Board of Supervisors passed Ordinance 24-04 changing the sewer billing from one annual bill to quarterly bills. Bills are being issued on: March 1st, June 1st, September 1st and December 1st. There was no increase in the real estate taxes or sewer rates for 2025. If you have not received your 2025 tax and sewer bills, please contact the Township.

The North Penn YMCA will be returning to Fischer's Park for a second season of day camp for ages K-8, from June 23 through August 22. For more information contact: [camp@northpennymca.org](mailto:camp@northpennymca.org).

In closing, we hope you are able to attend our annual Towamencin Day on Saturday, May 10th, and can make it out to our summer concerts at Fischer's Park.

To keep abreast of Towamencin news and events, please sign up to receive our weekly e-news at [www.towamencin.org](http://www.towamencin.org).

Sincerely,

Chuck Wilson  
Chairman, Board of Supervisors

## Towamencin Electronic Recycling Event

**Saturday, June 14**  
**9:00 AM - 12:00 PM**

North Penn High School Parking Lot  
1340 South Valley Forge Road  
Lansdale, PA 19446

Returning for 2025, our annual recycling event is available to all Towamencin residents and small businesses with fewer than 50 employees.

This event allows residents to responsibly recycle their obsolete electronics.

Registration will be required to participate in this event. For further details, please scan the QR code, or visit our website.

<https://towamencin.org/resources/calendar>



Scan to visit  
our June  
Calendar  
Event



## 2025 VOTER INFORMATION

Election updates and deadlines can all be found on Montgomery County's website. You can check polling locations, voter registration status, candidates running for office, volunteer opportunities, district maps and more.

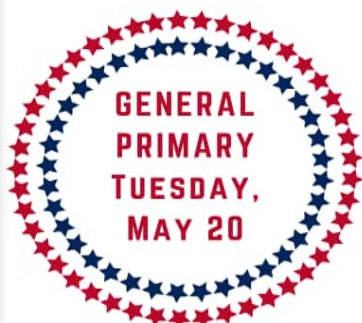
### Office Locations:

Montgomery County Voter Services  
One Montgomery Plaza, Suite 602  
425 Swede Street  
Norristown, PA 19401

Voter Registration: 610-278-3280

Election Board: 610-278-3275

<https://www.montcopa.org/753/Voter-Services>



### ELECTED REPRESENTATIVES

Towamencin Township PA State Representative District 61 : Representative Liz Hanbidge

Towamencin Township PA State Senate District 24 : Senator Tracy Pennycuick

Towamencin Township US House of Representatives District 4 :  
Congresswoman Madeleine Dean

Towamencin Township US Senators :  
Senator Dave McCormick and Senator John Fetterman



**VOTE!**



# Community Planning & Land Development Updates

**Code Enforcement Reminder:** All Towamencin property owners must keep weeds and grass trimmed to a height of 12 inches or less. Weeds or grass exceeding this height are considered a nuisance and may result in violation notices or citations. This does not apply to riparian buffers, wetlands, woodlands, floodplains, steep slopes, detention/retention basins, or open spaces designated as meadows by the Township.

## Community Development Updates

**Delp Drive Warehouse Development** - A 267,648 SF warehouse at the end of Delp Drive is nearing completion, with the site expected to be fully finished this summer.

**Belfair Square** - Caracausa Acquisitions LP received land development approval in early 2024 to build sixteen (16) townhomes on Welsh Road, between Vernon Court and Grist Mill Road. The developer has agreed to provide the Board of Supervisors with an update every six months.

**Wawa** - A new Wawa at Sumneytown Pike and Forty Foot Road will replace the existing Wawa and include twelve (12) fuel filling stations. Construction has been delayed, and the start date remains unknown.

**North Penn School District High School Renovations** - North Penn has submitted land development plans to renovate the existing high

school building, construct new athletic fields, upgrade existing fields and courts, demolish the current bus garage and parking, build a new bus garage with parking, and implement other site improvements.

## Shopping Center Update

Chipotle and Mattress Warehouse are expected to open this summer. Philadelphia Suburban Development Corporation has confirmed that it will not be proceeding with the Target and Whole Foods tenants at this time.

The Township is awaiting PSDC to reestablish rear circulation access to the shopping center to be able to issue permits for future tenants.

PSDC has submitted pad site development plans along Forty Foot Road, across from Newbury Way. The proposal includes approximately 8 tenant sites, including space for a fast casual restaurant, a drive-thru restaurant, a bank, and retail spaces. Construction of these tenant spaces will warrant the installation of signals at the existing intersection. Plan approval is expected at the end of 2025.

# Swimming Pool Permit & Discharge Guidelines

## Pool Guidelines

The following criteria shall apply to the construction of an above or in-ground pool:

- A pool is defined as any pool/container (spa, fish pond, etc.) that can hold more than twenty-four (24) inches of water.
- Barrier fencing is required when a pool permit is issued.
- A Grading/Stormwater Permit is required for disturbances greater than 1,500 square feet.
- An in-ground pool plan and the electrical plan must be signed and sealed by a professional engineer or surveyor.
- Manufacturer's specifications are required for pool heaters.
- Impervious surface calculations are required, but the water surface of the pool is not an impervious surface.
- A swimming pool must be located in accordance with the criteria noted in the accessory structure (A-10) section of the code.

## Swimming Pool Discharge Guidelines

In Towamencin, no permit is required for discharge of water from a swimming pool discharge, but the following guidelines shall apply:

- Discharge of water to a storm sewer is not permitted. In no event shall pool waters be directly discharged to waters of the Commonwealth.
- Water should be pumped over a grassy area to allow absorption, filtration and aeration of water. The discharge should be at a rate which prevents erosion and optimizes infiltration.
- Standing water or accumulated rain and/or pool water from the previous season should be pumped from the top so as not to disturb settled solids.
- Solids on the pool bottom should not be discharged. Following pump down of water, solids should be cleaned out manually
- Cleaning wastewaters containing muriatic acid of chlorine that is used in cleaning pool surfaces must be treated prior to discharge.
- Filter backwash water during normal pool operation must be at a sufficiently low volume that all water infiltrates to the ground.

Questions concerning pool guidelines should be directed to the Township Planning, Zoning & Code Enforcement Department at 215-368-7602.



## Police Department 50th Anniversary & Updates

The Department is celebrating it's 50th Birthday! Formed 50 years ago on January 1st, 1975, we are excited about this momentous anniversary. Throughout the year, the Department will be celebrating this golden anniversary in various ways. Join us at our open house Anniversary Celebration on Sunday, April 13th. The anniversary celebration is open to all Township residents. Keep a close eye on the Department's website and Facebook pages for "flashback" posts, news and events related to our 50th Birthday Celebration.

- This spring, in celebration of the 50th Anniversary, Towamencin's Police Department will unveil a new police badge designed to honor the Township's history.
- In January, Detective Christopher Bluem's exceptional work on a cybercrime case led to his invitation to join the FBI's Cyber Crime Task Force. His appointment allows him to assist with federal-level investigations while still working in Towamencin, gaining access to federal resources which will benefit the Department and Township.
- In February, the Department announced it will host its 2nd annual Citizens Police Academy in the fall. The Academy is a 6-week program, running one night per week, for 2-hour sessions. Each session will cover a different topic of instruction, offering an inside look into what our officers do every day. Keep an eye out for details regarding registration and class dates and times.



### Towamencin Accepted into Bird Town, PA



**BIRD TOWN**  
PENNSYLVANIA  
[birdtownpa.org](http://birdtownpa.org)

On March 4<sup>th</sup>, Bird Town, PA's Outreach Committee formally accepted Towamencin's application, making it officially the 77<sup>th</sup> Bird Town in PA. Congratulations to the Township's Environmental Advisory Council, and lead member Vanessa Gaynor, for their dedication and efforts made over the last year leading up to this achievement!

On February 25, members of Towamencin's Bird Town Committee made a presentation to the Board of Supervisors – outlining the Bird Town Pennsylvania mission, threats to bird populations, program initiatives, and designation benefits provided to the municipality. At this meeting, the Board unanimously approved the EAC's participation in Bird Town, PA, passing a resolution of support.

Bird Town Pennsylvania works in partnership with local municipalities and like-minded organizations to promote community-based conservation actions to create a healthier, more sustainable environment for birds, wildlife, and people. For more information, visit their website at <https://birdtownpa.org/>.

The Township's Bird Town Committee, is organized as an EAC sub-committee, with the following members: Andrew Dolan, Bruce Bailey, Donna Hegge, Kelly Bonsignore, Vanessa Gaynor and Joyce Snyder. Look for more information on the Township's website and Facebook page. The Committee plans to hold public meetings on April 10, June 12 and September 11 at the Township's Meeting Hall Building.

**BERKSHIRE  
HATHAWAY**  
HOMESERVICES

**KEYSTONE  
PROPERTIES**

Dear Towamencin Township Neighbor:

**Sell on Your Terms**

If you're considering selling your home and want to align the timing with your next move, there are flexible options available. Recently, I've helped several homeowners in our community sell their properties while negotiating both price and terms that worked for their schedules. In some cases, this even included arranging a post-settlement stay in the home, helping to reduce the stress and cost of multiple moves.

If you'd like to explore these options further, I'd be happy to discuss how we can customize the process to meet your specific needs. Feel free to reach out anytime.

**Capitalize on the Seller's Market**

Thank you,  
Ted Miller, Realtor  
*I've sold over 900 homes in the area*

**Your  
Towamencin  
Township  
Real Estate  
Specialist**

**Cell: 215-290-6106**  
**Office: 215-855-1165 ext. 121**

**[tedm@bhhskeystone.com](mailto:tedm@bhhskeystone.com)**  
**[www.BHHSkeystone.com](http://www.BHHSkeystone.com)**



# Hatfield-Towamencin Baseball



**STAY CONNECTED**  
Email:  
HTbaseball@hotmail.com  
Web: [www.tyasports.org](http://www.tyasports.org)

## Want to Get Your Child Involved in a Sport They'll Love for Life?

Look no further than America's favorite pastime! Hatfield-Towamencin offers a competitive and fun baseball program spanning Quickball through American Legion.

### 2025 CALENDAR BY DIVISION

#### Spring Intramural Season (March-June)

Quickball — Ages 4-6 (Coach Pitch w/Quickball)

A: Coach Pitch — Ages 6-7

Rookies: Player Pitch — Ages 8-9 (46/60 Field)

Minors — Ages 9-10 (46/60 Field)

Majors — Ages 11-12 (50/70 Field)

#### Connie Mack & American Legion Baseball

Early Spring Connie Mack—Ages 13—16 (April—May)

Summer Connie Mack — Ages 13-16 (May-July)

Summer Junior Legion — Ages 14-16 (May-July)

Summer Senior Legion — Ages 16-19 (May-July)

Senior Connie Mack—Ages 17-40 (May-July)

**HT Baseball also offers competitive Travel baseball opportunities for ages 8 through 12. See the [TYASports.org/Baseball](http://TYASports.org/Baseball) site for more details**



#### GET STARTED



@Hatfield-Towamencin Baseball | X @TowamencinCMB and @HatfieldALB

Did you miss our official registration period? Scan this code, visit [www.tyasports.org](http://www.tyasports.org), or email us right away at HTbaseball@hotmail.com. We will work to find a spot for your player.

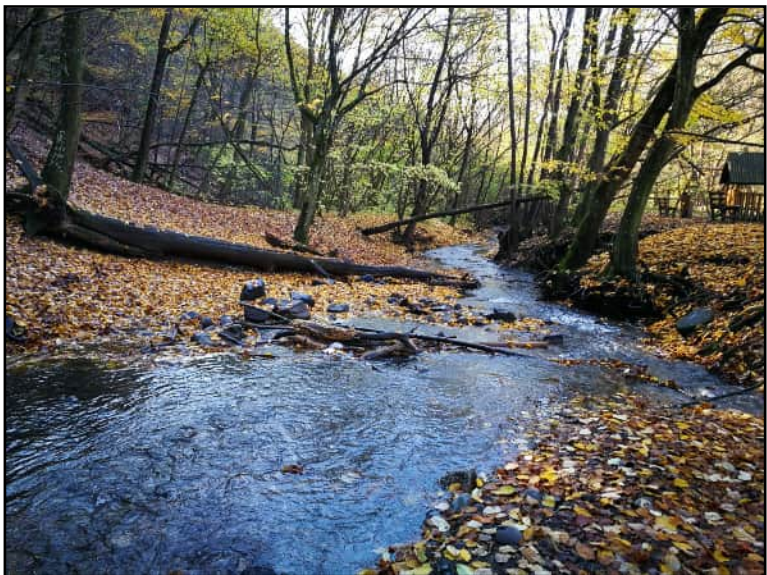
#### SAVE THE DATE: Opening Day | SAT, APRIL 12 | Bustard Road Park

Come out for the official kickoff of the 2025 season featuring our very popular Parade of Players, local dignitaries, food, fun & more!

## Ways We Can All Keep our Streams Clean

As part of our stormwater permit with the Pennsylvania Department of Environmental Protection, the Township is required to help prevent pollution and keep our streams clean for drinking water, irrigation, fishing and enjoyment by the public. Below ways you can help keep our streams and rivers clean:

1. Keep your nearest storm drain clear of debris and litter
2. Never dump anything down a storm drain
3. Use fertilizers sparingly
4. Use pesticides only when necessary
5. Do not blow grass clippings or leaves into the street
6. Sweep up yard debris rather than hosing down paved areas
7. Compost or recycle yard waste
8. Pick up pet waste and dispose of properly
9. Use a commercial car wash or wash your car on an unpaved area
10. Service your car regularly to prevent leaks onto paved areas
11. Dispose of Household Hazardous Waste at designated collection locations
12. Produce less waste – Reduce, Reuse, Recycle
13. Purchase and use nontoxic, biodegradable, recycled or recyclable products whenever possible
14. Have your septic tank pumped and system inspected at least every three years



For stormwater questions, concerns or information, please call the Township at 215-368-7602 or visit the website at <https://www.towamencin.org/information/stormwater-management/>



# Open Space & Parks Advisory Committee Spotlight

## Benefits of Trees in Towamencin

There was a time, eons in the making, when what is now Towamencin Township was forested. There was also a time, not so long ago, when Towamencin Township was deforested, becoming, at first, only a rotting debris field, from the logging, then transitioned to farmland. When William Penn first visited his “woods” (Penn’s Sylvania) in 1682, his land grant of the nearly 29 million acres that is now Pennsylvania was almost 99% forested. By 1900, only half of that was still a forest and trees were blatantly abused by many.

Times have changed. While Towamencin Township will never return to the forests that amazed William Penn, the Towamencin Open Space and Parks Advisory Committee is dedicated to enhancing the prevalence of trees in our community because we now recognize trees as invaluable assets to any community. They offer a myriad of benefits to enhance the quality of life which include: improved air quality, temperature modulation, better psychological well-being, and a positive community economic impact.

Trees absorb our modern pollutants like carbon dioxide, sulfur dioxide, and nitrogen oxides. They can sequester some of these and at the



*New tree installations along the Kreibel Road Trail*

same time release oxygen, making the air healthier to breathe. Trees provide essential shade, which cools the surface environment, reduces demand for air conditioning and lowers energy costs. Shade from trees also makes outdoor spaces more comfortable, encouraging physical activity and social interaction among community members.

The Japanese ancients practiced shinrin-yoku or forest bathing. They recognized trees were a crucial support pillar for mental and emotional well-being. Modern studies conclude that spending time in green spaces reduces stress, anxiety, depression, and even asthma. Trees

have a calming effect, promoting relaxation and improving overall mental health. Additionally, tree-lined streets and parks enhance the aesthetic appeal of a neighborhood, fostering a sense of pride and community spirit. These benefits come with the added impacts of enhanced habitat for wildlife, higher biodiversity, reduced soil erosion, less stormwater runoff, and reduced risk of flooding. It has been estimated that 100 mature trees intercept 538,700 gallons of rainwater, 32 tons of carbon dioxide plus 430 pounds of other pollutants annually while also being a natural barrier against wind and noise and creating a more pleasant living environment.

Economically, trees increase property values. Homes and businesses situated in well-landscaped areas with mature trees tend to have higher market values compared to those in more barren settings. This boost in property value benefits not only individual homeowners but the community.

Trees are vital to the health of our community and our families. Support Towamencin Township by encouraging public tree planting and plant a tree in your own space. Your children and your pocketbook will benefit from a healthier, happier, and more sustainable community.

## Veterans Social Event & Park Update - Spring 2025

The Veterans Committee is thrilled to announce a Veterans Social Event this spring! This gathering will offer local veterans a chance to connect, share experiences, and learn about plans for Veterans Memorial Park. We invite all veterans in the township to join us— Stay tuned for upcoming details on the event’s date and venue.

Progress on Veterans Memorial Park, a dedicated space to honor those who have served, is continuing. Although access to the park remains a challenge, discussions are ongoing to secure an appropriate entrance. Seed funding is being pursued, and the committee is actively working on next steps, including engineering plans and grant applications.

For updates on these initiatives or to get involved, attend public committee meetings or visit: <https://towamencin.org/government/boardsandcommissions/veterans-committee/>

Public committee meetings take place on the 4th Monday of each month unless otherwise noted. We look forward to seeing you at the Veterans Social Event!



# EAC Spotlight: Light Pollution & Night Sky Lighting Guidelines

As we enter the spring, temperatures will warm and nights get shorter. We'll begin to look forward to spending evenings outside, and our native pollinators will begin emerging. You might notice that there do not seem to be as many visible stars now, or as many fireflies as you remember from your childhood. It might surprise you to find out that light pollution from increased Artificial Light At Night (ALAN) - particularly the bright, cooler color temperature light from modern LEDs - negatively affects our lives, health, and the ecology.

**Health** - A large and growing body of research now supports evidence that ALAN is tied to an increase in insomnia; cognitive dysfunction and depression; metabolic disorders such as obesity, diabetes, and heart disease; and cancer, among others. (<https://pubmed.ncbi.nlm.nih.gov/26375320/>)

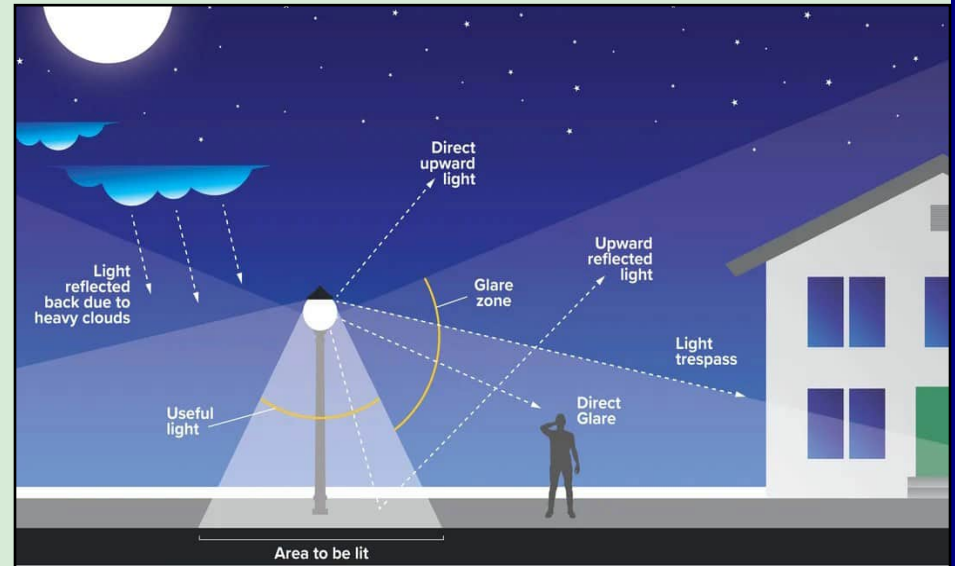
**Ecology** - ALAN has also been shown to negatively affect the ecosystem, disrupting night time pollination, reproduction of insects such as fireflies, bird migration, and the behavior of animals such as toads and owls. (<https://www.nature.com/articles/s41467-021-22011-8>; <https://www.nature.com/articles/s41559-020-01322-x>)

We all enjoy and depend on nighttime lighting - for security, traffic safety, and aesthetics. Fortunately, there are some simple guidelines that can mitigate the worst effects and balance our needs.

- 1. Use light only where it is useful & needed.** Consider removing outdoor light sources that aren't useful.
- 2. Direct light only where needed.** Light fixtures should be shielded so they only direct light downward or on a target. Not only does this reduce light pollution, but also reduces glare and improves security. A searchable list of certified lighting fixtures by use can be found at <https://darksky.org>.
- 3. No brighter than necessary.** The negative effects of ALAN are proportional to brightness. You might find that bulbs around 200-300 lumens are both sufficient and aesthetically pleasing for house mounted lighting fixtures or residential street lamps. Ideally, for our suburban residential areas, the recommended limit is 50,000 lumens/acre.
- 4. Use Controls.** Timers, motion sensors, dimmers, and photocells are all useful for limiting light to when it is useful.
- 5. Use warm color lights.** The redder the better! The more reddish the light, the lower the negative effects, including glare and disruption of night vision. Use 3000K or lower bulbs.

For more detailed and comprehensive information on this subject, please visit <https://darksky.org/>.

AMA guidelines: <https://www.ama-assn.org/sites/ama-assn.org/files/corp/media-browser/public/about-ama/councils/Council%20Reports/council-on-science-public-health/a16-csaph2.pdf>



## Environmental Advisory Council: Spring Calendar of Events

### PWC Stream Cleanup - Saturday, April 12, 2025 (9AM - 12PM)

Join this regional event hosted by the Perkiomen Watershed Conservancy and help clean up our local waterways. Towamencin Township sites will be included. Visit [www.perkiomenwatershed.org/stream-clean-up](http://www.perkiomenwatershed.org/stream-clean-up) for more information and to sign up.

### Fischer's Park Invasive Species Education and Removal - Saturday, April 19, 2025 (10AM - 12PM) *Check the Township website to sign-up.*

Join members of the EAC for hands-on experience. We will spend time identifying and removing invasive plants from the Fischer's Park Rain Garden, followed by an interactive educational walk around the park to learn about local native species, and the effects that the invasives are having on them.

### Towamencin Day - Saturday, May 10 from (12PM - 4PM)

The EAC will be hosting a table at this community event at Fischer's Park. Stop by to learn about different environmental challenges facing our community, ask members questions about native versus invasive plants, and enter to win a giveaway! Other environmentally focused organizations will also be present at the event.





# HOUSEHOLD HAZARDOUS WASTE

## 2025 MONTGOMERY COUNTY, PA RESIDENTIAL EVENTS

### By Appointment Only. Preregistration is Required.

Register at [www.MontcoPARecycles.org](http://www.MontcoPARecycles.org)

### DATES:

#### **Saturday, April 26**

**Indian Valley Middle School**  
130 Maple Avenue, Harleysville

#### **Saturday, June 7**

**Temple University–Ambler Campus**  
Enter at 1431 E. Butler Pike, Ambler

#### **Saturday, June 21**

**Norristown Area High School**  
1900 Eagle Drive, Norristown

#### **Saturday, June 28**

**Abington Middle School**  
Enter at 2056 Susquehanna Road, Abington

#### **Saturday, September 20**

**Spring-Ford 9th Grade Center**  
400 South Lewis Road, Royersford

#### **SUNDAY, October 12**

**Lower Merion Transfer Station**  
1300 N. Woodbine Avenue, Penn Valley

Free residential collection events are held outdoors. There are no permanent drop off locations, only these collection events. Montco residents may also attend any Household Hazardous Waste event held by [Bucks](#), [Chester](#), [Delaware](#), or [Philadelphia](#) Counties.

Please do not contact the host sites, as they are not affiliated with the events.

In case of severe weather, call 610.278.3618, option 6 for event status.

Contact us at:

[Recycling@MontgomeryCountyPA.gov](mailto:Recycling@MontgomeryCountyPA.gov)

610.278.3618



**Reworld**<sup>™</sup>

MONTGOMERY COUNTY BOARD OF COMMISSIONERS  
Neil Makhija, *Chair* • Jamila H. Winder, *Commissioner* • Thomas DiBello, *Commissioner*





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## Sewer Sale, Development, Improvement Projects & Staff Updates

Over the last six months, the Township has continued moving forward with various projects and initiatives and made an important decision on the future of our sewer system.

Over the summer, the Pennsylvania Public Utility Commission issued an order setting a formula that effectively determines what it deems to be a “reasonable” purchase price for a wastewater system in a sale to a public utility. The purchase price (\$104 Million) Pennsylvania American Water agreed to pay the Township under the Asset Purchase Agreement was far higher than the PUC’s purchase price standard under its new formula. While the PUC did conditionally accept PAWC’s application to purchase our system, given the new legal framework instituted by the PUC, it was unlikely the PUC would ultimately approve the sale of our system to PAWC as it was structured.

After discussions with PAWC and our legal counsel, it seemed appropriate to consider the mutual termination of the APA based on this change. At our September 11 meeting, the Board unanimously authorized all necessary actions, including signing the associated termination documentation, to do so. At our September 25 meeting, Ordinance 24-06 was unanimously adopted repealing Ordinances 22-04 and 23-03 related to the sewer sale.

The Township will be moving to quarterly billing for the sewer rental bill for 2025. All residential customers will receive a mailed notice of these details, along with a notice of a new online bill payment system, Xpress Bill Pay. See page 6 for more information. We are also studying a potential switch to consumption-based billing in 2026.

Phase 2 of the Skippack Creek Sewer Interceptor Replacement Project is underway with design and engineering. We are awaiting details on a grant



*Grist Mill Park Phase 1 Improvement Plan 7/2024*

submission. Construction is anticipated as early as next year.

On the development front, Mattress Warehouse and Chipotle Restaurant are under construction at the shopping center at Forty Foot and Allentown Roads. These retailers are expected to open for business in late 2024/early 2025. Regular shopping center updates are provided monthly by the developer at the Board of Supervisors meetings. At recent meetings, PSDC’s Mark Nicoletti has indicated Whole Foods, Target, Harbor Freight, Chase Bank, Panera Bread and First Watch as prospective tenants for the site.

An application is before the Township Zoning Hearing Board seeking a variance from parking requirements which would enable the Goddard School to move forward with plans for a facility in the former Rite Aid at Valley Forge and Sumneytown Pike.

Despite receiving final Township approvals over two years ago, construction on the new Wawa at Forty Foot Road and Sumneytown Pike appears to be stalled awaiting a parcel transfer between Wawa and the developer.

The Comprehensive Plan Update is moving forward with the next public meeting scheduled for November 21<sup>st</sup>.

Construction for the Weikel Road Pro-

ject (Township Pool to Snyder Road) is underway. This project includes drainage improvements and sidewalk installations and should be completed later this fall. These improvements are primarily funded by remaining ARPA funds and a Montco 2040 Grant for the sidewalk.

The Grist Mill Park Phase I Improvements project is out for bid. The project will include: an inclusive playground, a basketball court, a handicapped parking area and a perimeter trail. The Township was awarded a \$250,000 PA Department of Conservation and Natural Resources grant and another \$250,000 funding submission was sought via a PA Local Shared Grant.

The Township received a Green Light-Go Grant in the amount of \$310,520. The grant will be used to upgrade the traffic signal system along the Forty Foot Road and Sumneytown Pike corridors with adaptive technology enabling the traffic lights to react in real time to changes in traffic conditions.

The Township currently has several pending grant applications including Local Share Account Statewide Grants for the Central Drive Stormwater project, Phase 2 Skippack Creek Sewer Interceptor and Grist Mill Park improvements. Additionally, the Township is waiting on the status of a COVID-19 ARPA Capital Projects Fund Community Facilities grant for improvements to the municipal complex.

We recently welcomed two new employees to the Township’s management team. In July, we welcomed Bill Oettinger as our new Fire Marshall. Bill comes to us from Keystone Municipal Services where he provided contracted code related services to various municipalities including Towamencin. Bill serves as Captain

*Continued on page 2*



# Fall & Winter Reminders from the Code Department

## Open Burn Rules

Who can burn? 1 & 2 family residential dwelling units only.



What can you burn? Yard trimmings only.

Where can you burn? Not less than 50' from any structure, & placed to prevent the spread of fire to within 50' of any structure, vehicle, fuel tank & not less than 25' from any property line. No burning is permitted in streets, alleys, right-of-way.

Prior to burning all residents are required to notify Township Police at 215-368-7600.

You may not burn before 8AM—Fires & embers must be extinguished by dusk on the same day.

Fires must be constantly attended.

Flammable liquid accelerant is prohibited.

1 burn pile, not to exceed 5' x 5' x 3'

You may not burn during high wind, drought or weather inversions deemed hazardous.

Contact 215-368-7602 for complete burn rules.

## Leaf and Yard Waste

PA law prevents placing leaves in the trash. Leaves must be composted or placed for separate collection. Your contracted waste hauler is responsible for providing this service to their customers.

Residents must purchase their own biodegradable collection bags. Bags are available at grocery & hardware stores. Plastic bags are prohibited.

Haulers should provide specific pick-up dates. Customers may be billed by their hauler for this DEP mandated collection.

The Township has an active agreement with Barnside Farm Compost Facility with Northern Montco Recycling Commission should residents wish to drop off their yard waste for a fee.

The minimum fee is \$25 and \$50 per ton. The Barnside Compost is located at 991 Haldeman Road, Schwenksville, PA 19473.

Residents with specific questions of what they can bring should call 610-287-8880 or visit <https://barnsidefarm.com/>



## Winter Storm/Snow Reminders

All property owners are required to remove snow & ice from their sidewalks within 24 hours with a clear path of 28 inches.

Property owners are responsible to clear fire hydrants within their property boundaries for a clearance of 3' around the fire hydrant.

Residents should ensure their mailbox is properly secured for the winter season. According to the United States Postal Service, mailboxes are to be placed with the face of the box 6 to 8" from the front of the curb. Mailboxes are most often damaged in snow storms not by plows but the force of the snow hitting mailboxes not properly installed or loose. If you can move your mailbox by shaking it, take immediate steps to secure the box according to USPS guidelines.

Remove vehicles, trash cans, sports equipment and any other impediments from the roadways. It is unlawful to throw, shovel or place snow in the road.

Visit the Public Works section of the website for snow emergency routes and more details.

## A letter from the Fire Marshal

I'd like to take this opportunity to introduce myself as the newly hired Fire Marshal for Towamencin Township. As the Fire Marshal some of my primary roles and responsibilities are to conduct fire inspections, fire investigations, and fire prevention education. Many people only see or communicate with the Fire Marshal after a devastating event in their lives. Being proactive and educated in fire safety could potentially save a life and prevent significant property damage. I have listed a few fire safety code requirements that will help guide you with keeping you and your property safe.

1. Place smoke alarms in every bedroom and every floor.
2. Place carbon monoxide alarms in common areas outside of bedrooms.
3. Have dryer vents cleaned to prevent lint buildup.
4. Do not overload electrical outlets, extension cords, and power strips.
5. Conduct exit drills in the home "know two ways out".
6. Open-flame cooking devices shall not be operated on combustible balconies or within 10 feet of combustible construction.
7. Open-flame devices such as heaters, lanterns, candles, and any other open flame device shall not be located on or near decorative material or similar combustible materials.
8. Have address numbers visible from the street minimum number size shall be 4 inches.
9. Egress paths shall remain clear in the event of an emergency.
10. Fire extinguishers "type ABC" can be used to extinguish a small fire and/or help you escape. Always contact 911 in the event of a fire.

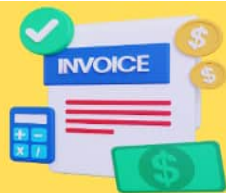


If you should need any fire safety information or have any questions, please reach out to me. I look forward to keeping the community fire safe.

Yours in Fire Safety,  
Bill Oettinger  
Fire Marshal

215-368-7602 X1107  
[boettinger@towamencin.org](mailto:boettinger@towamencin.org)





## Sewer Billing Notice

**PLEASE BE ADVISED THAT SEWER BILLING WILL BE CHANGING FROM ANNUAL TO QUARTERLY, EFFECTIVE MARCH 1, 2025.**

With the change from annual to quarterly billing the Township has partnered with Xpress Bill pay as a new way to pay your bill online. With this new service, residents will have the ability to view, track and pay your sewer bills. Various payment options are available including credit and debit cards and electronic funds transfer (fees apply). Customers can also set up automatic payment options, as well as sign up for paperless billing.

### **SIGN UP FOR THIS NEW SERVICE IN A FEW EASY STEPS:**

1. Go to [www.xpressbillpay.com](http://www.xpressbillpay.com) or follow the link to Xpress Bill pay's website under Online Payments on the Township website [www.towamencin.org](http://www.towamencin.org).
2. Click on the "Sign Up" button on the top of the home screen. Fill in the email and password fields, then click in the "I'm not a robot" box and follow the prompts.
3. Complete the short registration form and click "Next."
4. Go to your inbox and open the verification email then click "Verify Email". Then select "Continue" to log in.
5. Select "Towamencin Township" as your billing organization and follow the prompts for linking your bill (you will need your Account number as it appears on your Township bill).
6. Once your bill is added to your account, you can view and pay your bill online, sign up for paperless billing, or set up auto-pay options.

**xpress** BILL PAY

If you need further assistance with setting up your account, please call the Township's Finance Department at 215-368-7602.

### **TIPS FOR TAXPAYERS**



*by Robert A. Di Domizio Jr., Tax Collector for Towamencin Township*

Welcome to this installment of Tips for Taxpayers. As many of you are aware, your North Penn School District tax millage increased for 2024-2025, but did you notice the School Board also increased the Homestead Exclusion? What that means is that each property on the Homestead Exclusion saved \$314.38 on their school tax bill this year. That is certainly a welcome relief to homeowners on the program, especially our seniors living on fixed incomes.

Towamencin Township set their Homestead Exclusion at \$50,000, which comes to \$284.45 in savings. A taxpayer might ask, why is the Township figure so much higher but the tax reduction is smaller when compared to the School tax. The difference lies in the millage rate.

There are three taxing authorities responsible for levying property taxes - Towamencin Township, Montgomery County, and North Penn School District. Each taxing authority sets their own millage rate. The Township millage is 5.6890 and the School District is 30.9667. Montgomery County's millage rate is 5.178.

The Homestead Exclusion only applies to residences, and specifically a primary residence. By definition, a primary residence is "where you intend to reside permanently until you move to another home."

Please take note that if a home has the Homestead Exclusion and that property is sold, the Exclusion goes away. The new owner(s) must apply for their Homestead Exclusion.

The County administers this program but does not participate in it. To apply for the benefit, go to the County website, [www.montgomerycountypa.gov](http://www.montgomerycountypa.gov) and search for the Homestead & Farmstead Exclusion Application. You can call the Montgomery County Board of Assessment Appeals office at (610) 278-3761 and ask for assistance with the application.

### **TAX COLLECTION DATE REMINDERS**

December 31 is the last day to make School, County & Township tax payments. Any payments made after December 31 will go to Tax Claim Collection. The Tax Collector does not accept cash payments. All payments must be received in the form of personal check, money order or cashier's check. Upcoming & important school tax deadline dates:

- Payments made after October 31 – 5% penalty applied
- Face 4 coupon closes on October 31
- Face 5 coupon closes on November 30
- Last day to submit payments by personal check is December 15
- After December 15, only cashier's checks & money orders will be accepted
- Face 6 Coupon closes on December 31

If you have questions regarding school tax payments, please contact the Tax Collector, Robert DiDomizio at 215-723-7297 or email at [tax@robertdidomizio.com](mailto:tax@robertdidomizio.com). You can visit the tax collector's website at <http://www.robertdidomizio.com>.





# Open Space & Parks Advisory Committee Spotlight: Invasives

Most of us enjoy a walk in the park or around our yard, right? A gentle breeze, attractive surroundings, bird calls, a convenient trail, and, in some places, the calming trickle of flowing water all add an extra measure of pleasantness to the physical health benefit of a stroll. Whether you slowly meander in solitary, walk quietly with others or with your dog, visit the parks in Towamencin, or just mow your own grass, beware “The Invaders” are watching you. They lurk in plain sight, and you would not be alone if you did not notice several of the invasive plant species that populate Towamencin Township. These invaders, if given an unchecked opportunity, will proliferate and dominate the native species growing in your yard or in our parks, thereby destroying habitat and the native food supplies that any number of animals and birds rely upon. You may be familiar with Towamencin’s annual invasive clean-up days, where citizens are educated on identifying invasives and provide support for volunteers who target certain, particularly problematic areas for manual clean-out of the offending flora. One shortcoming of these periodic clean-outs is that these invasive species will re-proliferate and an annual program will not eradicate the plants that escape detection. This article was written to instruct our readers and help augment the annual invasive species removal program already supported by the Open Space and Parks Advisory Committee, the Environmental Advisory Council, and the Public Works Department of Towamencin Township, and to help avoid the use of herbicides whenever possible.

Who are “The Invaders”? These are just three of the most wanted culprits.

**Canada thistle**  
(*Cirsium arvense*)  
Photo: Eric Coombs, OR Dept. of Agric,



**WANTED: DEAD (not alive)**

**Common mugwort**  
(*Artemisia vulgaris*)  
Photo: Univ. of CT, College of Agric.



**WANTED: DEAD (not alive)**

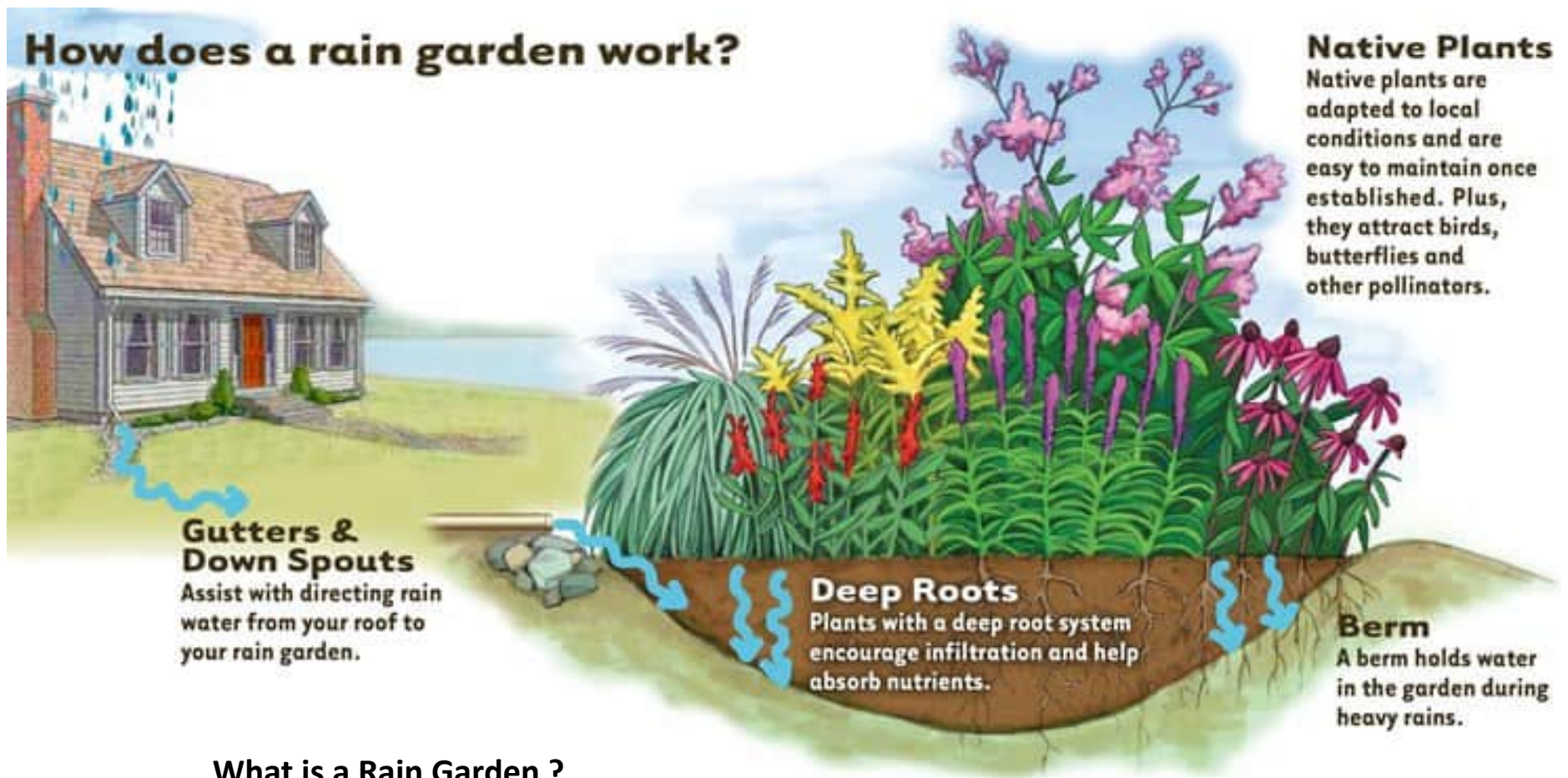
**Garlic mustard**  
(*Alliaria petiolate*)  
Photo: PA Dept. Natural & Conservation



**WANTED: DEAD (not alive)**

Here’s an easy way that you can help. When you walk around your yard and see an “invader” pull it and toss it in your trash... and not your compost pile. As you walk in your neighborhood, look for these culprits. Explain to your neighbors the harm that these invasive plants cause to the habitat and encourage them to help by also removing any invasive plants on their property. Everyone pulling just a few plants on their own property can be a powerful force multiplier against the invaders. If we all do this regularly, we could remove thousands of invasive plants annually, and really put a dent in the invasive species population in Towamencin. It’s safe, it’s personal, it only takes a minute or two, and it’s a painless way to help beautify Towamencin one small step at a time.

In our parks, when you play, walk, run, or explore habitats for flora, fauna, birds and insects, or just take a nap; you’ll be glad you went. Invasive species exist in all 11 of our parks so when you are out, look for them. The Township does not recommend you destroy invasives in public spaces on your own. If you discover a significant infestation of one of these menaces, report it at [info@Towamencin.org](mailto:info@Towamencin.org) and the Public Works Department will investigate, confirm the species, and remove it. This was done recently for an infestation of Japanese knotweed in Fischer’s Park. Whether you visit Bustard Road Park, Veteran’s Park, Grist Mill Park, Butch Clemens Park, Green Lane Park, Heebner Way Park, Kibler Meadows, Drinnon Park, Morgan Way Park, or Valley View Park, be on the lookout for invasives. As always, if there are other ways you think you or your group might be able to help; come talk to us. In the meantime, we encourage you to eradicate invasive species in your yard, and encourage your neighbors to do the same. Every effort is a benefit.



## What is a Rain Garden ?

Rain gardens are shallow, depressed gardens designed to capture runoff and allow the water to infiltrate into the soil or be used by plants rather than allowing the water to runoff into the streets, storm drains and nearby streams. They are a simple, inexpensive way to help reduce runoff and keep pollutants from flowing into the streams and rivers. Rain gardens have many benefits including:

- Filtering pollutants from runoff
- Recharging groundwater
- Conserving water from reduced irrigation
- Removing areas with standing water
- Reduce mosquito breeding areas
- Increase beneficial insects that eliminate pests
- Create habitat for birds and butterflies
- Reduce garden maintenance

## Where is a good location for a Rain Garden?

Find a low area in your yard that is at least 10 feet away from the house foundation and 25 feet away from septic system drain field or well head. The best locations are in partial to full sun.

## Rain Garden Plants

Rain gardens should be planted with easy-to-maintain native plants. Native plants will require less watering to become established. Since the plants will be in a low area, make sure the plants can withstand wet soil for up to 24 hours. After planting, weeding may be needed until the plants become established.

Your rain garden may need a bit more maintenance than a lawn in the beginning, but in the long run it will be easier to care for and provide many added benefits.

## More Information on Rain Gardens

There are many resources for rain garden design and plant selection. Below are a few websites that can help:

- Penn State Extension: <https://extension.psu.edu/an-introduction-to-rain-gardens>
- PA Environmental Council: <https://pecpa.org/wp-content/uploads/Water-Resources-Create-Your-Rain-Garden.pdf>
- Stormwater PA: <http://www.stormwaterpa.org/raingarden.html>

For questions regarding stormwater or to report any pollutants entering the storm sewer system or a stream, please call the Township at 215-368-7602.

**Municipal Engineering  
Wastewater Facilities Engineering  
Water System Facilities Engineering  
Stormwater Management**

4259 W. Swamp Road, Suite 410  
Doylestown, PA 18902  
215.340.0600

[www.cksengineers.com](http://www.cksengineers.com)



**CKS**  
ENGINEERS  
AN ARRO CONSULTING COMPANY



# Environmental Advisory Council - Community Events & Outreach

Our Environmental Advisory Council (EAC) continues to plan new conservation initiatives and community education efforts. In the first half of 2024, the EAC participated in several activities to help the environment and to educate residents.

## Activities with Perkiomen Watershed Conservancy

The 20th annual Stream Clean-Up for the Perkiomen Watershed Conservancy (PWC) was held on April 13. Towamencin Township is part of the Perkiomen Watershed and the Towamencin Creek is a tributary of the Perkiomen Creek.

PWC assisted the EAC and Public Works Department on April 17 with a cleanup of the Rain Garden in Fischers Park. A few invasive plant species were found in the garden and removed, but PWC said that many of the plant species in the garden are beneficial.

## Invasive Plant Removal

On Saturday, **April 20**, Township volunteers and the EAC spent a rewarding morning removing invasive plant species from Fischer's Park. The species included thistle, garlic mustard, and mugwort.



*Volunteers and EAC members in the hunt for invasives on April 20th.*

## Upcoming Workshop

Keep a lookout for registration information for an upcoming workshop with Perkiomen Watershed Conservancy on Thursday, November 14. Details will be sent via the Township e-news and posted on social media

## Rain Barrel Workshop

On **June 20**, the EAC hosted a Rain Barrel Workshop at Bustard Road Park, led by PWC. The workshop was a success. Residents assembled their own rain barrel and learned about the benefits of rain barrels.

Rain Barrels:

- Saves money spent on household water use. Rainwater is FREE!
- Provides plants with soft water, free of chlorine, lime or calcium.
- Conserves water for use during droughts.
- Helps to mitigate the problem of stormwater runoff.
- Reduces flooding on your property (and your downhill neighbor's).

Each participant took home their assembled rain barrel. The EAC offset the cost for residents, the PWC workshop was only \$30 per person.



*Participants learn the benefits of rain barrels on June 20th.*

## Towamencin Day

The EAC presented stormwater management and native and invasive plant information at Towamencin Day on **May 11**. Many community members participated in an environmental scavenger hunt and a rain barrel raffle.



## Towamencin Electronics Recycling Event

The annual Township recycling event was held on **June 8** at the North Penn High School. This event helps to conserve our precious natural resources. Over 6 tons of electronics were collected!

## ENACT

The EAC also sponsored the North Penn High School environmental club, ENACT, who taught children about ocean creatures with an interactive obstacle course, and PECO's Energy Assessment Team, who offered residents free appointments to have their home assessed for energy efficiency.

Thank you to all Towamencin residents who participated in these events! To learn more about our watershed, stormwater management, native plants, and invasive plant removal, visit PWC's Learning Center: [www.perkiomenwatershed.org/learning-center](http://www.perkiomenwatershed.org/learning-center).





# Stormwater Pollution Prevention Tips

FALL 2024

## MANAGING STORMWATER ON YOUR PROPERTY THIS FALL

Fall is here! And with this change in season comes cooler temperatures, shorter days, and lots of yard work to tackle. When crossing off your to-do-list this fall, it's important to remember that yard debris is a significant source of stormwater pollution.

Organic plant material like grass clippings, leaves, and shrubbery trimmings can carry pesticides and fertilizers from your yard and deposit them in local waterways. Piles of leaves and grass clippings will overload a stream's ability to process leaf litter, causing nutrient pollution and oxygen depletion. Yard debris can also clog culverts, storm drains and pipes causing flooding.

***Luckily, there are some easy steps that you can take on your property to reduce pollution and improve water quality!***



LEARN MORE BY SCANNING THIS QR CODE OR VISITING OUR WEBSITE: [WWW.PERKIOMENWATERSHED.ORG](http://WWW.PERKIOMENWATERSHED.ORG)



**Do not pile leaves or other yard waste near streams or drainage areas** where they can blow or wash into creeks. Use designated leaf collection bags for curbside leaf recycling.



**Do not blow leaves or grass clippings off of your property** into streets, streams, ponds or drainage swales.



**Recycle grass clippings and their nutrients** by mulching them and leaves into your lawn or piling them in your garden beds. They will add nutrients back into your lawn and provide shelter for wildlife during the winter.



**Plant a native tree!** Trees provide vital habitat for wildlife and absorb more stormwater than your lawn does.

# **Appendix E:**

## **Township E-News**

**O'Donnell, Sean**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Thursday, September 12, 2024 12:55 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "Stormwater Repairs - Week of September 16 (Old Morris Road & Kriebel Road)", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Stormwater Repairs - Week of September 16  
\(Old Morris Road & Kriebel Road\)](#)**



# STORMWATER PIPE WORK



The Public Works Department will be performing stormwater repairs during the week of September 16.

On September 16, work will occur on Old Morris Road near Bustard Road. Old Morris Road will be closed from Lakeview Drive to Bustard Road. Work is expected to begin at 7AM, and be completed in one day.

On September 17 or 18, work will be performed on Kriebel Road between Anders Road and Pheasant Hill Road (near the PA Turnpike Bridge). Work is expected to begin at 7AM, and be completed in one day.

\*Work schedules may vary and are subject to change. Work progress and adverse weather could alter targeted completion dates.



[View Article](#)

## Recent Articles

SEPTEMBER 12, 2024

[Stormwater Repairs - Week of September 16 \(Old Morris Road & Kriebel Road\)](#)

SEPTEMBER 06, 2024

**Stover, Mary**

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**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, September 20, 2024 4:14 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "ENews September 20", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[ENews September 20](#)**

**Upcoming Meetings**

Be a part of the  
**journeywork**  
2nd Annual  
Pollinator Palooza

**READY TO MOW LESS?**

Give a little bit of your lawn back to the butterflies, the bees, and the birds.

Choose a 4x12 area of your yard to prep in the fall--we will send you the steps to get rid of some lawn. You can choose a full sun or dry shade spot.

Order your full sun or dry shade plant set now.

In the spring, pick up your plant set, garden map, and care directions.

Enjoy the habitat you are creating!

28 plants,  
garden map,  
& directions  
only \$75

**Sign me up!**



**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, September 27, 2024 3:51 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "ENews September 27", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[ENews September 27](#)**

**Upcoming Meetings**



A flyer for a birding event at Fischer's Park. The background is light blue with stylized green hills and trees at the bottom. A yellow bird is flying in the top left, and a red bird is flying in the top right. A small blue and pink bird is on the ground in the bottom left. The title "Birding at Fischer's Park" is in green, and the date "September 28 at 7:30 am" is in red. The text describes the location, the tour leader, and the route.

***Birding at  
Fischer's Park  
September 28 at 7:30 am***

Fischer's Park in the fall is not only lazy and lovely, but it can also be an important stop-off point for migrating birds who visit the Towamencin Creek, fields and woods. Last fall at least 8 different warbler species, a favorite sighting at this time of year, were identified in mid-September to early October.

Join Towamencin resident and regular Fischer's Park birder Andrew Dolan and other VFAS volunteers for a relaxed 1-2 mile exploration searching for this year's surprises. The tour will last approximately 2 hours.

The route includes mostly-flat paved and natural path areas, with a few areas of slight incline. All experience levels, abilities, and ages are very welcome.

***Please bring binoculars if you have them.***

---

TVFC's Hoagie Sale - Deadline for preorders is Monday, September 30th



## Stormwater Pollution Prevention Tips

FALL 2024

### MANAGING STORMWATER ON YOUR PROPERTY THIS FALL

Fall is here! And with this change in season comes cooler temperatures, shorter days, and lots of yard work to tackle. When crossing off your to-do-list this fall, it's important to remember that yard debris is a significant source of stormwater pollution.

Organic plant material like grass clippings, leaves, and shrubbery trimmings can carry pesticides and fertilizers from your yard and deposit them in local waterways. Piles of leaves and grass clippings will overload a stream's ability to process leaf litter, causing nutrient pollution and oxygen depletion. Yard debris can also clog culverts, storm drains and pipes causing flooding.

*Luckily, there are some easy steps that you can take on your property to reduce pollution and improve water quality!*



LEARN MORE BY SCANNING THIS QR CODE OR VISITING OUR WEBSITE: [WWW.PERKIOMENWATERSHED.ORG](http://WWW.PERKIOMENWATERSHED.ORG)



**Do not pile leaves or other yard waste near streams or drainage areas** where they can blow or wash into creeks. Use designated leaf collection bags for curbside leaf recycling.



**Do not blow leaves or grass clippings off of your property** into streets, streams, ponds or drainage swales.



**Recycle grass clippings and their nutrients** by mulching them and leaves into your lawn or piling them in your garden beds. They will add nutrients back into your lawn and provide shelter for wildlife during the winter.



**Plant a native tree!** Trees provide vital habitat for wildlife and absorb more stormwater than your lawn does.

TVFC Annual Fire Prevention Open House - Thursday, October 3

**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, October 4, 2024 4:12 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "ENews October 4", Updated



**Hello Mary,**

A news article has been updated



**E-News**  
Towamencin Township

GENERAL NEWS

**[ENews October 4](#)**

**Upcoming Meetings**

The graphic features the text "DEA NATIONAL Rx TAKEBACK" in a bold, sans-serif font. "DEA NATIONAL" is in blue, "Rx" is in red, and "TAKEBACK" is in white on a red and blue background. Below the text is a photograph of a tipped-over orange pill bottle with several red and blue capsules scattered on a white surface. The text "Turn in unneeded medication for safe disposal." is centered below the image. The date and time "Saturday, October 26th, 2024 10 a.m. – 2 p.m." are displayed in red. At the bottom, the slogan "Keep them safe. Clean them out. Take them back." is in blue, followed by the website "Visit DEATakeBack.com for a collection site near you." in blue.

**DEA NATIONAL <sup>Rx</sup> TAKEBACK**

Turn in unneeded medication  
for safe disposal.

**Saturday, October 26th, 2024  
10 a.m. – 2 p.m.**

Keep them safe. Clean them out. Take them back.  
Visit [DEATakeBack.com](https://DEATakeBack.com) for a collection site near you.

[View Article](#)

---

## Recent Articles

OCTOBER 04, 2024

[ENews October 4](#)

SEPTEMBER 27, 2024

[ENews September 27](#)

**Stover, Mary**

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**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, October 11, 2024 3:09 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "Enews October 11", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Enews October 11](#)**

**Upcoming Meetings**





## TOWAMENCIN TOWNSHIP LAWN TO GARDEN WORKSHOP

Thursday, November 14, 2024 @ 6:30 pm



### About the Workshop

Join the Perkiomen Watershed Conservancy to discover the wonders of native plants, their numerous benefits, and how to choose the perfect species for your yard!

The harmful impacts of "lawn culture" and invasive plants will also be discussed along with different

**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Monday, October 14, 2024 3:50 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "Recycle with Retrievr", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Recycle with Retrievr](#)**

**Recycle with Retrievr**

In a continued effort to offer various recycling options to Township residents, Towamencin Township has recently partnered with Retrievr. This program allows residents to recycle unwanted electronics, clothing, shoes, and other household items such as bedding/curtains, without leaving your home (residential only). Retrievr is a respected company, with many relationships with surrounding municipalities, as well as, Montgomery County. Retrievr offers convenience when discarding obsolete or unused household items at a reasonable cost.

Retrievr charges a base \$12.50\* doorstep convenience fee, which includes unlimited clothing, and small electronics. \* There are other convenience fees for items that are particularly hard to collect or dispose of, see links for more details.

- For FAQ's & fees associated with Retrievr pickups, [click here](#).
- Residents can schedule pickups by visiting [Retrievr's website](#)
- Don't text, call them at 757-70-FETCH (757-703-3824) and leave a message. A support agent will contact you and schedule your pickup over the phone.





retrievr 

NEED TO RECYCLE YOUR  
OLD ELECTRONICS AND  
CLOTHING?

SCHEDULE YOUR DOORSTEP PICKUP  
TODAY AT  
[RETRIEVR.COM](https://retrievr.com)

CONVENIENCE FEES START AT ONLY \$12.50  
FOR UNLIMITED CLOTHING AND SMALL  
ELECTRONICS



@therealretrievr



---

## SCHEDULE A PICKUP

**retrievr** 



Clothing & Shoes

1. Visit their website
2. Click the schedule a pickup button
3. New or Returning Customer
4. Enter address to confirm you are included in their pickup area
5. Enter your contact information
6. Provide a summary of what items you would like to recycle (clothing and/or electronics)

7. Schedule a pickup date
8. Box or bag your items for pickup and leave at your door
9. On your selected pickup date, a pickup truck will come directly to your door



Electronics

**RETRIEVR.COM**

---

## Other Recycling Options:

### Annual Electronics Recycling Day

Each year, Towamencin Township offers an annual electronics recycling event, typically held in June at North Penn High School. Items accepted for free include: laptops, computers, peripherals, typewriters, mice, telephones, printers, fax machines, cameras, keyboards, cell phones, small appliances, calculators. Additional items accepted with fees include: TV or computer monitor, air-conditioner, microwave or dehumidifier, wooden console or projection TVs. This program is advertised each year on our website/calendar, in our Enews and on our Facebook page.

### Montgomery County Recycling Information

The Township also encourages residents to visit Montgomery County's recycling page which offers a wide array of recycling information for Montgomery County residents. [Click here to visit their website.](#) You can also contact the County Recycling line at 610-278-3618 or email [Recycling@montgomerycountypa.gov](mailto:Recycling@montgomerycountypa.gov).

## EPA Recycling - Basics & Benefits

Recycling has many benefits:

- Helps keep the earth healthy
- Reduces waste sent to landfills/incinerators
- Conserves natural resources
- Conserves energy

To learn more, visit [EPA's website for recycling basics and benefits.](#)

[View Article](#)

---

## Recent Articles

OCTOBER 14, 2024

[Recycle with Retrievr](#)

OCTOBER 11, 2024

[Enews October 11](#)

OCTOBER 04, 2024

[ENews October 4](#)

SEPTEMBER 27, 2024

[ENews September 27](#)

SEPTEMBER 20, 2024

[ENews September 20](#)

[View All News](#)

**Stover, Mary**

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**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Thursday, October 31, 2024 1:47 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "Enews October 31", Updated



**Hello Mary,**

A news article has been updated



**E-News**  
Towamencin Township

GENERAL NEWS

**[Enews October 31](#)**

# DRY CONDITIONS NOTICE



Due to the extended period of dry conditions affecting Towamencin Township and the potential for uncontrollable fire spread and wildfires, the township Fire Marshal is following the Pennsylvania Department of Conservation and Natural Resources daily wildfire danger rating scale and the fire danger forecast map. The community should be aware of Towamencin Township's outdoor burning ordinance. It takes tremendous resources and time of the township's volunteer fire department to extinguish brush fires. If you should notice a fire, please contact 911 immediately as fire spread happens rapidly. Please reference the outdoor burning ordinance, wildfire danger rating scale, and the fire danger forecast map.

Any questions please contact the Fire Marshal at 215-368-7602.

Read the Township's full Dry Condition Notice and outdoor burning ordinance [click here](#).

Monitor the [Pennsylvania Department of Conservation & Natural Resources](#) Fire Danger Forecast - [click here](#).

---

## General Election - Tuesday, November 5

The County has provided extensive information on the upcoming General Election. [Most answers can be found in this information packet.](#)





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**Montgomery County Yard Sign Recycling  
Program (November 6th - 13th)**



**Drop off your campaign yard signs from November 6<sup>th</sup> – 13<sup>th</sup>  
at these participating locations during normal operating hours.**  
Accepted materials are paperboard and plastic (corrugated and film) yard signs and metal stands.

Montgomery County will again run a campaign yard sign recycling program where signs and metal stands may be recycled after the

election. The County has provided flyers with program details and drop off sites. To view the flyers, [click here](#).

*Reminder:* Campaign signs are not permitted on Township property and will be pulled if observed/reported.

---

## Turkey Trot Registration is open!

[Register now.](#)



The poster for the Turkey Trot 5K Walk + Run Fundraising Event features a cartoon turkey wearing a green headband and red sneakers, running towards the left. The turkey has a bib with the number 13. The background includes stylized green trees and a blue sky. The text on the poster is as follows:

TOWAMENCIN SPECIAL EVENTS PRESENTS  
**TURKEY TROT  
5K WALK + RUN  
FUNDRAISING EVENT**  
**SATURDAY, NOVEMBER 9TH**  
FISCHER'S PARK - 2225 BUSTARD RD. LANSDALE

8:00 am Free Kid's Fun Run  
9:00 am 5K Walk + Run  
10:00 am Awards Ceremony

Chip Timing | Certified Course | Runners can win a free turkey  
| Medals to top 3 runners per age group  
Early Bird Registration \$35. Register now by scanning the QR code or visit:  
[www.runtheday.com](http://www.runtheday.com)

Runners registered prior to October 20th will receive a free long sleeve tech shirt.

Visit our website for full event details: [www.towamencin.org/departments/events](http://www.towamencin.org/departments/events)

A QR code is located in the bottom right corner of the poster.

---

## Upcoming Meetings


- **Budget Work Session** - Wednesday, November 6, at 6:30 pm
- **Zoning Hearing Board** meeting for Thursday, November 7 **has been cancelled**

Meetings are open to the public and residents are encouraged to attend. Meetings take place at the Meeting Hall Building of the Municipal Complex unless otherwise indicated. Meeting Hall address: 1090 Troxel Road, Lansdale. Additional parking is available at the adjacent Family Worship Center parking lot. If using the Church's lot,

we ask that our guests park on the side closest to the Township property.


## Environmental Advisory Council Workshop - Thursday, November 14

Registration link: [click here.](#)



**TOWAMENCIN TOWNSHIP  
LAWN TO GARDEN WORKSHOP**

Thursday, November 14, 2024 @ 6:30 pm



**PERKIOMEN**  
WATERSHED CONSERVANCY

**Date & Time:**  
Thursday, November 14th, 2024  
6:30 pm - 7:30 pm

**Location:**  
Towamencin Township  
Municipal Meeting Hall  
1090 Troxel Rd.  
Lansdale, PA 19446


**Cost:**  
\$15.00 - Thanks to a partnership  
with Towamencin Township's  
EAC!

**About the Workshop**

Join the Perkiomen Watershed Conservancy to discover the wonders of native plants, their numerous benefits, and how to choose the perfect species for your yard!

The harmful impacts of "lawn culture" and invasive plants will also be discussed along with different methods and tips for reducing lawn area and increasing native garden area on your property.

Thanks to a partnership with the Township's EAC, participants will receive 3 native plant plugs at a discounted cost with their registration!



**Register using the link below  
or scanning the QR code!**

<https://connect.perkiomenwatershed.org/event/towamencin-lawn-to-native-garden-workshop/e622200>

[View Article](#)



**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Thursday, November 14, 2024 4:48 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "Enews November 14", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

[Enews November 14](#)



The Montgomery County Housing Authority administers a variety of housing programs in its quest to provide safe, decent, and affordable housing for low to moderate income individuals and families, the elderly and disabled. The Housing Choice Voucher Program, HCVP, formerly known as “Section 8”, allows eligible participants who receive vouchers to search for housing. Provided the housing selected meets the requirements of the program, the family pays a portion of the rent based on a percentage of their monthly income and the remaining housing subsidy is paid directly to the landlord by MCHA on behalf of the family. This waitlist has not been opened for new applicants in years. To learn more about this program, [click here](#).

**The Montgomery County Housing Authority will be accepting applications for the Housing Choice Voucher Program Waiting List from Friday, November 15, 2024 through Thursday, November 21, 2024.**

Applications must be submitted online and are available in both English and Spanish at the following link: [Apply here](#).

---

## **Perkiomen Mapping & Flood Mitigation Study**

As part of the study, public meetings are planned to help communities make informed decisions regarding how and where to best implement stormwater management systems and projects. The **next meeting** will be held **November 19**, at Pennridge North Middle School, 1500 N. 5th Street, Perkasié, 18944. **Public participation**

is encouraged. For meeting dates and additional study information, [click here.](#)

## PERKIOMEN MAPPING & FLOOD MITIGATION STUDY

Flooding in our communities can be devastating. The Perkiomen Mapping & Flood Mitigation Study is the first phase of a long-term effort to help communities make more informed decisions regarding how and where to best implement stormwater management systems and projects.



### IDENTIFY

Identify significant flooding locations. Understand current flood patterns and the risks associated with them. Identify flood mitigation techniques and subsequent projects that can reduce severe flooding impacts.



### MODEL

Utilize hydrologic computer modeling to assess the portions of the watershed which experience the most severe flooding. Local government and public input is a crucial component in helping to build accurate models.



### INTEGRATE

Develop conceptual solutions to help mitigate the identified risks and arm local communities with baseline information to pursue funding, implement large-scale projects, and collaborate with neighboring municipalities.



### ENGAGE

Engage local homeowners through workshops and other hands-on programming, thereby providing a pathway for each to implement small-scale green stormwater infrastructure on their own properties.

## ABOUT THE STUDY

The Perkiomen Mapping & Flood Mitigation Study is a collaboration among county planning commissions, county conservation districts, local municipalities, the Perkiomen Watershed Conservancy, Representative Joe Webster's office, and other area organizations established to address flooding throughout the 362 square mile Perkiomen Creek watershed.

The Perkiomen Mapping & Flood Mitigation Study is currently underway and spans parts of the Perkiomen Creek watershed (including its five main tributaries), which spans parts of Montgomery, Berks, Bucks, and Lehigh Counties.

The Perkiomen Mapping & Flood Mitigation Study is expected to guide future flood mitigation efforts, helping communities throughout the watershed to better prepare for and respond to flood events.

## PUBLIC MEETINGS | 6 - 9 PM

- TUESDAY, NOVEMBER 12, 2024 | UPPER PROVIDENCE TOWNSHIP BUILDING
- TUESDAY, NOVEMBER 19, 2024 | PENNRIDGE NORTH MIDDLE SCHOOL
- THURSDAY, NOVEMBER 21, 2024 | UPPER PERKIOMEN HIGH SCHOOL

## LEARN MORE

[www.perkiomenwatershed.org](http://www.perkiomenwatershed.org)



**O'Donnell, Sean**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Tuesday, November 12, 2024 11:36 AM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "Environmental Advisory Council Workshop - Thursday, November 14", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Environmental Advisory Council Workshop - Thursday, November 14](#)**

is encouraged. For meeting dates and additional study information, [click here.](#)

## PERKIOMEN MAPPING & FLOOD MITIGATION STUDY

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## PUBLIC MEETINGS | 6 - 9 PM

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- THURSDAY, NOVEMBER 21, 2024 | UPPER PERKIOMEN HIGH SCHOOL

## LEARN MORE

[www.perkiomenwatershed.org](http://www.perkiomenwatershed.org)



**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, November 15, 2024 4:02 PM  
**To:** Mary Stover  
**Subject:** Towamencin Township News Article, "America Recycles Day: November 15th", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[America Recycles Day: November 15th](#)**

**Recycle, Reduce, Reuse**



Towamencin Township has partnered with Retrievr. This program allows residents to recycle unwanted electronics, clothing, shoes and other household items such as bedding without leaving your home. To learn more about Retrievr [click here](#).



powered by



**SAVE THE DATE! NOVEMBER 15TH**



**IT'S TIME TO TAKE ACTION!**

**SCHEDULE YOUR DOORSTEP PICKUP  
TODAY AT  
[RETRIEVR.COM](https://retrievr.com)**



*\*Retrievr charges a base \$12.50\* doorstep convenience fee, which includes unlimited clothing, and small electronics. Other convenience fees apply for items that are hard to collect or dispose of. Retrievr is available for residential use only.*

- For FAQ's & fees associated with Retrievr pickups, [click here](#).
- Residents can schedule pickups by scanning the QR code or [click here](#).



- Want to speak to a support agent? Call Retrievr at 757-70-FETCH (757-703-3824) and leave a message; an agent will contact you by phone.

[View Article](#)

---

## Recent Articles

NOVEMBER 15, 2024

[America Recycles Day: November 15th](#)

NOVEMBER 14, 2024

[Enews November 14](#)

NOVEMBER 12, 2024

[Environmental Advisory Council Workshop - Thursday, November 14](#)

NOVEMBER 06, 2024

[Burn Ban In Effect](#)

NOVEMBER 05, 2024

[Election Day 2024 - Tuesday, November 5](#)

[View All News](#)

You can [unsubscribe](#) or [manage your notifications](#) at any time.

This message was sent to [mstover@cksengineers.com](mailto:mstover@cksengineers.com) from an unmonitored account. Please do not reply to this email.

Towamencin Township, 1090 Troxel Road, Lansdale, PA 19446

**Stover, Mary**

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**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, December 20, 2024 3:56 PM  
**To:** Stover, Mary  
**Subject:** Towamencin Township News Article, "Enews December 20", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Enews December 20](#)**

## Perkiomen Watershed Winter Stormwater Pollution Tips



### Stormwater Pollution Prevention Tips

Winter 2023 – 2024

#### MELTING SNOW IS STORMWATER TOO!

Stormwater runoff can come in many forms, including snow melt! When the ground is frozen, melting snow can't infiltrate into the soil the way that rain water is able to. This means that even a small amount of snow can cause flooding on your property.

When snow melts, it picks debris and pollutants that make their way into nearby streams and creeks. In the winter, de-icing salts are a main contributor to stormwater pollution, causing detrimental impacts to local wildlife and water quality.

**Check out these simple steps that you can take to reduce stormwater runoff on your property this winter!**



LEARN MORE BY SCANNING THIS QR CODE OR BY VISITING OUR WEBSITE:  
[WWW.PERKIOMENWATERSHED.ORG](http://WWW.PERKIOMENWATERSHED.ORG)



**Start shoveling early!** The more snow you remove, the less salt you'll need to use.



**Pile snow in locations with the most opportunity for it to infiltrate into the ground.**



**Use de-icing salt sparingly.** Follow the product instructions and give it time to work. Sweep up any remaining material.



**Clear away any snow that may have been thrown onto storm drains.**

**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, January 10, 2025 4:01 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "ENews - January 10", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[ENews - January 10](#)**

**Upcoming Meetings**

# ATTENTION DOG OWNERS

The Township continues to receive complaints that park patrons/dog owners are not following posted park rules. For everyone's safety and enjoyment, owners must control their dogs at all times.

**Obey Park  
Rules &  
Regulations**

Towamencin code & park rules include:

- ✓ Animals must be controlled
- ✓ Animals must be leashed
- ✓ Animals may not run at large
- ✓ Owner must dispose of feces

Violations are subject to fines up to \$300 plus costs of prosecution and restitution of damages.

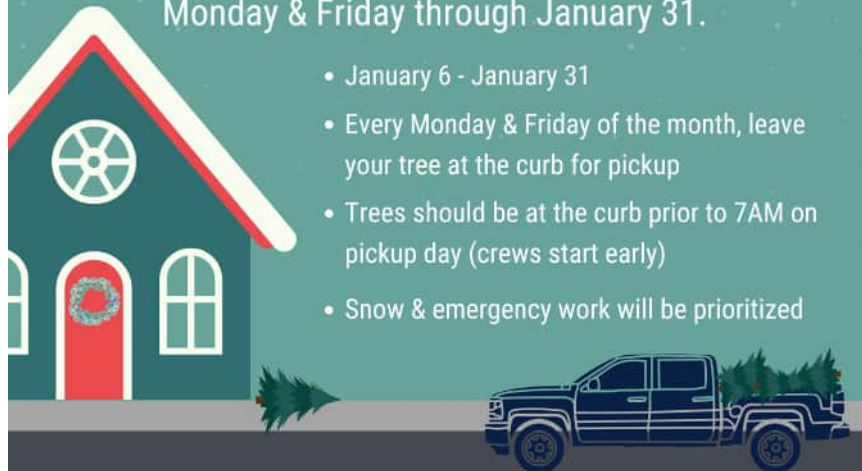
**Should a park patron encounter a problem or see a violation, the Police Department suggests calling 911 so that an officer may be dispatched to the appropriate location for assistance.**



# Christmas Tree Pickups

On January 6, our Public Works Department will begin Christmas tree pickups. Pickups will occur every Monday & Friday through January 31.

- January 6 - January 31
- Every Monday & Friday of the month, leave your tree at the curb for pickup
- Trees should be at the curb prior to 7AM on pickup day (crews start early)
- Snow & emergency work will be prioritized





**Stover, Mary**

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**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, January 31, 2025 3:47 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews - January 31", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Enews - January 31](#)**

**Upcoming Meetings**



- **Planning Commission** - Monday, February 3  
- **CANCELLED**
- **Special Meeting (Accept Resignation of Laura Smith)** -  
Tuesday, February 4, at 6 pm - [Agenda](#)
- **Zoning Hearing Board** - Thursday, February 6 -  
**CANCELLED**

Meetings are open to the public and residents are encouraged to attend. Meetings take place in the Meeting Hall Building of the Municipal Complex unless otherwise indicated. Meeting Hall address: 1090 Troxel Road, Lansdale.

**PARKING:** Additional parking is available at the adjacent Family Worship Center parking lot. If using the Church's lot, we ask that our guests park on the side closest to the Township property.

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**TOWAMENICN TOWNSHIP**

is the recipient of a **\$50,000**

**WATERSHED RESTORATION & PROTECTION GRANT**

The Watershed Restoration and Protection Program (WRPP) grant will help fund a MS4 project to convert two stormwater basins in the Grist Mill Neighborhood to dry extended detention basins. The project is being performed as part of a Multi-Municipal Pollution Reduction Plan to address the water quality within the Skippack Creek Watershed.

The Township would like to express our gratitude to State Senator Pennycuik and State Representative Hanbidge for their support and assistance with obtaining this grant. Your support has made a considerable impact on our community, and we appreciate your commitment.



**Stover, Mary**

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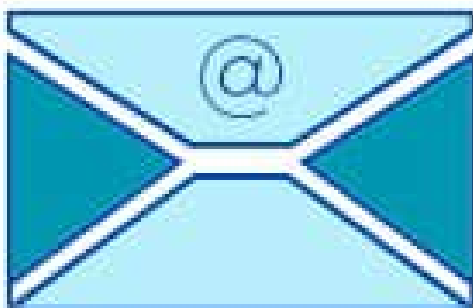
**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, February 21, 2025 3:39 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews - February 21", Updated



**Hello Mary,**

A news article has been updated

**TOWAMENCIN**



**TOWNSHIP  
E-NEWS**

GENERAL NEWS

**[Enews - February 21](#)**

**Upcoming Meetings**

- **Veterans Committee** - Monday, February 24, at 7 pm - [Agenda](#)



# COMPREHENSIVE PLAN UPDATE



*Towamencin's draft plan is now available for public view. Please check it out and provide any comments by Wednesday, March 12, 2025. The Final Public Meeting is anticipated for Spring 2025. Advance notice will be provided. Scan the QR code for a direct link to the comprehensive plan web page.*



215-368-7602



info@towamencin.org



[www.towamencin.org/information/  
comprehensive-plan-update](http://www.towamencin.org/information/comprehensive-plan-update)

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## FREE Residential Stormwater Webinar - Tuesday, February 25

[Click here](#) to register for this **FREE** webinar.



## **PennState Extension** Virtual Live Webinar

### **Residential Stormwater Solutions: Watershed-Friendly Tips February 25, 2025**

Stormwater runoff contributes to flooding and water pollution across Pennsylvania, leading to significant economic and environmental challenges. If you care for property—residential or otherwise—it's crucial to understand how runoff impacts your land and how to manage it effectively. This webinar will offer practical guidance on implementing stormwater management best practices. Learn how to protect water resources on your property or rental unit and reduce the harmful effects of runoff.

#### **Who is this webinar designed for?**

- Single-family detached homes
- Multifamily housing structures
- Condominiums/HOA members
- Apartment dwellers who care for open space outside their building
- Anyone interested in learning more about residential-scale stormwater best management practices

#### **What will you learn?**

- Where stormwater originates on your property and where it flows
- How stormwater pollutes local streams and rivers
- Resources from Penn State Extension to help you manage stormwater
- How to get Watershed-Friendly Certification for your property

This is a **FREE** event. Registration is required to receive the link for the webinar and must be completed by February 25th at 12:00 pm.

<https://web.cvent.com/event/a0c8d8fc-6b7c-4304-9360-7011d74e124d/summary>

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## **Senator Pennycuick Mobile Office Hours - Tuesday, February 25**

**Stover, Mary**

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**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Tuesday, March 18, 2025 11:50 AM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Towamencin - New Bird Town, Pennsylvania Member", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

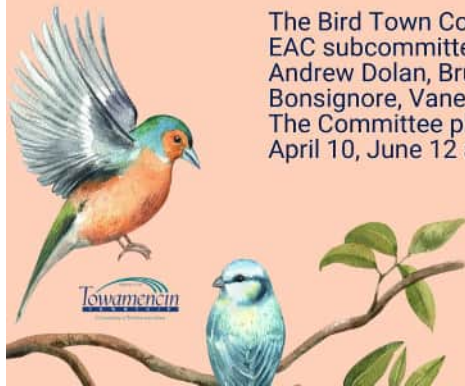
[\*\*Towamencin - New Bird Town, Pennsylvania Member\*\*](#)



## Towamencin - a new member of Bird Town Pennsylvania

On March 4th, Bird Town, PA's Outreach Committee accepted Towamencin's application, making it officially the 77th Bird Town in PA. Congratulations to the Township's Environmental Advisory Council, and lead member Vanessa Gaynor, for their dedication and efforts made over the last year leading up to this achievement!

On February 25, members of Towamencin's Bird Town Committee made a presentation to the Board of Supervisors – outlining the Bird Town, PA mission, threats to bird populations, program initiatives, and benefits provided to the municipality. At this meeting, the Board approved the EAC's participation in Bird Town, PA, passing a resolution of support.



The Bird Town Committee is organized as an EAC subcommittee with the following members: Andrew Dolan, Bruce Bailey, Donna Hegge, Kelly Bonsignore, Vanessa Gaynor and Joyce Snyder. The Committee plans to hold public meetings on April 10, June 12 and September 11.

Visit Bird Town PA's website:  
<https://birdtownpa.org/>



**BIRD TOWN\***  
PENNSYLVANIA  
birdtownpa.org

Visit Bird Town, Pennsylvania - [click here](https://birdtownpa.org/).

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### Upcoming EAC Events

# EAC SPRING CALENDAR OF EVENTS

|  |   |   |
|--|---|---|
|  <p><b>April 12</b></p> <p>9:00 AM - 12:00 PM<br/>PWC Stream Cleanup</p> <p>Join this regional event hosted by Perkiomen Watershed Conservancy and help clean up our local waterways. Towamencin Township sites will be included.</p> <p><a href="http://www.perkiomenwatershed.org/stream-clean-up">www.perkiomenwatershed.org/stream-clean-up</a></p> |  <p><b>April 19</b></p> <p>10:00 AM - 12:00 PM<br/>Invasive Species Education &amp; Removal</p> <p>Join members of EAC for a hands-on experience. Spend time identifying &amp; removing invasive plants from Fischer's Park Rain Garden, followed by interactive educational walk around the park.</p> <p><a href="http://www.towamencin.org/government/boards-commissions/environmental-advisory-council/">www.towamencin.org/government/boards-commissions/environmental-advisory-council/</a></p> |  <p><b>May 10</b></p> <p>12:00 PM - 4:00 PM<br/>Towamencin Day</p> <p>The EAC will be hosting a table at this community event at Fischer's Park. Stop by to learn about different environmental challenges facing our community, ask questions and enter to win a giveaway!</p> <p><a href="http://www.towamencin.org">www.towamencin.org</a></p> |
|--|---|---|

To learn more about the Perkiomen Watershed Conservancy's stream cleanup, [click here](#).

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**Towamencin Electronics Recycling Event - June 14**

# TOWAMENCIN TOWNSHIP ELECTRONICS RECYCLING EVENT

All Data  
Media will be  
destroyed or  
wiped!

**Saturday, June 14 - 9:00 AM to 12:00 PM**  
**North Penn High School**  
**1340 Valley Forge Road, Lansdale**

Towamencin Township is proud to offer residents the opportunity to responsibly recycle obsolete electronics.

Electronics will be recycled by eForce Compliance, Philadelphia's first Certified Responsible Recycler.

All electronic devices with a plus, NO SMOKE DETECTORS or LARGE APPLIANCES will be accepted.

Towamencin Township is proud to offer residents the opportunity to responsibly recycle obsolete electronics.

All residents must pre-register on Eventbrite:  
<https://www.eventbrite.com/e/recycling-day-anything-with-a-plus-tickets-1286265748479?aff=oddtcreator>

## Accepted Items include:

|             |                  |
|-------------|------------------|
| Laptops     | Computers        |
| Peripherals | Mice             |
| Typewriters | Small Appliances |
| Telephones  | Fax Machines     |
| Cameras     | Keyboards        |
| Cell Phones | Printers         |
| Calculators |                  |

\$30 per TV or computer monitor  
\$10 per air conditioner, microwave or dehumidifier  
\$100 per wooden console or projection TV

[View Article](#)

## Recent Articles

MARCH 18, 2025

[Towamencin - New Bird Town, Pennsylvania Member](#)

MARCH 14, 2025

[Enews March 14](#)

**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, March 28, 2025 4:36 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews March 28", Updated



**Hello Mary,**

A news article has been updated




GENERAL NEWS

**[Enews March 28](#)**

**Jigsaw Jamboree - Last Chance to Register!**





## **Perkiomen Watershed Conservancy Stream Cleanup**

Join this regional event hosted by the Perkiomen Watershed Conservancy and help clean-up our local waterways. Sign up to participate at Towamencin sites: Fischer's Park, Grist Mill Park, Green Lane Park, Firehouse Park, etc.

Want to become a volunteer? Register using the QR code or link below:

[https://www.perkiomenwatershed.org/  
stream-clean-up](https://www.perkiomenwatershed.org/stream-clean-up)



To participate in this event, [click here](https://www.perkiomenwatershed.org/stream-clean-up) to register.

---

### **Happy 50th Birthday Towamencin Police Department**

The PD will host an Open House on Sunday, April 13, from 12:00 - 2:00 PM. Join them in celebrating 50 years of service to our Community.



# EAC ANNUAL INVASIVE PLANT AWARENESS & REMOVAL EVENT

Sat.  
April  
19th

## VOLUNTEERS WANTED

Participants will meet at Fischer's Park at 9 AM,  
near the Meadow View Pavilion by the restrooms.

Please dress for working in brushy areas, and bring  
gardening gloves if possible.

EAC members will be available to certify volunteer  
hours.

To register, scan the QR code or visit our website:

[https://www.towamencin.org/government/boards  
-commissions/environmental-advisory-council/](https://www.towamencin.org/government/boards-commissions/environmental-advisory-council/)



To participate in this event, [click here](#) to register.

---

[View Article](#)

---

### Recent Articles

MARCH 28, 2025

[Enews March 28](#)

MARCH 21, 2025

[Enews - March 21](#)

MARCH 18, 2025

**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, April 4, 2025 3:13 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews - April 4", Updated



**Hello Mary,**

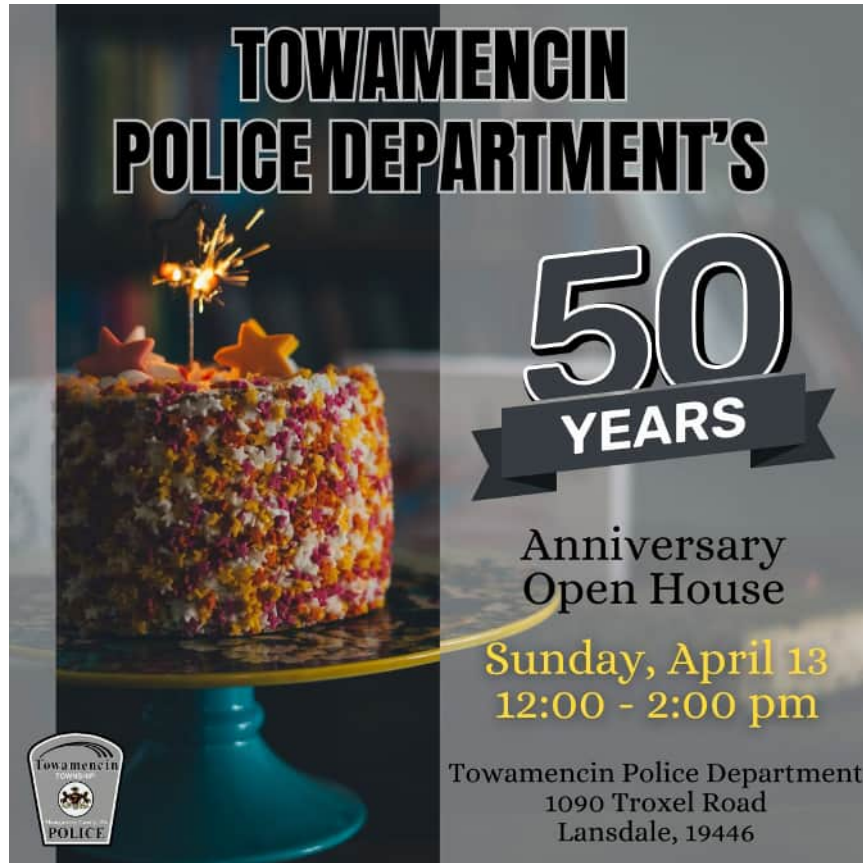
A news article has been updated



GENERAL NEWS

**[Enews - April 4](#)**

**Upcoming Meetings**



---

### **Drug Take Back Day - Saturday, April 26**

This Saturday, April 26, from 10 am to 2 pm, drop off your unwanted prescription and over-the-counter medications at our Police Department lobby. No liquids or sharps will be accepted. Address: 1090 Troxel Road, Lansdale, PA 19446.

WE'RE LOOKING FOR

# A FEW GOOD MEDS

The Montgomery County District Attorney's Office  
and Police Chiefs Association are ordering the **CODE MED!**  
Turn in your unused or expired medications for safe disposal.



**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Thursday, April 17, 2025 4:17 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews - April 17", Updated



**Hello Mary,**

A news article has been updated



## **Towamencin Township E-NEWS**

### **GENERAL NEWS**

### **Enews - April 17**

#### **Upcoming Meetings**

- **Board of Supervisors Work Session** - Wednesday, April 23, at 7 pm - [Agenda](#)



# Street Sweeping Notice

Street sweeping will take place from April 21 through April 24, between 7:00 AM and 6:00 PM.

Crews will begin on the Grist Mill and Inglewood side of the Township and work toward the Morris Road area. Residents are asked to avoid parking on the street and to keep curbs clear of objects and debris.



Join Montgomery County-Norristown Public Library for

## Preschool Story Time

Wednesday, April 23  
at 11:00 AM

Township Meeting Hall  
1090 Troxel Road, Lansdale

For more information, call the Township  
at 215-368-7602.

All children must be accompanied by a  
parent or guardian.



**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, May 9, 2025 7:30 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews - May 9", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Enews - May 9](#)**

**Upcoming Meetings**

## Perkiomen Watershed Conservancy - Annual Plant Sale this Weekend!

Scan the QR code or [click here](#) for more information.



**Perkiomen Watershed Conservancy**

**In-Person Native Plant Sale is this WEEKEND!!**

Get ready for spring with the Conservancy's annual Native Plant Sale! The in-person sale will be jam-packed with hundreds of perennials, trees, and shrubs! Over 150 species to choose from!

**Don't miss the in-person Sale!**  
**Saturday, May 10th | 9:00 am - 4:00 pm**  
**& Sunday, May 11th | 9:00 am - 1:00 pm**

The In-Person Sale will be held at the Conservancy's Dragonfly Farm located at Jacob Reiff Park in Lower Salford Township!  
(775 Quarry Road, Harleysville, PA 19438)

<https://www.perkiomenwatershed.org/native-plant-sale>



---

## Senator Pennycuick - Mobile Office Hours - Tuesday, May 13

**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, May 16, 2025 4:15 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews - May 16", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Enews - May 16](#)**

**Upcoming Meetings**

- **Veterans Committee** - Monday, May 19, at 7 pm - [Agenda](#)

Meetings are open to the public and residents are encouraged to attend. Meetings take place in the Meeting Hall Building of the Municipal Complex unless otherwise indicated. Meeting Hall address: 1090 Troxel Road, Lansdale. Additional parking is available at the adjacent Family Worship Center parking lot. If using the Church's lot, we ask that our guests park on the side closest to the Township property.

---

## **Towamencin Township Awarded a \$250,000 Montco 2040 Grant**



### **Towamencin Township Awarded a Montco 2040 Grant**

Towamencin Township is the recipient of a \$250,000 Montco 2040 Grant. The grant will be used to convert two dry stormwater basins to “dry extended detention” basins, a best management practice (BMP), which will provide increased nutrient and sediment reduction from the basin discharge. The project is being performed as part of a Multi-Municipal Pollution Reduction Plan (MMPRP) to address the water quality within the Skippack Creek Watershed, which is impaired for both nutrients and sediment.

We thank the Montgomery County Commissioners and the County’s Planning Commission for investing in our Community and fostering innovative applications aimed at implementing the County Comprehensive Plan, Montco 2040: A Shared Vision.



---

**Primary Election is on Tuesday, May 20 - Get Out to Vote!**



## CELEBRATING BIRDING AT FISCHER'S PARK

**SATURDAY, JUNE 14**

**7:30 am to 9:30 am**

Towamencin Township has recently been officially designated as one of PA's newest Bird Towns, confirming the Township's dedication to preserving and enhancing the area's natural environment.

Join Andrew Dolan and other Valley Forge Audubon Society volunteer guides for an early-morning 1+ mile birding outing. Fischer's Park is a great example of natural wonders well-worth preserving, including walking trails, woods along Towamencin Creek, and open fields. At least 148 species of birds have been logged as visiting or living there.

Since it's also Father's Day this weekend, we'll highlight a few fun facts about the habits and behaviors of various "bird dads" identified as we explore. The route usually takes about 2 hours, although participants may leave at any time.



All ages and abilities are welcome, including children if accompanied by an adult. Sturdy walking shoes are recommended, and of course, bring binoculars if you have them. We will have a few pair to lend.

Accessible restrooms are available on site.

---

**Towamencin Summer Concert Series - Join us!**

**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, June 6, 2025 4:16 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews - June 6", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Enews - June 6](#)**

**Upcoming Meetings**



Did you know [Morgan Log House](#) has hosted three archaeological digs on its property? Ever wondered what's beneath your feet? Join us for a hands-on, interactive Metal Detecting Workshop. Meet treasure hunter David Poland, who's been metal detecting for over 30 years. Discover the amazing artifacts he's uncovered and hear the stories behind them. Audience members may even get a chance to hunt for hidden treasures right on the historic grounds of Morgan Log House! Recommended for ages 8 and up, including teens and adults. Come ready to dig into history—you never know what you might find! Just \$5 per person! – [Purchase tickets.](#)

---

### **Annual Electronic Recycling Event - Saturday, June 14 (9 am - 12 pm)**

Don't forget to take advantage of our annual electronic recycling event on Saturday, June 14, from 9 am - 12 pm. This service is available to all Towamencin residents and small businesses with less

than 50 employees. No smoke detectors or large appliances will be accepted. Residents must register through [Eventbrite](#).

## TOWAMENCIN ELECTRONIC RECYCLING EVENT

Towamencin Township is proud to offer residents the opportunity to responsibly recycle obsolete electronics.

Electronics will be recycled by eForce Compliance, Philadelphia's first Certified Responsible Recycler.

All electronic devices with a plug, NO SMOKE DETECTORS or LARGE APPLIANCES will be accepted.

Towamencin Township is proud to offer residents the opportunity to responsibly recycle obsolete electronics.

9 AM - 12 PM  
**14**  
JUNE

**NORTH PENN  
HIGH SCHOOL**  
1340 S. VALLEY FORGE RD  
LANSDALE, PA 19446

\$30 per TV or computer monitor  
\$10 per air conditioner, microwave or dehumidifier  
\$100 per wooden console or projection TV

### Accepted Items include:

|             |                  |
|-------------|------------------|
| Laptops     | Computers        |
| Peripherals | Mice             |
| Typewriters | Small Appliances |
| Telephones  | Fax Machines     |
| Cameras     | Keyboards        |
| Cell Phones | Printers         |
| Calculators |                  |



**All residents must pre-register on Eventbrite:**  
<https://www.eventbrite.com/e/recycling-day-anything-with-a-plug-tickets-1286265748479?aff=oddtcreator>

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**Come Celebrate Towamencin's New Bird Town  
Status with a Bird Outing - Saturday, June 14**

**Stover, Mary**

---

**From:** Towamencin Township Notifications <noreply@catapultweb.com>  
**Sent:** Friday, June 13, 2025 4:25 PM  
**To:** Stover, Mary  
**Subject:** [External] Towamencin Township News Article, "Enews - June 13", Updated



**Hello Mary,**

A news article has been updated



GENERAL NEWS

**[Enews - June 13](#)**

**Upcoming Meetings**



- **America 250 Committee** - Monday, June 16, at 7 pm  
(Meeting Hall classroom)

Meetings are open to the public and residents are encouraged to attend. Meetings take place in the Meeting Hall Building of the Municipal Complex unless otherwise indicated. Meeting Hall address: 1090 Troxel Road, Lansdale. Additional parking is available at the adjacent Family Worship Center parking lot. If using the Church's lot, we ask that our guests park on the side closest to the Township property.

---

## **Join Us This Saturday, June 14th, for Two Environmental Events!**

1. **Annual Electronics Recycling Events - (9 am - 12 pm)**
  - Don't forget to take advantage of our annual electronic recycling event tomorrow morning. This service is available to all Towamencin residents and small businesses with less than 50 employees. Residents must register through [Eventbrite](#).
    - Location: North Penn High School parking lot - 1340 S. Valley Forge Road, Lansdale
2. **Celebrate Towamencin's Bird Town Status with a Bird Outing - (7:30 - 9:30 am)**
  - Location: Fischer's Park - 2225 Bustard Road, Lansdale

## Two Events Saturday Morning

### TOWAMENCIN ELECTRONIC RECYCLING EVENT

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**9 AM - 12 PM**  
14  
**JUNE**

**NORTH PENN HIGH SCHOOL**  
 1340 S. VALLEY FORGE RD.  
 LANSDALE, PA 19446

**Accepted items include:**

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| Laptops     | Computers        |
| Peripherals | Mice             |
| Typewriters | Small Appliances |
| Telephones  | Fax Machines     |
| Cameras     | Keyboards        |
| Cell Phones | Printers         |
| Calculators |                  |

**Prices:**  
 \$30 per TV or computer monitor  
 \$10 per air conditioner, microwave or dehumidifier  
 \$100 per wooden console or projection TV

**All residents must pre-register on Eventbrite:**  
<https://www.eventbrite.com/e/recycling-day-anything-with-a-plug-tickets-12862657484797aff=oddtcreator>

### CELEBRATING BIRDING AT FISCHER'S PARK

Towamencin Township has recently been officially designated as one of PA's newest Bird Towns, confirming the Township's dedication to preserving and enhancing the area's natural environment.

Join Andrew Dolan and other Valley Forge Audubon Society volunteer guides for an early-morning 1+ mile birding outing. Fischer's Park is a great example of natural wonders well-worth preserving, including walking trails, woods along Towamencin Creek, and open fields. At least 148 species of birds have been logged as visiting or living there.

Since it's also Father's Day this weekend, we'll highlight a few fun facts about the habits and behaviors of various "bird dads" identified as we explore. The route usually takes about 2 hours, although participants may leave at any time.

All ages and abilities are welcome, including children if accompanied by an adult. Sturdy walking shoes are recommended, and of course, bring binoculars if you have them. We will have a few pairs to lend.

Accessible restrooms are available on site.

SATURDAY, JUNE 14

7:30 am to 9:30 am

## Montgomery County Household Hazardous Waste Collection Dates

### Next event, June 21 - Norristown Area High School

Registration is now available for the County's Household Hazardous Waste events. This collection is for residents only and not for businesses or contractors. Learn more about these upcoming recycle events - View the [MontCo Hazardous Waste Flyer](#) to see what items can and can't be recycled.

- [Accepted & Unacceptable HHW List](#)
- [Register here](#)

# MONTCO 2025 Household Hazardous Waste Collection Program

## HOUSEHOLD HAZARDOUS WASTE 2025 MONTGOMERY COUNTY, PA RESIDENTIAL EVENTS By Appointment Only. Preregistration is Required.

Register at [www.MontcoPARecycles.org](http://www.MontcoPARecycles.org)

### DATES:

**Saturday, April 26**  
Indian Valley Middle School  
150 Maple Avenue, Harleysville

**Saturday, June 7**  
Temple University-Ambler Campus  
Enter at 1431 E. Butler Pike, Ambler

**Saturday, June 21**  
Monticello Area High School  
1500 Eagle Drive, Nazareth

**Saturday, June 28**  
Abington Middle School  
Enter at 2056 Skopushtana Road, Abington

**Saturday, September 20**  
Spring-Ford 8th Grade Center  
400 South Lewis Road, Haysunk

**SUNDAY, October 12**  
Lower Merion Transfer Station  
1500 N. Woodbine Avenue, Penn Valley

Free residential collection events are held outdoors. There are no permanent drop-off locations, only these collection events. Montco residents may also attend any Household Hazardous Waste event held by Bucks, Chester, Delaware, or Philadelphia Counties.

Please do not contact the host sites, as they are not affiliated with the events.

In case of severe weather, call 610-278-3618, option 6 for event status.

Contact us at:  
[Recycling@MontgomeryCountyPA.gov](mailto:Recycling@MontgomeryCountyPA.gov)  
610-278-3618



### ACCEPTABLE HOUSEHOLD MATERIALS

| PAINT PRODUCTS         | OUTDOOR PRODUCTS      | AUTOMOTIVE PRODUCTS | HOUSEHOLD PRODUCTS    | HOUSEHOLD OTHER                  |
|------------------------|-----------------------|---------------------|-----------------------|----------------------------------|
| Decorative             | Sealing/Preservatives | Grease & Lubricants | Chemical              | Auto (Excludes Oil & Antifreeze) |
| Architectural          | Wood Glue             | Auto Antifreeze     | Auto Antifreeze       | Auto Antifreeze                  |
| Decorative & Specialty | Wood Decking/Sealing  | Automotive Grease   | Wood & Vinyl Cleaners | Automotive Grease                |
| Automotive Grease      | Automotive Grease     | Automotive Grease   | Automotive Grease     | Automotive Grease                |
| Auto Grease            | Auto Grease           | Auto Grease         | Auto Grease           | Auto Grease                      |
| Auto Grease            | Auto Grease           | Auto Grease         | Auto Grease           | Auto Grease                      |
| Auto Grease            | Auto Grease           | Auto Grease         | Auto Grease           | Auto Grease                      |
| Auto Grease            | Auto Grease           | Auto Grease         | Auto Grease           | Auto Grease                      |
| Auto Grease            | Auto Grease           | Auto Grease         | Auto Grease           | Auto Grease                      |
| Auto Grease            | Auto Grease           | Auto Grease         | Auto Grease           | Auto Grease                      |

### UNACCEPTABLE MATERIALS

|                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|
| Flammable & Corrosive | Flammable & Corrosive | Flammable & Corrosive | Flammable & Corrosive |
| Flammable & Corrosive | Flammable & Corrosive | Flammable & Corrosive | Flammable & Corrosive |
| Flammable & Corrosive | Flammable & Corrosive | Flammable & Corrosive | Flammable & Corrosive |
| Flammable & Corrosive | Flammable & Corrosive | Flammable & Corrosive | Flammable & Corrosive |

\* None of the above paint products are acceptable for disposal at these events. They must be disposed of at a hazardous waste facility.

### DROP OFF GUIDELINES

- Leave items at home that are not for the event so that they are not removed accidentally.
- If you need a gas can or container removed, please leave it in a location that you want to keep it.
- You may arrive any time within your registered appointment window.
- Please print out and read or enter your name and appointment time on a piece of paper and place it on your dashboard where it is visible to event staff.
- This event is for residents only. Please contact your appointment if you are a business or contractor.
- No 25-gallon or larger containers will be accepted.
- Overweight items will not be accepted.
- Businesses and contractors will be returned away to commercial waste disposal.
- Drop off materials in original containers with labels. Some must be double-bagged. Do not mix materials.
- Transportation to all containers is provided on-site. There is no charge for this service.
- No 25-gallon or larger containers allowed. Five-gallon buckets are the largest acceptable container. Maximum amount accepted per vehicle is 50 gallons or 500 pounds.
- There are no permanent drop-off locations at this event. All hazardous household waste must be dropped off at this event.

For more information, visit the link below or scan the QR code

<https://www.montgomerycountypa.gov/706/Household-Hazardous-Waste-Collection-Pro>



## **Appendix F:**

## **Facebook Post**



## Grist Mill Park Improvement Project Update



Although we've experienced a significant amount of rain recently, progress on the Grist Mill Park Improvement Project continues steadily. The new playground equipment and play surface have been successfully installed. The project remains on schedule, with completion expected by mid-late July. Once finished, residents will be able to enjoy a fully inclusive playground, a pavilion, a basketball court, a designated handicapped parking area, fencing, and a scenic perimeter trail.

As various components of the project are completed, they may appear ready for use. However, for the safety of all visitors, certain areas will remain fenced off and off-limits until the entire project is officially complete. We appreciate your understanding.



**For ongoing updates, please stay connected through our e-newsletter and Facebook page.**





Towamencin Township

June 5 · 🌐

...

Our annual electronics recycling event is around the corner 🌱. Take inventory of your obsolete technology. Use link to register.

<https://www.eventbrite.com/e/recyclin...> See more

# TOWAMENCIN TOWNSHIP ELECTRONICS RECYCLING EVENT

All Data  
Media will be  
destroyed or  
wiped!

**Saturday, June 14 - 9:00 AM to 12:00 PM**  
**North Penn High School**  
**1340 Valley Forge Road, Lansdale**

Towamencin Township is proud to offer residents the opportunity to responsibly recycle obsolete electronics.

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All residents must pre-register on Eventbrite:  
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## Accepted Items include:

|             |                  |
|-------------|------------------|
| Laptops     | Computers        |
| Peripherals | Mice             |
| Typewriters | Small Appliances |
| Telephones  | Fax Machines     |
| Cameras     | Keyboards        |
| Cell Phones | Printers         |
| Calculators |                  |

\$30 per TV or computer monitor  
\$10 per air conditioner, microwave or dehumidifier

\$100 per wooden console or projection TV





Come Celebrate Towamencin's New Bird Town Status with a Bird Outing - Saturday, June 14

# CELEBRATING BIRDING AT FISCHER'S PARK

SATURDAY, JUNE 14

7:30 am to 9:30 am

Towamencin Township has recently been officially designated as one of PA's newest Bird Towns, confirming the Township's dedication to preserving and enhancing the area's natural environment.

Join Andrew Dolan and other Valley Forge Audubon Society volunteer guides for an early-morning 1+ mile birding outing. Fischer's Park is a great example of natural wonders well-worth preserving, including walking trails, woods along Towamencin Creek, and open fields. At least 148 species of birds have been logged as visiting or living there.

Since it's also Father's Day this weekend, we'll highlight a few fun facts about the habits and behaviors of various "bird dads" identified as we explore. The route usually takes about 2 hours, although participants may leave at any time.

All ages and abilities are welcome, including children if accompanied by an adult. Sturdy walking shoes are recommended, and of course, bring binoculars if you have them. We will have a few pair to lend.

Accessible restrooms are available on site.





Celebrating Our Public Works Staff During National Public Works Week 🇺🇸



# Public Works

## the backbone of the community

We truly appreciate the hard work and dedication of our public works team. Their commitment to keeping our community safe, clean, and well-maintained plays a key role in enhancing the well-being of all residents. Every project they complete helps ensure our community remains strong and thriving. Here's to you!





Towamencin Day is tomorrow! Visit the EAC Booth 🌱

Join EAC for a fun, eco-friendly aftern... See more

COME SEE US AT

# TOWAMENCIN DAY

**EAC BOOTH | SATURDAY, MAY 10  
FISCHER'S PARK - 12 TO 4 PM**

JOIN US FOR A FUN, ECO-FRIENDLY AFTERNOON



## TOWAMENCIN EAC

Projects, giveaways &  
activities for kids



**BIRD TOWN<sup>®</sup>**  
PENNSYLVANIA  
[birdtownpa.org](http://birdtownpa.org)

## BIRD TOWN PENNSYLVANIA

Learn how we're creating a  
better habitat for birds & wildlife



## JOURNEYWORK

Discover how to turn your  
lawn into a native plant haven

FEATURING



## NPHS - ENACT CLUB

Meet the students leading  
local environment action



Plant giveaways



Kid Activities



Awesome Local Groups

**DON'T MISS IT - BRING THE FAMILY, SPREAD THE WORD, & HELP  
US GROW A GREENER & MORE SUSTAINABLE TOWAMENCIN**

#TowamencinDay #BirdTown #NativePlants #Sustainability #NPHSENACT #Journeywork #EAC





Towamencin Township

May 8 · 🌐

...

**Perkiomen Watershed Conservancy - Native Plant Sale is this WEEKEND!**

For more information scan the QR Code or visit:

<https://www.perkiomenwatershed.org/native-plant-sale>

## Perkiomen Watershed Conservancy

**In-Person Native Plant Sale is  
this WEEKEND!!**

Get ready for spring with the Conservancy's annual Native Plant Sale! The in-person sale will be jam-packed with hundreds of perennials, trees, and shrubs! Over 150 species to choose from!

**Don't miss the in-person Sale!**  
**Saturday, May 10th | 9:00 am - 4:00 pm**  
**& Sunday, May 11th | 9:00 am - 1:00 pm**

The In-Person Sale will be held at the Conservancy's Dragonfly Farm located at Jacob Reiff Park in Lower Salford Township!

(775 Quarry Road, Harleysville, PA 19438)

<https://www.perkiomenwatershed.org/native-plant-sale>







Towamencin Township

April 18 · 🌐

...

Come join our Environmental Advisory Council tomorrow morning at Fischer's Park to learn and knock out invasives together!

Fischer's Park - 2225 Bustard Road, Lansdale... See more

# EAC ANNUAL INVASIVE PLANT AWARENESS & REMOVAL EVENT

Sat.  
April  
19th

## VOLUNTEERS WANTED

Participants will meet at Fischer's Park at 9 AM, near the Meadow View Pavilion by the restrooms.

Please dress for working in brushy areas, and bring gardening gloves if possible.

EAC members will be available to certify volunteer hours.

To register, scan the QR code or visit our website:

<https://www.towamencin.org/government/boards-commissions/environmental-advisory-council/>





Towamencin Township

April 16 · 🌐

...

### North Penn Water Authority Annual Flushing Program

The tentative flushing schedule for Towamencin is April 20 through May 18. To learn more, visit NPWA's website:

[http...](http://npwa.org) See more

# North Penn Water Authority

## Annual Hydrant Flushing



Our Annual Flushing Program will begin on March 30 and run through May 25, weather permitting.

Flushing is done at night between 8:00 p.m. and 4:00 a.m. and during the day between 8:00 a.m. and 3:00 p.m. As a result, some customers may notice discolored water and/or lower than normal water pressure. If discoloration occurs, run cold water for about 10 minutes and your water should clear up.

Annual inspection and flushing of fire hydrants increases public safety by ensuring that hydrants will function when necessary and also helps to improve water quality.

## Tentative Schedule

### March 30 - April 20

Lansdale Borough  
Hatfield Borough  
New Britain Borough  
Hatfield Township  
New Britain Township  
Upper Gwynedd Township

### April 20 - May 18

Skippack Township  
Worcester Township  
Lower Salford Township  
Salford Township  
Franconia Township  
Towamencin Township

### May 4 - May 20

Sellersville Borough

### May 18 - May 25

Souderton Borough  
Hilltown Township



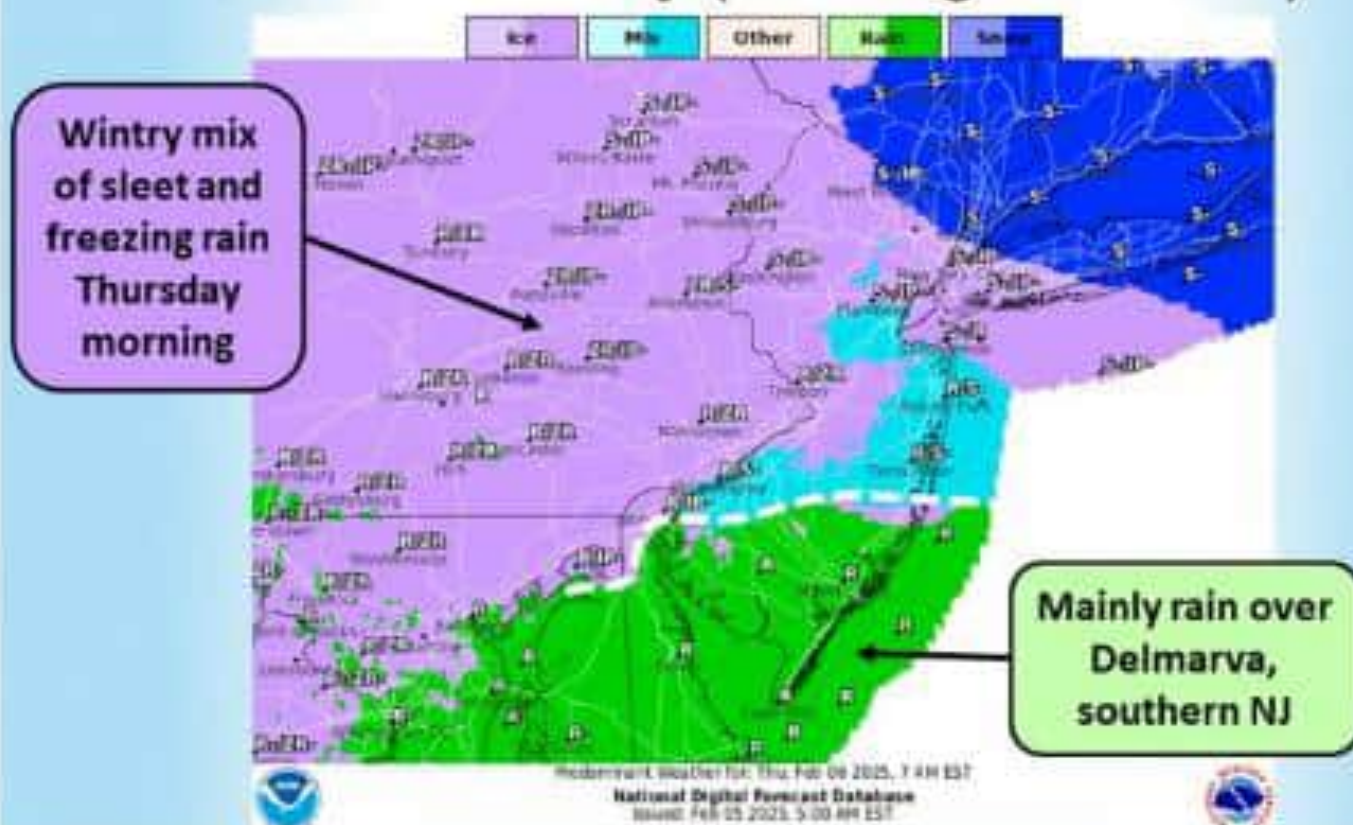




NATIONAL WEATHER SERVICE  
NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION



## Forecast Precipitation Type 7 AM Thursday (*morning commute*)



Weather Forecast Office  
Philadelphia/Mount Holly



@NWS\_MountHolly



NWSMountHolly

Presentation Created  
2/5/2025 8:30 AM



US National Weather Service Philadelphia/Mount Holly

February 5 · 🌐

Our smorgasbord of wintry precip tonight through Thursday morning remains on track. Here is a snapshot of what things may look like around 7AM to kick off the morning c... See more

4

1 share



Like



Share



Towamencin Township limited who can comment on this post.



# TOWAMENCIN TOWNSHIP

is the recipient of a **\$50,000**

## WATERSHED RESTORATION & PROTECTION GRANT

The Watershed Restoration and Protection Program (WRPP) grant will help fund a M54 project to convert two stormwater basins in the Grist Mill Neighborhood to dry extended detention basins. The project is being performed as part of a Multi-Municipal Pollution Reduction Plan to address the water quality within the Skippack Creek Watershed.

The Township would like to express our gratitude to State Senator Pennycuik and State Representative Hanbidge for their support and assistance with obtaining this grant. Your support has made a considerable impact on our community, and we appreciate your commitment.



### Public Works to begin roadside tree trimming in late January - early February

## Roadside Tree Trimming to begin in January

Towamencin's Board of Supervisors understand that it can be difficult for individual homeowners to perform tree maintenance. Therefore, they have authorized the Public Works Department to trim trees on the street side of neighborhoods, wherever they are likely to impact traffic or obstruct street signs.

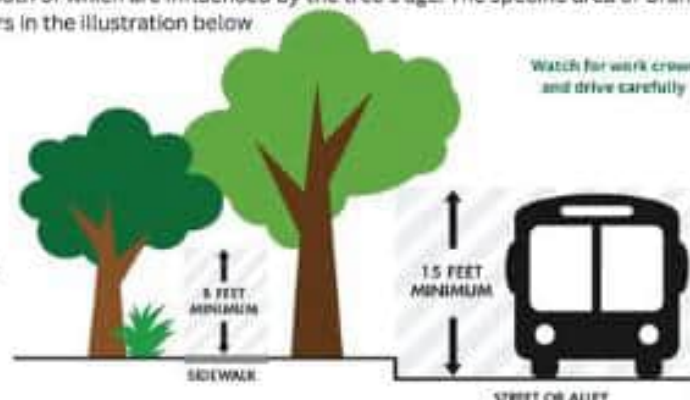
**At the end of January through February, Township staff will begin tree trimming work on limbs that extend into the street right-of-way. Crews will remove and dispose of debris. This work will be completed as weather permits.**

Should you prefer to have your own arborist or landscaper perform this work, please make arrangements prior to the end of January. **Work will begin on the west side of Sumneytown Pike heading towards Bustard Road, after moving east of Sumneytown Pike towards Forty Foot Road.**

Under Township Ordinances, maintaining street-side trees is the responsibility of the property owner. This initiative is a public safety measure which involves trimming branches back to a 15-foot height to keep limbs from brushing against vehicles or obstructing views.

Good arbor practices will determine the exact trimming details for each tree, but in each case it will be with a view to preserving the tree's health and appearance, both of which are influenced by the tree's age. The specific area of branch growth that is affected on mature trees appears in the illustration below.

Trimming vegetation is one of the most effective ways to improve visibility and enhance traffic safety in our neighborhoods. Overgrown trees and shrubs endangers everyone when they block our view of traffic signs, pedestrians, bicyclists, and motorists. Trees not properly trimmed also pose risks to vehicles, and can incur injury to itself if struck by a vehicle.







Towamencin Township

January 3 · 🌐

...

### Christmas Tree Pickups

Our Public Works Department will start Christmas tree pickups on Monday, January 6th. Pickups will continue on a Monday/Friday schedule through J... See more



# Christmas Tree Pickups

On January 6, our Public Works Department will begin Christmas tree pickups. Pickups will occur every Monday & Friday through January 31.

- January 6 - January 31
- Every Monday & Friday of the month, leave your tree at the curb for pickup
- Trees should be at the curb prior to 7AM on pickup day (crews start early)
- Snow & emergency work will be prioritized







Towamencin Township

November 14, 2024 · 🌐

...

**America Recycles Day: November 15th**

Towamencin Township has partn... See more



powered by

**retrievr** 

**SAVE THE DATE! NOVEMBER 15TH**

**I**  **AMERICA**  
RECYCLES DAY

**IT'S TIME TO TAKE ACTION!**

**SCHEDULE YOUR DOORSTEP PICKUP  
TODAY AT  
[RETRIEVR.COM](https://retrievr.com)**





## Perkiomen Mapping & Flood Mitigation Study

Flooding in our communities can be ... See more

# PERKIOMEN MAPPING & FLOOD MITIGATION STUDY

Flooding in our communities can be devastating. The Perkiomen Mapping & Flood Mitigation Study is the first phase of a long-term effort to help communities make more informed decisions regarding how and where to best implement flood-mitigation management systems and projects.



### IDENTIFY

Identify significant flooding locations. Understand current flood patterns and the risks associated with them. Identify flood mitigation techniques and subsequent projects that can reduce severe flooding impacts.



### MODEL

Utilize hydrologic computer modeling to assess the portions of the watershed which experience the most severe flooding. Local government and public input is a critical component in helping to build accurate models.



### INTEGRATE

Develop integration solutions to help integrate the identified risks and any flood communities with broader information for future funding, implement large-scale projects, and collaborate with neighboring municipalities.



### ENGAGE

Engage local homeowners through workshops and other hands-on programming, thereby providing a platform for them to experience what scale their community participation is for flood projects.

## ABOUT THE STUDY

The Perkiomen Mapping & Flood Mitigation Study is a collaboration among county planning commissions, county conservation districts, local municipalities, the Perkiomen Watershed Conservancy, Representative Joe Webster's office, and other area organizations established to address flooding throughout the 362 square mile Perkiomen Creek watershed.

The Perkiomen Mapping & Flood Mitigation Study is currently underway and spans parts of the Perkiomen Creek watershed (including its five main tributaries), which spans parts of Montgomery, Berks, Bucks, and Lehigh Counties.

The Perkiomen Mapping & Flood Mitigation Study is expected to guide future flood mitigation efforts, helping communities throughout the watershed to better prepare for and respond to flood events.

## PUBLIC MEETINGS | 6 - 9 PM

- TUESDAY, NOVEMBER 12, 2024 | UPPER PROVIDENCE TOWNSHIP BUILDING
- TUESDAY, NOVEMBER 19, 2024 | PENNBRIDGE NORTH MIDDLE SCHOOL
- THURSDAY, NOVEMBER 21, 2024 | UPPER PERKIOMEN HIGH SCHOOL

## LEARN MORE

[www.perkiomenwatershed.org](http://www.perkiomenwatershed.org)







Towamencin Township

November 12, 2024 · 🌐

...

**Environmental Advisory Council Fall Workshop – Thursday, November 14** 🌿

*There's still time to register, with a few spots remaining... See more*



## TOWAMENCIN TOWNSHIP LAWN TO GARDEN WORKSHOP

Thursday, November 14, 2024 @ 6:30 pm



### Date & Time:

Thursday, November 14th, 2024  
6:30 pm - 7:30 pm

### Location:

Towamencin Township  
Municipal Meeting Hall  
1090 Troxel Rd.  
Lansdale, PA 19446

Cost:

### About the Workshop

Join the Perkiomen Watershed Conservancy to discover the wonders of native plants, their numerous benefits, and how to choose the perfect species for your yard!

The harmful impacts of "lawn culture" and invasive plants will also be discussed along with different methods and tips for reducing lawn area and increasing native garden area on your property.

Thanks to a partnership with the Township's EAC, participants will receive 3 native plant plugs at a discounted cost with their registration!



**Register using the link below  
or scanning the QR code!**





Towamencin Township

November 4, 2024 - 🌐

...

### Extremely Dry Weather Conditions

Due to the extended dry weather conditions, the Township has prepared a dry conditions notice. Read the Township's notice:

<https://www.towamencin.org/2024/11/04/dry-conditions-notice/> See more



Due to the extended period of dry conditions affecting Towamencin Township and the potential for uncontrollable fire spread and wildfires, the township Fire Marshal is following the Pennsylvania Department of Conservation and Natural Resources daily wildfire danger rating scale and the fire danger forecast map. The community should be aware of Towamencin Township's outdoor burning ordinance. It takes tremendous resources and time of the township's volunteer fire department to extinguish brush fires. If you should notice a fire, please contact 911 immediately as fire spread happens rapidly. Please reference the outdoor burning ordinance, wildfire danger rating scale, and the fire danger forecast map.

Any questions please contact the Fire Marshal at 215-368-7602.





Towamencin Township

October 9, 2024 · 🌐

...



Pennsylvania Resources Council

October 7, 2024 · 🌐

Still time to register for Thursday's [#ewaste](#) [#recycling](#) collection in Lansdale, [Montgomery County, PA](#). Dispose of televisions, computers and other electronic equipment... See more

## ELECTRONICS RECYCLING COLLECTION



**WHITE'S ROAD PARK**  
**MONTGOMERY COUNTY**

**THURSDAY**  
**OCT 10, 2024**

**ADVANCE REGISTRATION REQUIRED**

[prc.org/CollectionEvents](https://prc.org/CollectionEvents) • 610-353-1555 x3

EVENTBRITE.COM

Electronics Recycling Collection @ White's Road Park,  
Montgomery County



Sign up





**PERKIOMEN**  
WATERSHED CONSERVANCY



# Stormwater Pollution Prevention Tips

FALL 2024

## MANAGING STORMWATER ON YOUR PROPERTY THIS FALL

Fall is here! And with this change in season comes cooler temperatures, shorter days, and lots of yard work to tackle. When crossing off your to-do-list this fall, it's important to remember that yard debris is a significant source of stormwater pollution.

Organic plant material like grass clippings, leaves, and shrubbery trimmings can carry pesticides and fertilizers from your yard and deposit them in local waterways. Piles of leaves and grass clippings will overload a stream's ability to process leaf litter, causing nutrient pollution and oxygen depletion. Yard debris can also clog culverts, storm drains and pipes causing flooding.

*Luckily, there are some easy steps that you can take on your property to reduce pollution and improve water quality!*



LEARN MORE BY SCANNING THIS QR  
CODE OR VISITING OUR WEBSITE:  
[WWW.PERKIOMENWATERSHED.ORG](http://WWW.PERKIOMENWATERSHED.ORG)



**Do not pile leaves or other yard waste near streams or drainage areas** where they can blow or wash into creeks. Use designated leaf collection bags for curbside leaf recycling.



**Do not blow leaves or grass clippings off of your property** into streets, streams, ponds or drainage swales.



**Recycle grass clippings and their nutrients** by mulching them and leaves into your lawn or piling them in your garden beds. They will add nutrients back into your lawn and provide shelter for wildlife during the winter.



**Plant a native tree!** Trees provide vital habitat for wildlife and absorb more stormwater than your lawn does.





**PERKIOMEN**  
WATERSHED CONSERVANCY



# STORMWATER POLLUTION PREVENTION TIPS

Summer 2024

## SUMMER STORMWATER MANAGEMENT

Summer is here, a time to for relaxing vacations, cookouts with family and friends, and lounging at the beach or by the pool! While the summer months provide us with opportunity recharge our batteries, it's important to remember that even though we go on vacation, stormwater pollution does not!

Heavy rains brought on by summer thunderstorms causes runoff to rush into local waterways, picking up litter, chemicals and other pollutants along the way. Additionally, hot pavement leads to an increase in the temperature of stormwater entering creeks and streams which can be detrimental for aquatic life.

Luckily there are some easy steps that you can take to reduce stormwater pollution on your property this summer!



Water your lawn and garden slowly. Only water your grass and plants when necessary. When watering, do so slowly to reduce runoff. Consider investing in irrigation hoses or gator bags!



Wash your car at a car wash. When you wash your car on your driveway or the street, grease, soap and oil can wash into streams and creeks.



Never dump anything down storm drains. Remember that storm drains empty directly into local waterways without being treated. This means that whatever enters a storm drain will flow into streams and creeks.



Direct downspouts over porous, not paved surfaces. Where possible, direct downspouts into garden beds, your lawn or consider installing a rain barrel.



LEARN MORE BY SCANNING THIS QR  
CODE OR BY VISITING OUR WEBSITE:  
[WWW.PERKIOMENWATERSHED.ORG](http://WWW.PERKIOMENWATERSHED.ORG)

# **Appendix G:**

## **Educational Signs at Fischer's Park**





Native Plants Educational Sign at Fischer's Park



Wetlands Educational Sign at Fischer's Park





Rain Garden Educational Sign at Fischer's Park



Riparian Area Educational Sign at Fischer's Park

# **Appendix H:**

## **Public Involvement/Participation Plan**

**Public Involvement & Participation Plan**

|  |   |  |  |
|--|---|--|--|
| Permittee Name:  | Towamencin Township, Montgomery County, PA                                  |  |  |
| Mailing Address: 1090 Troxel Road  | City, State, Zip: Lansdale, PA 19446  |  |  |
| MCM #2 Contact Person: David Kraynik   | Title: Township Manager   |  |  |
| Phone Number: 215-368-7602   | Email: <a href="mailto:dkraynik@towamencin.org">dkraynik@towamencin.org</a> |  |  |
| <p>Plan Goal: To encourage involvement in the municipal stormwater management program by providing opportunities for the public to participate in the decision-making processes associated with the development, implementation, and update of the Township's stormwater-related policies, ordinances, and projects.</p> |   |  |  |
| <b>Target Audiences</b>  |   |  |  |
| <p>Efforts shall be made to engage the following groups in the decision-making processes associated with the development, implementation, and update of the SWMP and activities.</p>   |   |  |  |
| <p>Township Residents<br/> Township Businesses<br/> (Target Audiences and Strategies for Public Participation are included on the attached chart)</p>  |   |  |  |
| <b>Routine Communications</b>  |   |  |  |
| <p>The following methods shall be used to communicate with target audiences listed above.</p>  |   |  |  |
| <input checked="" type="checkbox"/> Municipal Website<br>url: <a href="http://towamencin.org">towamencin.org</a>   |   | <input checked="" type="checkbox"/> Flyers<br>Location: <u>Township Building Lobby</u> |  |
| <input checked="" type="checkbox"/> Municipal Newsletter   |   | Location: _____  |  |
| <input checked="" type="checkbox"/> Social Media Outreach  |   | Location: _____  |  |
| <input checked="" type="checkbox"/> Facebook   |   | <input checked="" type="checkbox"/> Target email                                       |  |
| <input type="checkbox"/> Twitter   |   | Email list: <u>ENews through sign-up on</u>  |  |
| <input type="checkbox"/> Nextdoor  |   | <u>Township website</u>  |  |
| <input type="checkbox"/> Other   |   | <input type="checkbox"/> Mailings  |  |
| <input type="checkbox"/> Newspaper Advertisements<br>Newspaper Name (s): _____   |   | <input type="checkbox"/> Other: _____  |  |

| <b>Public Involvement</b>   |  |
|---|--|
| Potential opportunities that may be provided to the public to participate in the development, update and implementation of the SWMP are listed below.   |  |
| <i>At least one public meeting or other MS4 event must be held during the 5-year permit coverage period to solicit participation and feedback from target audience groups.</i>  |  |
| Event/Project: Required Public Meeting  |  |
| Target Audience to be engaged: Residents in the Township  |  |
| Description of Public Involvement: During a scheduled public meeting, there will be a discussion of the Township's Stormwater Management Program including progress that has been made, recently installed BMP projects and future planned BMPs and/or activities at least once before March 15, 2023. After the discussion by the Board of Commissioners, the public will be given time to ask questions and/or provide feedback. The Township had MS4 related discussions at public meetings on August 26, 2020, April 13, 2022, and March 8, 2023. |  |
| Event/Project: Illicit Discharge Reporting  |  |
| Target Audience to be engaged: Residents/Businesses in the Township   |  |
| Description of Public Involvement: Information on identifying and reporting of illicit discharges is provided on the Township website. Citizens are encouraged to report any suspected illicit discharges to the Township using the telephone number provided on the Township website.  |  |
| Event/Project: Recycling/Hazardous Waste Collection   |  |
| Target Audience to be engaged: Residents  |  |
| Description of Public Involvement: The Township encourages residents to participate in the hazardous waste collection events in Montgomery County and use the "Retrievr" service for recycling. Events/information is posted on the Township website.   |  |
| Event/Project: Perkiomen Watershed Conservancy Activities   |  |
| Target Audience to be engaged: Residents/Businesses   |  |
| Description of Public Involvement: The Township is a member of the Perkiomen Watershed Conservancy. The Conservancy offers numerous activities for the residents to become active participants in the environment and water quality including a large stream clean-up event usually around Earth Day. The Township has partnered with the Conservancy for tree planting along the Township's streams. Residents and Businesses are encouraged to participate in these activities.   |  |
| Event/Project: PennDOT Adopt-a-Highway  |  |
| Target Audience to be engaged: Residents/Businesses   |  |
| Description of Public Involvement: The Township encourages participation in the PennDOT Adopt-a-Highway program by posting information on the Township website. The program provides opportunities to participate in keeping the state roads clean and reduces the amount of debris and pollution that could enter our streams, lakes and rivers.   |  |

\* Attach Additional Sheets as Necessary



| <b>Public Involvement</b>  |
|--|
| <p>Potential opportunities that may be provided to the public to participate in the development, update and implementation of the SWMP are listed below.</p> <p><i>At least one public meeting or other MS4 event must be held during the 5-year permit coverage period to solicit participation and feedback from target audience groups.</i></p> |
| Event/Project: Towamencin Day  |
| Target Audience to be engaged: Residents in the Township   |
| Description of Public Involvement: The Township hosts an annual Towamencin Day. At these events, stormwater and/or water quality information is typically provided at a booth sponsored by the Township's Environmental Advisory Council.  |
| Event/Project: Environmental Advisory Council  |
| Target Audience to be engaged: Residents   |
| Description of Public Involvement: The Environmental Advisory Council (EAC) is a volunteer committee that discusses environmental issues in the Township including stormwater/water quality information and MS4 permit requirements. The EAC typically sponsors an event for stream/park clean-up and invasive plant removal.                      |
| Event/Project:   |
| Target Audience to be engaged:   |
| Description of Public Involvement:   |
| Event/Project:   |
| Target Audience to be engaged:   |
| Description of Public Involvement:   |
| Event/Project:   |
| Target Audience to be engaged:   |
| Description of Public Involvement:   |

**Additional Cooperation with Target Audiences**

The following section documents additional instances of public involvement in the SWMP conducted in coordination with targeted Audiences.

**Public Input**

Prior to adoption, modification, or submission to DEP, the following documents will be advertised for public input:

- Ordinances
- Standard Operating Procedures (SOPs)
- Pollutant Reduction Plans (PRPs)
- TMDL Plans (if applicable)

For Ordinances and SOPs, the public input process will include the following steps:

1. Provide notice to the public;
2. Provide opportunities for public comment;
3. Document and evaluate the public comments;
4. Document responses to the comments prior to finalizing the Ordinance or SOP. The response to comments document shall be kept of file with other SWMP documentation and may be requested by DEP.

For PRPs and TMDL Plans, the public participation requirements specific in the permit appendices shall be followed and documented.

| Report Availability  |  |
|--|--|
| Annual MS4 Status Reports and all other permit required plans, programs, maps, and reports are available to the public via the methods described below.  |  |
| Document Type:<br><input checked="" type="checkbox"/> Pollutant Reduction Plan<br><input type="checkbox"/> Stormwater Management Ordinance<br><input type="checkbox"/> Other MS4 Documentation | Document Name: Pollution Reduction Plan/Total Maximum Daily Load Plan<br><br>Availability to public (at least one option must be checked):<br><input type="checkbox"/> Website (list url): _____<br><input checked="" type="checkbox"/> For view in municipal office: <u>Available upon request</u><br><input type="checkbox"/> By mail by request<br><input type="checkbox"/> Other: _____  |
| Document Type:<br><input type="checkbox"/> Pollutant Reduction Plan<br><input checked="" type="checkbox"/> Stormwater Management Ordinance<br><input type="checkbox"/> Other MS4 Documentation | Document Name: Towamencin Township Stormwater Management Ordinance<br><br>Availability to public (at least one option must be checked):<br><input checked="" type="checkbox"/> Website (list url): <u>towamencin.org</u><br><input checked="" type="checkbox"/> For view in municipal office: <u>Available upon request</u><br><input type="checkbox"/> By mail by request:<br><input type="checkbox"/> Other: _____                                       |
| Document Type:<br><input type="checkbox"/> Pollutant Reduction Plan<br><input type="checkbox"/> Stormwater Management Ordinance<br><input checked="" type="checkbox"/> Other MS4 Documentation | Document Name: MS4 Maps<br><br>Availability to public (at least one option must be checked):<br><input type="checkbox"/> Website (list url): _____<br><input checked="" type="checkbox"/> For view in municipal office: <u>Available upon request</u><br><input type="checkbox"/> By mail by request<br><input type="checkbox"/> Other: _____  |
| Document Type:<br><input type="checkbox"/> Pollutant Reduction Plan<br><input type="checkbox"/> Stormwater Management Ordinance<br><input checked="" type="checkbox"/> Other MS4 Documentation | Document Name: Public Meeting Minutes for MS4 Discussions by Supervisors & Environmental Advisory Council<br><br>Availability to public (at least one option must be checked):<br><input checked="" type="checkbox"/> Website (list url): <u>towamencin.org</u><br><input checked="" type="checkbox"/> For view in municipal office: <u>Available upon request</u><br><input type="checkbox"/> By mail by request<br><input type="checkbox"/> Other: _____ |

\* Attach Additional Sheets as Necessary

| Report Availability  |   |
|--|---|
| Annual MS4 Status Reports and all other permit required plans, programs, maps, and reports are available to the public via the methods described below.  |   |
| Document Type:<br><input type="checkbox"/> Pollutant Reduction Plan<br><input type="checkbox"/> Stormwater Management Ordinance<br><input checked="" type="checkbox"/> Other MS4 Documentation | Document Name: MS4 Annual Reports<br><br>Availability to public (at least one option must be checked):<br><input type="checkbox"/> Website (list url): _____<br><input checked="" type="checkbox"/> For view in municipal office: <u>Available upon request</u><br><input type="checkbox"/> By mail by request<br><input type="checkbox"/> Other: _____ |
| Document Type:<br><input type="checkbox"/> Pollutant Reduction Plan<br><input type="checkbox"/> Stormwater Management Ordinance<br><input type="checkbox"/> Other MS4 Documentation            | Document Name:<br><br>Availability to public (at least one option must be checked):<br><input type="checkbox"/> Website (list url): _____<br><input type="checkbox"/> For view in municipal office: _____<br><input type="checkbox"/> By mail by request:<br><input type="checkbox"/> Other: _____  |
| Document Type:<br><input type="checkbox"/> Pollutant Reduction Plan<br><input type="checkbox"/> Stormwater Management Ordinance<br><input type="checkbox"/> Other MS4 Documentation            | Document Name:<br><br>Availability to public (at least one option must be checked):<br><input type="checkbox"/> Website (list url): _____<br><input type="checkbox"/> For view in municipal office: _____<br><input type="checkbox"/> By mail by request<br><input type="checkbox"/> Other: _____   |
| Document Type:<br><input type="checkbox"/> Pollutant Reduction Plan<br><input type="checkbox"/> Stormwater Management Ordinance<br><input type="checkbox"/> Other MS4 Documentation            | Document Name:<br><br>Availability to public (at least one option must be checked):<br><input type="checkbox"/> Website (list url): _____<br><input type="checkbox"/> For view in municipal office: _____<br><input type="checkbox"/> By mail by request<br><input type="checkbox"/> Other: _____   |



**PHASE II STORMWATER MANAGEMENT PROGRAM  
TOWAMENCIN TOWNSHIP  
PUBLIC PARTICIPATION – STRATEGIES & TARGET AUDIENCES**

| <b>Who are we Trying to Involve?</b> | <b>What Organizations to They Belong to?</b>  | <b>What Volunteer Programs Do These Organizations Run?</b>  | <b>What is the Scope of these Programs and How often do They Take Place?</b>   | <b>Strategies for partnering with Community Organizations to Involve the Public in Stormwater Management</b>   |
|--------------------------------------|---|---|--|--|
| Municipal Employees                  | <ul style="list-style-type: none"> <li>American Public Works Association <ul style="list-style-type: none"> <li>PSATS</li> </ul> </li> <li>Township Volunteer Committees</li> <li>Perkiomen Watershed Conservancy</li> </ul>  | <ul style="list-style-type: none"> <li>Committee Meetings</li> <li>Seminars/Workshops</li> <li>Stream Clean-Up and Planting Events</li> <li>Towamencin Community Day</li> </ul>   | <ul style="list-style-type: none"> <li>Annual Stream Clean-Up and Planting Events</li> <li>Annual Earth Day Events <ul style="list-style-type: none"> <li>Periodic Conferences/ Seminars/Workshops</li> </ul> </li> <li>Periodic Committee Meetings <ul style="list-style-type: none"> <li>Annual Community Day</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>The Environmental Advisory Council leads an various events throughout the year <ul style="list-style-type: none"> <li>Township allows employees to attend appropriate seminar, workshops or conferences</li> <li>Discuss issues at committee meetings</li> <li>Employees can participate in Towamencin Community Day</li> </ul> </li> </ul>   |
| Residents                            | <ul style="list-style-type: none"> <li>Homeowners Associations</li> <li>Retirement Community Groups <ul style="list-style-type: none"> <li>Planning Commission</li> </ul> </li> <li>Environmental Advisory Council <ul style="list-style-type: none"> <li>Open Space &amp; Park Advisory Committee</li> <li>Recreation &amp; Special Events Committee</li> </ul> </li> <li>Perkiomen Watershed Conservancy</li> </ul> | <ul style="list-style-type: none"> <li>Towamencin Community Day</li> <li>Public Meetings of Board of Supervisors and Volunteer Committees</li> <li>Stream Clean-Up and Planting Events <ul style="list-style-type: none"> <li>Earth Day Events</li> </ul> </li> </ul> | <ul style="list-style-type: none"> <li>Annual Community Day <ul style="list-style-type: none"> <li>Monthly Committee Meetings</li> <li>Bimonthly Board of Supervisors Meetings</li> </ul> </li> <li>Annual Stream Clean-Up and Planting Events <ul style="list-style-type: none"> <li>Annual Earth Day Events</li> </ul> </li> </ul>   | <ul style="list-style-type: none"> <li>Residents invited to participate in Earth Day, stream clean-up or planting events</li> <li>Residents invited to participate in public meetings <ul style="list-style-type: none"> <li>Residents invited to be members of the Township Volunteer Committees</li> </ul> </li> <li>Residents invited to Towamencin Community Day</li> </ul>  |
| Schools                              | <ul style="list-style-type: none"> <li>Boy/Girl Scouts <ul style="list-style-type: none"> <li>Student Council <ul style="list-style-type: none"> <li>Key Club</li> </ul> </li> </ul> </li> <li>Towamencin Youth Association (TYA)</li> </ul>  | <ul style="list-style-type: none"> <li>Eagle Scout</li> <li>Bronze, Silver &amp; Gold Award Program for Girl Scouts <ul style="list-style-type: none"> <li>Acts of Service to Community by Key Club</li> </ul> </li> <li>Sports Programs by TYA</li> </ul>            | <ul style="list-style-type: none"> <li>Programs occur throughout the year</li> <li>TYA Programs year round <ul style="list-style-type: none"> <li>Key Club and Student Council active during school year</li> </ul> </li> </ul>  | <ul style="list-style-type: none"> <li>Encourage Boy/Girl Scouts to perform service to education about or improve water quality</li> <li>Encourage TYA to assist in park clean-up</li> <li>Encourage school groups to support the environment and water quality by education or specific projects <ul style="list-style-type: none"> <li>Encourage volunteer participation in Community Day, Earth Day &amp; PWC Activities</li> </ul> </li> </ul> |
| Businesses                           | <ul style="list-style-type: none"> <li>Penn Suburban Chamber of Commerce</li> </ul>   | <ul style="list-style-type: none"> <li>Business Expo</li> <li>Periodic Meetings</li> </ul>  | <ul style="list-style-type: none"> <li>Community Education <ul style="list-style-type: none"> <li>Public Service</li> </ul> </li> </ul>  | <ul style="list-style-type: none"> <li>Encourage workshops/meetings addressing stormwater management or water quality <ul style="list-style-type: none"> <li>Encourage volunteer participation in Community Day, Earth Day &amp; PWC Activities</li> </ul> </li> </ul>   |
| Developers                           | <ul style="list-style-type: none"> <li>Penn Suburban Chamber of Commerce</li> <li>Home Builders Associations</li> </ul>   | <ul style="list-style-type: none"> <li>Career Day</li> <li>Periodic Meetings</li> </ul>   | <ul style="list-style-type: none"> <li>Community Education <ul style="list-style-type: none"> <li>Public Service</li> </ul> </li> </ul>  | <ul style="list-style-type: none"> <li>Encourage workshops/meetings addressing stormwater management or water quality <ul style="list-style-type: none"> <li>Encourage volunteer participation in Community Day, Earth Day &amp; PWC Activities</li> </ul> </li> </ul>   |

**Appendix I:**  
**Stormwater Management Ordinance & Proof  
of Publication**

PHILADELPHIA GROUP

**AFFIDAVIT OF PUBLICATION**  
390 Eagleview Boulevard • Exton, PA 19341

**TOWAMENCIN TOWNSHIP**  
**1090 TROXEL RD**  
**Lansdale, PA 19446**  
**Attention: DAVID KRAYNICK**

**STATE OF PENNSYLVANIA,**

The undersigned Richard L. Crowe, being duly sworn the he/she is the principal clerk of The Reporter, The Reporter Digital, published in Montgomery County for the dissemination of local or transmitted news and intelligence of a general character, which are duly qualified newspapers, and the annexed hereto is a copy of certain order, notice, publication or advertisement of:

**TOWAMENCIN TOWNSHIP****Published in the following edition(s):**

The Reporter, The Reporter Digital  
07/01/25

**LEGAL NOTICE**

Notice is hereby given that the Towamencin Board of Supervisors, during its public meeting on Wednesday, July 9, 2025, after 7:00PM, at the Township Building located at 1090 Troxel Road, Lansdale, Pennsylvania, will consider adopting:

AN ORDINANCE AMENDING TOWNSHIP CODE CHAPTER 132 (STORMWATER MANAGEMENT) TO COMPLY WITH THE TOWNSHIP'S NPDES PERMIT REQUIREMENTS FOR STORMWATER DISCHARGES FROM THE MUNICIPAL SEWERAGE SYSTEM (MS4) AND TO UPDATE SPECIFIC REQUIREMENTS IN THE ORDINANCE, INCLUDING: (1) AMENDING 132-11.1(1)(B); 132-12.C(3); 132-13.C(2); 132-13.C(11); 132-13.H(4); AND 132-13.H(11) REGARDING AUTHORIZED DISCHARGES; INFILTRATION FACILITIES DESIGN; COLLECTION SYSTEM STANDARDS AND PIPE MATERIALS; MINIMUM STORMWATER PIPE DEPTH OF COVER; TIME TO RETURN TO NORMAL CONDITIONS AFTER STORM TERMINATION; AND MINIMUM SLOPE OF RETENTION BASIN BOTTOMS; AND (2) ADDING NEW SECTIONS 132.19.1 ENTITLED "WAIVERS" AND 132-23.C RELATING TO INSPECTION OF STORMWATER MANAGEMENT FACILITIES INSTALLED UNDER THIS ORDINANCE

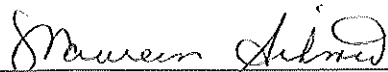
The full text of this proposed ordinance may be examined without charge on the Township's website. Copies may also be obtained for a charge no greater than the cost thereof at the County Law Library between 8:30AM to 4:15PM; the Township Building between 9AM to 4:30PM; and the offices of this newspaper by calling 215-855-8440.

The public is invited to attend and will be given an opportunity to provide comments regarding the proposed ordinance. At the public meeting, the Board may act to adopt the proposed ordinance unless it deems additional time is required for consideration and discussion, in which case, the proposed ordinance will be placed on a future public meeting agenda for action.

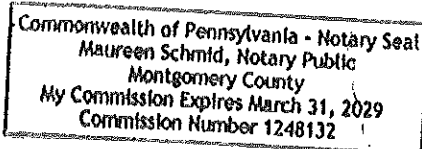
David G. Kraynik  
Township Manager

LAN: July 1. a-1

Sworn to the subscribed before me this 8/8/25.



**Notary Public, State of Pennsylvania**  
**Acting in County of Montgomery**

**Advertisement Information**

Client Id: 881241

Ad Id: 2734851

PO:

Sales Person: 063308

**Ad ID: 2734851**

**Cost: \$514.41**

**Start: 07/01/25**

**Stop: 07/01/25**

**Class: 1201, Legal Notices**

**LEGAL NOTICE**

Notice is hereby given that the Towamencin Board of Supervisors, during its public meeting on Wednesday, July 9, 2025, after 7:00PM, at the Township Building located at 1090 Troxel Road, Lansdale, Pennsylvania, will consider adopting:

AN ORDINANCE AMENDING TOWNSHIP CODE CHAPTER 132 [STORMWATER MANAGEMENT] TO COMPLY WITH THE TOWNSHIP'S NPDES PERMIT REQUIREMENTS FOR STORMWATER DISCHARGES FROM THE MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4) AND TO UPDATE SPECIFIC REQUIREMENTS IN THE ORDINANCE, INCLUDING: (1) AMENDING 132-11.R(1)(B); 132-12.C(3); 132-13.C(2); 132-13.C(11); 132-13.H(4); AND 132-13.H(11) REGARDING AUTHORIZED DISCHARGES; INFILTRATION FACILITIES DESIGN; COLLECTION SYSTEM STANDARDS AND PIPE MATERIALS; MINIMUM STORMWATER PIPE DEPTH OF COVER; TIME TO RETURN TO NORMAL CONDITIONS AFTER STORM TERMINATION; AND MINIMUM SLOPE OF RETENTION BASIN BOTTOMS; AND (2) ADDING NEW SECTIONS 132.19.1 ENTITLED "WAIVERS" AND 132-23.C RELATING TO INSPECTION OF STORMWATER MANAGEMENT FACILITIES INSTALLED UNDER THIS ORDINANCE

The full text of this proposed ordinance may be examined without charge on the Township's website. Copies may also be obtained for a charge no greater than the cost thereof at the County Law Library between 8:30AM to 4:15PM; the Township Building between 9AM to 4:30PM; and the offices of this newspaper by calling 215-855-8440.

The public is invited to attend and will be given an opportunity to provide comments regarding the proposed ordinance. At the public meeting, the Board may act to adopt the proposed ordinance unless it deems additional time is required for consideration and discussion, in which case, the proposed ordinance will be placed on a future public meeting agenda for action.

David G. Kraynik  
Township Manager

LAN: July 1. a-1



# **TOWAMENCIN TOWNSHIP**

ORDINANCE NO. 25-05

---

AN ORDINANCE AMENDING TOWNSHIP CODE CHAPTER 132 [STORMWATER MANAGEMENT] TO COMPLY WITH THE TOWNSHIP'S NPDES PERMIT REQUIREMENTS FOR STORMWATER DISCHARGES FROM THE MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4) AND TO UPDATE SPECIFIC REQUIREMENTS IN THE ORDINANCE INCLUDING: (1) AMENDING 132-11.R(1)(B); 132-12.C(3); 132-13.C(2); 132-13.C(11); 132-13.H(4); AND 132-13.H(11) REGARDING AUTHORIZED DISCHARGES; INFILTRATION FACILITIES DESIGN; COLLECTION SYSTEM STANDARDS AND PIPE MATERIALS; MINIMUM STORMWATER PIPE DEPTH OF COVER; TIME TO RETURN TO NORMAL CONDITIONS AFTER STORM TERMINATION; AND MINIMUM SLOPE OF RETENTION BASIN BOTTOMS; AND (2) ADDING NEW SECTIONS 132.19.1 ENTITLED "WAIVERS" AND 132-23.C RELATING TO INSPECTION OF STORMWATER MANAGEMENT FACILITIES INSTALLED UNDER THIS ORDINANCE.

---

## **ATTESTATION**

The attached is an attested copy of Ordinance 25-05 that was enacted by the Board of Supervisors at its July 9, 2025, Meeting.

**TOWAMENCIN TOWNSHIP**



---

ROBERT J. IANNOZZI JR.

*Solicitor*

Date: July 10, 2025

# **TOWAMENCIN TOWNSHIP**

## **ORDINANCE NO. 25-05**

---

AN ORDINANCE AMENDING TOWNSHIP CODE CHAPTER 132 [STORMWATER MANAGEMENT] TO COMPLY WITH THE TOWNSHIP'S NPDES PERMIT REQUIREMENTS FOR STORMWATER DISCHARGES FROM THE MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4) AND TO UPDATE SPECIFIC REQUIREMENTS IN THE ORDINANCE, INCLUDING: (1) AMENDING 132-11.R(1)(B); 132-12.C(3); 132-13.C(2); 132-13.C(11); 132-13.H(4); AND 132-13.H(11) REGARDING AUTHORIZED DISCHARGES; INFILTRATION FACILITIES DESIGN; COLLECTION SYSTEM STANDARDS AND PIPE MATERIALS; MINIMUM STORMWATER PIPE DEPTH OF COVER; TIME TO RETURN TO NORMAL CONDITIONS AFTER STORM TERMINATION; AND MINIMUM SLOPE OF RETENTION BASIN BOTTOMS; AND (2) ADDING NEW SECTIONS 132.19.1 ENTITLED "WAIVERS" AND 132-23.C RELATING TO INSPECTION OF STORMWATER MANAGEMENT FACILITIES INSTALLED UNDER THIS ORDINANCE.

---

**NOW THEREFORE IT IS HEREBY ENACTED AND ORDAINED** by Towamencin Township's Board of Supervisors that the Towamencin Township Code shall be amended as follows:

**SECTION 1. AMENDMENT TO SECTION 132-11.R(1)(b) [GENERAL REQUIREMENTS/PROHIBITION AGAINST NONSTORMWATER DISCHARGES/ALLOWABLE DISCHARGES]**

Section 132-11.R(1)(b) [General Requirements/Prohibition Against Nonstormwater Discharges/Allowable Discharges] is amended to read as follows:

- (b) The following discharges are authorized unless they are determined to be significant contributors to pollution a regulated small MS4 or to the waters of this Commonwealth:
  - [1] Discharges or flows from firefighting activities.
  - [2] Discharges from potable water sources including water line flushing and fire hydrant flushing, if such discharges do not contain detectable concentrations of Total Residual Chlorine (TRC).

- [3] Non-contaminated irrigation water, water from lawn maintenance, landscape drainage and flows from riparian habitats and wetlands.
- [4] Diverted stream flows and springs.
- [5] Non-contaminated pumped ground water and water from foundation and footing drains and crawl space pumps.
- [6] Non-contaminated HVAC condensation and water from geothermal systems.
- [7] Residential (i.e., not commercial) vehicle wash water where cleaning agents are not utilized.
- [8] Non-contaminated hydrostatic test water discharges, if such discharges do not contain detectable concentrations of TRC.

**SECTION 2. AMENDMENT TO SECTION 132-12.C(3) [VOLUME CONTROLS, WATER QUALITY REQUIREMENTS, AND INFILTRATION BMPS]**

Section 132-12.C(3) [Volume Controls, Water Quality Requirements, and Infiltration BMPS] is amended to read as follows:

- (3) All infiltration facilities shall be designed to completely infiltrate runoff volume in not less than 24 hours (1 day) and not more than 72 hours (3 days) from the end of the rain event.

**SECTION 3. AMENDMENT TO SECTION 132-13.C(2) [DESIGN AND CONSTRUCTION CRITERIA FOR STORMWATER MANAGEMENT FACILITIES/BEST MANAGEMENT PRACTICES/COLLECTION SYSTEM STANDARDS/PIPE MATERIALS]**

Section 132-13.C(2) [Design and Construction Criteria for Stormwater Management Facilities/Best Management Practices/Collection System Standards/Pipe Materials] is amended to read as follows:

- (2) Pipe materials. All storm sewer piping shall be Class III reinforced concrete pipe (RCP) or smooth lined high-density polyethylene pipe (HDPE), conforming to PennDOT Publication 408. RCP shall be saw-cut at ends, as

needed, not hammered or broken and all pipe joints and lift holes must be mortared except where designed for infiltration.

**SECTION 4. AMENDMENT TO SECTION 132-13.C(11) [DESIGN AND CONSTRUCTION CRITERIA FOR STORMWATER MANAGEMENT FACILITIES/BEST MANAGEMENT PRACTICES/COLLECTION SYSTEM STANDARDS/MINIMUM STORMWATER PIPE DEPTH OF COVER]**

Section 132-13.C(11) [Design and Construction Criteria For Stormwater Management Facilities/Best Management Practices/Collection System Standards/Minimum Stormwater Pipe Depth of Cover] is amended to read as follows:

- (11) Stormwater pipes shall have a minimum depth of cover of 18 inches or as designated by the manufacture's recommendations (whichever is greater), and in no case shall any part of the pipe project into the road subbase or curb. Where cover is restricted, equivalent pipe arches may be specified in lieu of circular pipe, to achieve required cover. Stormwater pipes conveying swale flow under driveway crossings shall have a minimum cover of 12 inches, including over the bell, but in no case shall the cover be less than that required for the anticipated traffic loading. For driveway culverts, cover may be less than 12 inches if the design engineer verifies such pipe has sufficient strength for the anticipated vehicle loading. Where cover is restricted, concrete trench drain with bolt-down metal grate may be used.

**SECTION 5. AMENDMENT TO SECTION 132-13.H(4) [DESIGN AND CONSTRUCTION CRITERIA FOR STORMWATER MANAGEMENT FACILITIES/BEST MANAGEMENT PRACTICES/STORMWATER DETENTION/RETENTION BASINS/TIME PERIOD TO RETURN TO NORMAL CONDITIONS AFTER TERMINATION OF STORM]**

Section 132-13.H(4) [Design and Construction Criteria for Stormwater Management Facilities/Best Management Practices/Stormwater Detention/Retention Basins/Time Period to Return to Normal Conditions After Termination of Storm] is amended to read as follows:

- (4) Stormwater management facilities shall be designed to completely drain in not less than 24 hours (1 day) and not more than 72 hours (3 days) from the end of the rain event, unless the Township determines that



downstream conditions may warrant other design criteria for stormwater release.

**SECTION 6. AMENDMENT TO SECTION 132-13.H(11) [DESIGN AND CONSTRUCTION CRITERIA FOR STORMWATER MANAGEMENT FACILITIES/BEST MANAGEMENT PRACTICES/STORMWATER DETENTION/RETENTION BASINS/MINIMUM SLOPE OF DETENTION BASIN BOTTOMS]**

Section 132-13.H(11) [Design and Construction Criteria for Stormwater Management Facilities/Best Management Practices/Stormwater Detention/Retention Basins/Minimum Slope of Retention Basin Bottoms] is amended to read as follows:

- (11) In order to ensure proper drainage of the detention basin, a minimum grade of 1% shall be maintained for basins that are not designed to infiltrate and where no underdrain is provided. For above-ground basins, the basin bottom shall be landscaped with vegetation that minimizes maintenance and encourages infiltration. These requirements may be altered when approved by the Township Engineer.

**SECTION 7 ADDITION OF NEW SECTION 132-19.1 ENTITLED "WAIVERS"**

A new Section 132-19.1 entitled "Waivers" is added and will read as follows:

§ 132-19.1 Waivers.

- A. If the Township determines that any requirement under this Ordinance cannot be achieved for a particular regulated activity, the Township may, after an evaluation of alternatives, approve measures other than those in this Ordinance, subject to the following paragraphs B and C.
- B. Waivers or modifications of the requirements of this Ordinance may be approved by the Township if enforcement will exact undue hardship because of peculiar conditions pertaining to the land in question, provided that the modifications will not be contrary to the public interest and that the purpose of the Ordinance is preserved. Cost or financial burden shall not be considered a hardship. Modification may be considered if an alternative standard or approach will provide equal or better achievement of the purpose of the Ordinance. A request for modifications shall be in writing and accompany the Stormwater Management Site Plan submission. The request shall provide the facts on which the request is based, the provision(s) of the Ordinance involved and the proposed modification.

- C. No waiver or modification of any regulated stormwater activity involving earth disturbance greater than or equal to one acre may be granted by the Township unless that action is approved in advance by the Department of Environmental Protection (DEP) or the delegated county conservation district.

**SECTION 8.        ADDITION OF NEW SUB-SECTION (C) TO 132-23**  
**[SCHEDULE OF INSPECTIONS]**

A new sub-section (C) is added to 132-23 [Schedule of Inspections] is added relating to inspection of stormwater management facilities installed under the Ordinance and will read as follows:

- C. The landowner or the owner's designee (including the Township for dedicated and owned facilities) shall inspect SWM BMPs, facilities and/or structures installed under this Ordinance according to the following frequencies, at a minimum, to ensure the BMPs, facilities and/or structures continue to function as intended:

- (1) Annually for the first 5 years.
- (2) Once every 3 years thereafter
- (3) During or immediately after the cessation of a 10-year or greater storm.

Inspections should be conducted during or immediately following precipitation events. A written inspection report shall be created to document each inspection. The inspection report shall contain the date and time of the inspection, the individual(s) who completed the inspection, the location of the BMP, facility or structure inspected, observations on performance, and recommendations for improving performance, if applicable. Inspection reports shall be submitted to the Township within 30 days following completion of the inspection.

**SECTION 9.        SEVERABILITY**

This Ordinance's provisions are intended to be severable. If any section, sentence, clause, part, or provision of this ordinance is determined to be illegal, invalid, or unconstitutional by any court of competent jurisdiction, such determination shall not affect or impair this Ordinance's remaining sections, sentences, clauses, parts, or provisions.

Furthermore, it is hereby declared to be this Board's express intent that this Ordinance still be adopted even if such an illegal, invalid, or unconstitutional section, sentence, clause, part, or provision had not been included.

**SECTION 10.    REPEALER**

All other ordinances and resolutions or parts thereof inconsistent with this Ordinance are hereby repealed.

**SECTION 11    EFFECTIVE DATE**

This Ordinance shall take effect immediately from this Board's adoption of it in accord with Pennsylvania law.


\*\*\*

**ENACTED** and **ORDAINED** by this Board at its public meeting on July 9, 2025.

**TOWAMENCIN TOWNSHIP**  
**BOARD OF SUPERVISORS**

  
\_\_\_\_\_  
JOYCE F. SNYDER, *Chairperson*

ATTEST:

  
\_\_\_\_\_  
KOFI OSEI, *Secretary*

# **Appendix J:**

## **2025 PWC Stream Clean-up Recap**



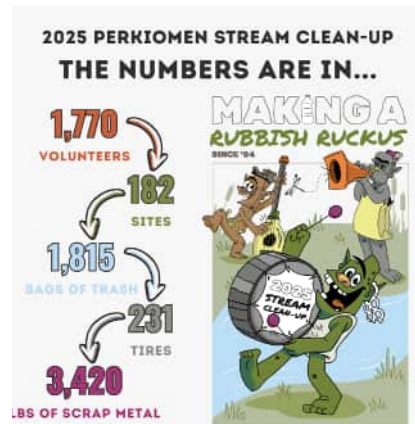


# STREAM CLEAN-UP

A HUGE thank you to  
everyone who made the 2025  
Stream Clean-up a success!

*ADD YOUR STREAM CLEAN-UP PHOTOS  
HERE*

# Working together to clean-up and protect our local stream-side habitats.



Every April, the Conservancy hosts a single-day watershed wide event focused on removing litter, tires and other debris from regional waterways. This event brings together volunteers who work collaboratively to clean-up streamside sites, parks and open spaces throughout the watershed. Since its creation in 2004, the Perkiomen Stream Clean-up has grown to become the largest single-day stream clean-up in the state of Pennsylvania with 1,770 volunteers participating in 2025!

**A big round of applause for our incredible volunteers and sponsors who made the 2025 Stream Clean-up a tremendous success! Thanks to your outstanding support, we cleared out a whopping 1,815 bags of trash, rolled away 231 tires and hauled off 3,240 lbs. of scrap metal from 182 locations!**



### LEARN MORE

Questions? Learn more by reading the FAQs.

### EVENT STATISTICS

Check out statistics from past Clean-ups!

### PHOTO GALLERY

Check out photos and add you own from the 2025 Clean-up here.

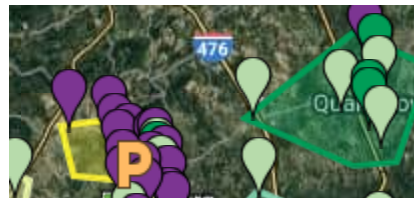
## 2025 STREAM CLEAN-UP SITE MAP

This map shows the sites that were included in the 2025 Stream Clean-up.

Have a site in mind that you would like to see added to the site list for 2026?

### 2025 Stream

This map was r



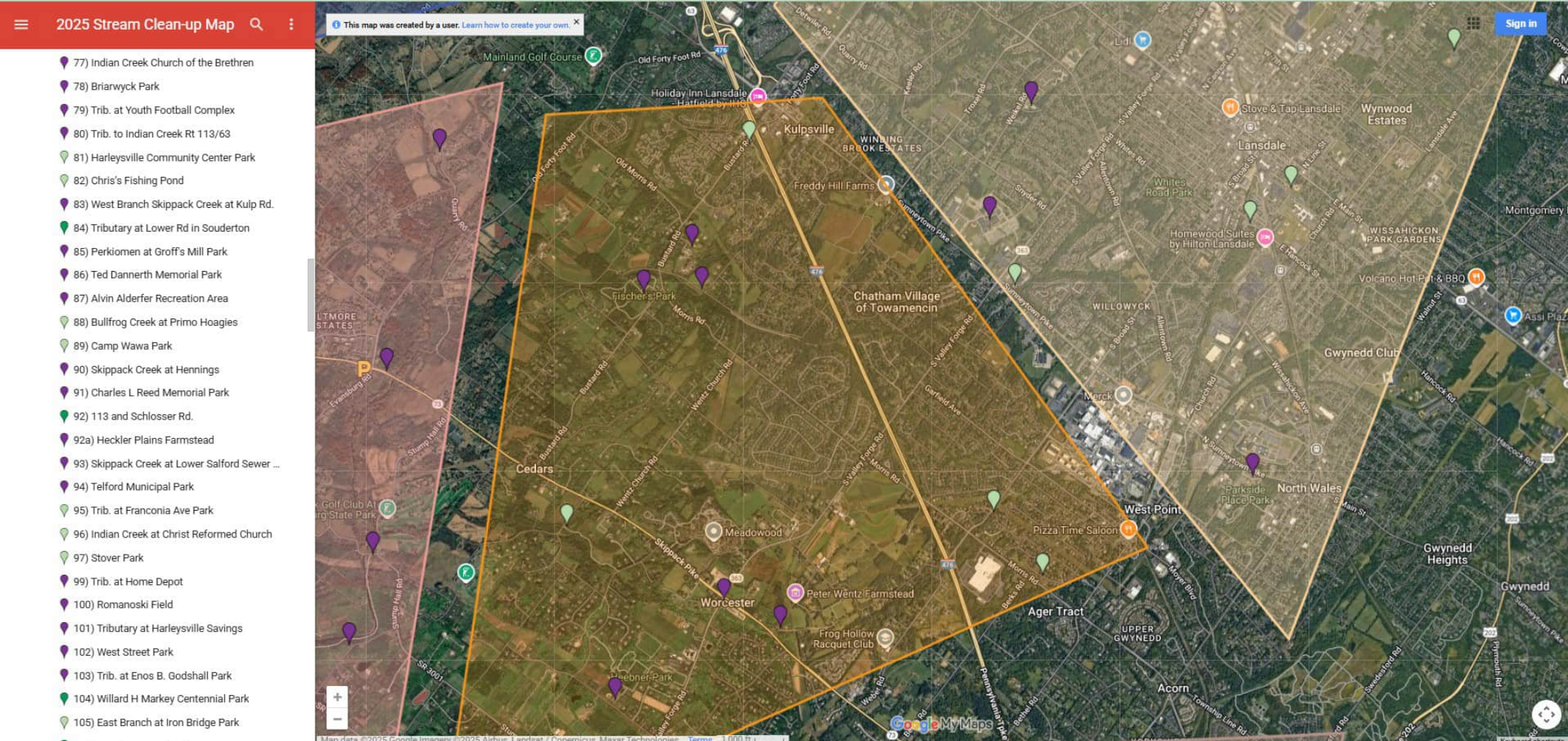
Let us know about it by filling out our [Site Suggestion Form!](#)

**WANT TO LEARN ABOUT  
HOW TO PROPERLY  
DISPOSE OF ELECTRONICS  
OR RECYCLING WITHIN  
YOUR MUNICIPALITY?  
CHECK OUT OUR  
RECYCLING AND POLLUTION  
RESOURCES PAGE!**

## PERKIOMEN WATERSHED CONSERVANCY

1 Skippack Pike  
Schwenksville, PA 19473







# **Appendix K:**

## **Illicit Discharge Detection & Elimination Plan**

## MCM #3: ILLICIT DISCHARGE, DETECTION & ELIMINATION PROGRAM

### I. Unanticipated Non-Compliance or Potential Pollution Reporting

#### Immediate Reporting of Substance that is a danger of pollution or threat to property

If, because of an accident, other activity or incident, a toxic substance or another substance which would endanger users downstream from the discharge, or would otherwise result in pollution or create a danger of pollution or would damage property, the municipality shall:

- Immediately notify Pennsylvania Department of Environmental Protection (PADEP) by telephone of the location and nature of the danger:
  - 484-250-5900 between 8:00 AM and 4:00 PM
  - 1-800-541-2050 between 4:00 PM and 8:00 AM
- Oral notification to the PADEP is required as soon as possible, but no later than 4 hours after the permittee becomes aware of the incident causing or threatening pollution.
- If reasonably possible to do so, the municipality should immediately notify downstream users of the waters of the Commonwealth to which the substance was discharged including the location and nature of the discharge.
- The municipality shall take or cause to be taken steps necessary to prevent injury to property and downstream users of the waters from pollution or a danger of pollution.
- Within 15 days from the incident, the municipality shall remove the residual substances contained thereon or therein from the ground and from the affected waters of the Commonwealth to the extent required by law.

#### Reporting for Any Pollutants which may endanger health or the environment

- 24 Hour Reporting – The municipality shall orally report to PADEP any non-compliance with the MS4 permit which may endanger health or the environment within 24 hours from the time the municipality becomes aware of the circumstances.
- Written Report – A written submission must be provided to the PADEP within 5 days of the time the municipality becomes aware of any non-compliance which may endanger health or the environment. The written report should contain:
  - A description of the non-compliance and its cause
  - The period of non-compliance including exact dates and times
  - The anticipated time it is expected to continue if the non-compliance has not been corrected
  - Steps taken or planned to reduce, eliminate and prevent reoccurrence of the non-compliance
- Waiver of Written Report – PADEP may waive the written report on a case-by-case basis if the associated oral report has been received within 24 hours from the time the municipality becomes aware of the circumstances which may endanger health or the environment.

#### Reporting for Any Other Non-Compliance

- All instances of non-compliance that were not reported as described above should be reported in the MS4 Annual Report and include the items listed in the Written Report requirements above.

### II. Identifying Priority Areas

Priority areas for potential illicit discharges would include areas where potential pollutants may be present. Priority areas may include:

- Industrial areas
- Commercial areas/restaurants
- Areas with on-lot sewage disposal systems
- Areas with known sanitary sewer overflows
- Areas with a past history of water pollution problems

### III. Screening Outfalls

- All outfalls or observation points are to be screened during dry weather at least once during the 5-year permit period.
- Any outfalls where flow had been observed at the last screening should be screened annually.
- The PADEP MS4 Outfall Field Screening Report form should be used to record the results of the outfall screening for each location. The Report form must include the location, date, time, the name of the inspector and responses to all appropriate questions on the form. The form must be signed by the person responsible for the screening.
- If there is flow found during the dry weather screening, the discharge should be inspected for color, odor, floating solids, scum, sheen, and substances that result in observed deposits in the surface waters.
- If the discharge exhibits any of the characteristics listed above, the discharge should be sampled for field and/or laboratory analysis of one or more common illicit discharge parameters to determine if the flow contains an illicit substance.
- Possible parameters for analysis include, but are not limited to, the following:
  - pH
  - Conductivity
  - Fecal Coliform bacteria
  - Heavy Metals
  - Chemical Oxygen Demand (COD)
  - 5-day Biological Oxygen Demand (BOD5)
  - Total Suspended Solids (TSS)
  - Total Dissolved Oxygen (TDS)
  - Oil and Grease
  - Total Residual Chlorine (TRC)
  - Ammonia-Nitrogen
- Monitoring must be conducted according to test procedures approved under 40 CFR part 136 unless another method is required under 40 CFR Subchapters N or O.
- Proper quality assurance and quality control procedures must be followed when collecting, transporting, or analyzing water samples. If the samples are to be tested at a laboratory, the laboratory should be contacted to determine the type of container to use for the samples, the temperature that the sample should be kept and if there is a limited amount of time for the sample to be delivered to the laboratory for analysis.
- The results of the analysis shall be kept with the inspection report for the outfall or observation point.

## **MCM #3: ILLICIT DISCHARGE, DETECTION & ELIMINATION PROGRAM**

- All screening reports and laboratory of field analysis information must be maintained by the municipality for at least 5 years from the date of the sample measurement or report.
- The municipality must make records available to the public at reasonable times during regular business hours.

### **IV. Identifying Source of an Illicit Discharge**

If it is determined that there is an illicit discharge from an outfall or as a result of a complaint, the municipality should identify the potential source of the illicit discharge using the following strategies:

- Track the flow upstream along the storm sewer or through open channel flow to determine where the flow originates using the municipality's storm sewer mapping.
- If necessary, use laboratory analysis of samples from upstream locations to determine the presence or absence of the suspected illicit discharge substance(s).
- Once the source of the discharge is found, determine the owner or responsible party for the discharge by property records, field observation or other methods.

### **V. Eliminating an Illicit Discharge**

Once the source of the illicit discharge and the responsible party are identified, the municipality should enforce their stormwater ordinance requirements by:

- Issuing a written notice to the responsible party to eliminate the illicit discharge and provide a limited time period for compliance if a violation causes no immediate danger to life, public health, or property.
- Confirm that the illicit discharge has been eliminated at the end of the allotted time.
- If the owner does not correct the violation within the allowed time period, the municipality may revoke or suspend any, or all, applicable approvals and permits pertaining to any provision of their ordinance.

### **VI. Assessing the Potential for Illicit Discharges associated with Wastewater**

There is a potential for illicit discharges from failing on-lot sewage disposal systems or from leaking or overflowing sanitary sewer systems.

On-lot sewage disposal systems: The municipality should enforce their ordinances for the operation and maintenance of on-lot sewage disposal systems and be aware of any complaints reported to the County Sewage Enforcement Officer.

Public sanitary sewer: The municipality or municipal authority responsible for the sanitary sewer system should have a program to address sanitary sewer overflows and potential leaking sanitary sewer systems including inspection, reporting and repairs of the system as needed.

### **VII. Access to Private Property**

The municipality should have a provision in their stormwater management ordinance that allows the municipal representative, upon presentation of proper credentials, to enter at reasonable times upon any property within the municipality to inspect the condition of the stormwater

structures and facilities in regard to any aspect regulated by the municipality's stormwater ordinance. The property owner should be contacted to notify them of the need to access the property.

### **VIII. Program Documentation, Evaluation and Assessment**

Documentation of outfall inspections, sampling, illicit discharges evaluations, enforcement or corrections should be maintained by the municipality for a minimum of 5 years.

Storm sewer mapping and the illicit discharge detection and elimination program should be reviewed each year of the permit and updated as needed.

### **IX. Addressing Public Complaints**

The municipality provides a method for the public to report complaints of potential illicit discharges.

- The public is directed to call the municipal office with information regarding illicit discharges or potential pollution. The telephone number is available on the municipal website.
- The information reported to the municipal office will be documented with the time, location and nature of the complaint/situation and the name and contact information of the reporting individual.
- The municipal staff receiving the complaint will forward the information to the appropriate party for investigation.
- The investigation and subsequent action or enforcement will be documented.



# **Appendix L:**

## **Outfall Inspection Reports**



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>AS</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION  |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |  |   |   |   |
|--|--|---|---|---|
| Permittee Name: <b>Towamencin Township</b>   |  | NPDES Permit No.: <b>PAI130083</b>  |   |   |
| Date of Inspection: <b>6/5/2025</b>  |  | Outfall ID No.: <b>A1</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |  | Latitude: _____ ° _____ ' _____ "   |   |   |
|  |  | Longitude: _____ ° _____ ' _____ "  |   |   |
|  |  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |  | Date of Previous Precipitation: <b>5/31/2025</b>  |   |   |
|  |  | Amount of Previous Precipitation: <b>0.06</b> in  |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |   |
| OUTFALL DESCRIPTION  |  |   |   |   |
| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
| <input type="checkbox"/> Closed Pipe   | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel   | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input checked="" type="checkbox"/> Other                        | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |  |   |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |  |   |   |   |
| DRY WEATHER FLOW EVALUATION  |  |   |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |  |   |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |  |   |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |  |   |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |  |   |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A3</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☒ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

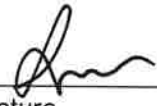
Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |


| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/5/2025</b>  |   | Outfall ID No.: <b>B16</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>5/31/2025</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.06</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel   | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other  | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>  | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br>_____<br>Responsible Official Name<br><br>215-340-0600<br>_____<br>Telephone No.  | <br>_____<br>Signature<br><br>6/5/2025<br>_____<br>Date |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>C12</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____° _____' _____"  |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____° _____' _____"   |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.


Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C5A</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>LSL</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____ ° _____ ' _____ "   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____ ° _____ ' _____ "  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>L9A</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____ ° _____ ' _____ "   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____ ° _____ ' _____ "  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>18</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION  |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>624</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
|  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
|  |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
|  |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |
|  |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION  |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br>_____<br>Responsible Official Name<br>215-340-0600<br>_____<br>Telephone No.  | <br>_____<br>Signature<br>6/5/2025<br>_____<br>Date |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C25</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____° _____' _____"  |
|  | Longitude: _____° _____' _____"   |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C20</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PA130083</b>   |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C21</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>C26A</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____° _____' _____"  |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____° _____' _____"   |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C26</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☒ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION  |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>624A</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <u>18</u> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☒ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.


Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>L17</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.06 in</b>  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

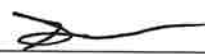
Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br>Responsible Official Name   | <br>Signature |
| 215-340-0600<br>Telephone No.   | 6/5/2025<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C30</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.06</b> in  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE                                  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---------------------------------------|---|--|---|---|
| <input type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in<br><b>24 H x 36 W</b>                      | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION


I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>D4</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☒ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>D5</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____° _____' _____"  |
|  | Longitude: _____° _____' _____"   |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>A19L</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A19</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.06 in</b>  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in<br><b>18(H)</b><br><b>x 24(W)</b>          | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>A23a</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____ ° _____ ' _____ "   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____ ° _____ ' _____ "  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION


I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>A21a</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____° _____' _____"  |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____° _____' _____"   |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br>Responsible Official Name   | <br>Signature |
| 215-340-0600<br>Telephone No.   | 6/5/2025<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A34</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
|---|---|--|---|--|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input checked="" type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A31</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input checked="" type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Sheet flow</b>  | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

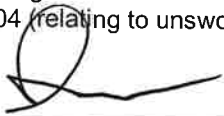
Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br><hr/> Responsible Official Name<br>215-340-0600<br><hr/> Telephone No.  | <br><hr/> Signature<br>6/5/2025<br><hr/> Date |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>L30a</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>5/31/2025</b><br>Amount of Previous Precipitation: <b>0.06 in</b> |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                    |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☒ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

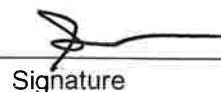
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>E9A</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>5/31/2025</b><br>Amount of Previous Precipitation: <b>0.06</b> in |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                    |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>D11</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION


I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |  |   |  |   |
|--|--|---|--|---|
| Permittee Name: <b>Towamencin Township</b>   |  | NPDES Permit No.: <b>PAI130083</b>  |  |   |
| Date of Inspection: <b>6/5/2025</b>  |  | Outfall ID No.: <b>D9</b>   |  |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |  | Latitude: _____° _____' _____"  |  |   |
|  |  | Longitude: _____° _____' _____"   |  |   |
|  |  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |  |   |
|  |  | Date of Previous Precipitation: <b>5/31/2025</b>  |  |   |
|  |  | Amount of Previous Precipitation: <b>0.06</b> in  |  |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |  |   |
|  |  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |   |
| OUTFALL DESCRIPTION  |  |   |  |   |
| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS   | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP | <input type="checkbox"/> Circular <input type="checkbox"/> Single                             | Diameter: _____ in<br><br><b>36(H)</b><br><b>48(W)</b> | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
|  | <input type="checkbox"/> PVC <input type="checkbox"/> HDPE           | <input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Double                |  |   |
|  | <input type="checkbox"/> Steel <input type="checkbox"/> Other        | <input type="checkbox"/> Box <input type="checkbox"/> Triple                                  |  |   |
|  |  | <input type="checkbox"/> Other <input type="checkbox"/> Other                                 |  |   |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete                                    | <input type="checkbox"/> Trapezoid  | Depth: _____ in  |   |
|  | <input type="checkbox"/> Earthen                                     | <input type="checkbox"/> Parabolic  | Top Width: _____ in                                    |   |
|  | <input type="checkbox"/> Rip-Rap                                     | <input type="checkbox"/> Other  | Bottom Width: _____                                    |   |
|  | <input type="checkbox"/> Other                                       |   |  |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |  |   |  |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |  |   |  |   |
| DRY WEATHER FLOW EVALUATION  |  |   |  |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |  |   |  |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |  |   |  |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |  |   |  |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |  |   |  |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A 38</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____° _____' _____"  |
|  | Longitude: _____° _____' _____"   |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>18</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A42</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>18</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

Outfall Not Found  
Basin outlet inspected

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A37</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____   |
|  | Longitude: _____  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.06</b> in  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments: *Basin outlet inspected  
outfall not found*

### RESPONSIBLE OFFICIAL CERTIFICATION


I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>A36</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☐ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>E7A</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____° _____' _____"   |   |   |
|  |   | Longitude: _____° _____' _____"  |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe<br><br><input type="checkbox"/> Open Channel   | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in<br><br>Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>E13A</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>6/19/25</b><br>Amount of Previous Precipitation: <b>0.39</b> in |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

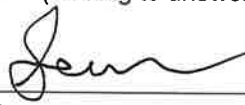
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E12</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial<br><input type="checkbox"/> Commercial<br><input type="checkbox"/> Open Space | <input type="checkbox"/> Urban Residential<br><input checked="" type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Other: |
| Latitude: _____ ° _____ ' _____ "   |   |
| Longitude: _____ ° _____ ' _____ "  |   |
| Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No  |   |
| Date of Previous Precipitation: <b>6/19/25</b>  |   |
| Amount of Previous Precipitation: <b>0.39</b> in  |   |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE   | DIMENSIONS   | SUBMERGED   |   |
|---|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP<br><input type="checkbox"/> PVC<br><input type="checkbox"/> Steel  | <input checked="" type="checkbox"/> Circular<br><input type="checkbox"/> Elliptical<br><input type="checkbox"/> Box<br><input type="checkbox"/> Other | <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> HDPE<br><input type="checkbox"/> Other | <input type="checkbox"/> Single<br><input type="checkbox"/> Double<br><input type="checkbox"/> Triple<br><input type="checkbox"/> Other | Diameter: <b>36</b> in<br><br><input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other  | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____  |   |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

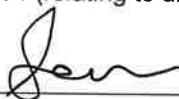
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>E17</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>6/19/25</b><br>Amount of Previous Precipitation: <b>0.39 in</b> |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

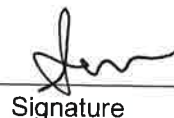
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E16</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____° _____' _____"  |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____° _____' _____"   |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
|---|---|--|---|--|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input checked="" type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

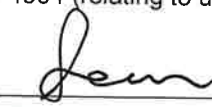
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>#1A E18</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>6/19/25</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.39 in</b>  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
|---|---|--|---|--|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in<br><b>36x48</b>                            | <input checked="" type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E20</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>E24</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>6</b> in   | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

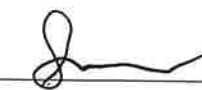
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>E25</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>6/19/25</b>  |
|  | Amount of Previous Precipitation: <b>0.39 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

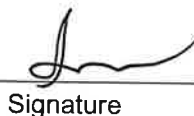
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E26A</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input checked="" type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>sheet Flow</b>  | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>D14</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____   |
|  | Longitude: _____  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>6/19/25</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.39 in</b>  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>D15</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION


I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>E5A</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
|  |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E5C</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

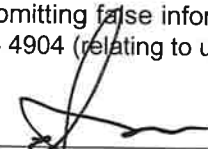
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION  |   |  |   |  |
|---|---|--|---|--|
| Permittee Name: <b>Towamencin Township</b>  |   | NPDES Permit No.: <b>PAI130083</b>   |   |  |
| Date of Inspection: <b>6/24/2025</b>  |   | Outfall ID No.: <b>E1</b>  |   |  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |  |
|   |   | Longitude: _____ ° _____ ' _____ "   |   |  |
|   |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |  |
|   |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |  |
|   |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |  |
| Inspector Name(s): <b>Sean O'Donnell</b>  |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |  |
|   |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |  |
| OUTFALL DESCRIPTION   |   |  |   |  |
| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
| <input checked="" type="checkbox"/> Closed Pipe   | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input checked="" type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel   | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)   |   |  |   |  |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A   |   |  |   |  |
| DRY WEATHER FLOW EVALUATION   |   |  |   |  |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |  |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |  |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>EG</b>  |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____  |   |   |
|  |   | Longitude: _____   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>48</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION  |   |  |   |  |
|---|---|--|---|--|
| Permittee Name: <b>Towamencin Township</b>  |   | NPDES Permit No.: <b>PAI130083</b>   |   |  |
| Date of Inspection: <b>6/24/2025</b>  |   | Outfall ID No.: <b>E6A</b>   |   |  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |  |
|   |   | Longitude: _____ ° _____ ' _____ "   |   |  |
|   |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |  |
|   |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |  |
|   |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |  |
| Inspector Name(s): <b>Sean O'Donnell</b>  |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |  |
|   |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |  |
| OUTFALL DESCRIPTION   |   |  |   |  |
| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
| <input checked="" type="checkbox"/> Closed Pipe   | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input checked="" type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel   | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)   |   |  |   |  |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A   |   |  |   |  |
| DRY WEATHER FLOW EVALUATION   |   |  |   |  |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.   |   |  |   |  |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.   |   |  |   |  |



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>E7A</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____° _____' _____"   |   |   |
|  |   | Longitude: _____° _____' _____"  |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E13A</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

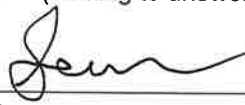
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E12</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial<br><input type="checkbox"/> Commercial<br><input type="checkbox"/> Open Space | <input type="checkbox"/> Urban Residential<br><input checked="" type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Other: |
| Latitude: _____ ° _____ ' _____ "   |   |
| Longitude: _____ ° _____ ' _____ "  |   |
| Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No  |   |
| Date of Previous Precipitation: <b>6/19/25</b>  |   |
| Amount of Previous Precipitation: <b>0.39</b> in  |   |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE   | DIMENSIONS   | SUBMERGED   |   |
|---|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP<br><input type="checkbox"/> PVC<br><input type="checkbox"/> Steel  | <input checked="" type="checkbox"/> Circular<br><input type="checkbox"/> Elliptical<br><input type="checkbox"/> Box<br><input type="checkbox"/> Other | <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> HDPE<br><input type="checkbox"/> Other | <input type="checkbox"/> Single<br><input type="checkbox"/> Double<br><input type="checkbox"/> Triple<br><input type="checkbox"/> Other | Diameter: <b>36</b> in<br><br><input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other  | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____  |   |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

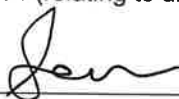
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>E17</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>6/19/25</b><br>Amount of Previous Precipitation: <b>0.39 in</b> |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

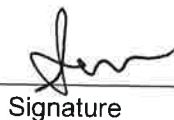
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E16</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____ ° _____ ' _____ "   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____ ° _____ ' _____ "  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
|---|---|--|---|--|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input checked="" type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

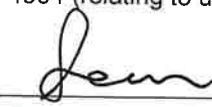
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>#1A E18</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>6/19/25</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.39 in</b>  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
|---|---|--|---|--|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in<br><b>36x48</b>                            | <input checked="" type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E20</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>E24</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>6</b> in   | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

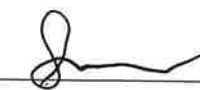
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>E25</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>6/19/25</b>  |
|  | Amount of Previous Precipitation: <b>0.39</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

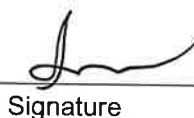
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E26A</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input checked="" type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>sheet Flow</b>  | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>   | Outfall ID No.: <b>D14</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____   |
|  | Longitude: _____  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>6/19/25</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.39 in</b>  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>D15</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>E5A</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/24/2025</b>  | Outfall ID No.: <b>E5C</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>6/19/25</b>  |
|   | Amount of Previous Precipitation: <b>0.39 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION  |   |  |   |  |
|---|---|--|---|--|
| Permittee Name: <b>Towamencin Township</b>  |   | NPDES Permit No.: <b>PAI130083</b>   |   |  |
| Date of Inspection: <b>6/24/2025</b>  |   | Outfall ID No.: <b>E1</b>  |   |  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |  |
|   |   | Longitude: _____ ° _____ ' _____ "   |   |  |
|   |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |  |
|   |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |  |
|   |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |  |
| Inspector Name(s): <b>Sean O'Donnell</b>  |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |  |
|   |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |  |
| OUTFALL DESCRIPTION   |   |  |   |  |
| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
| <input checked="" type="checkbox"/> Closed Pipe   | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input checked="" type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel   | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)   |   |  |   |  |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A   |   |  |   |  |
| DRY WEATHER FLOW EVALUATION   |   |  |   |  |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |  |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |  |



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/24/2025</b>   |   | Outfall ID No.: <b>EG</b>  |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____  |   |   |
|  |   | Longitude: _____   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>48</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION  |   |  |   |  |
|---|---|--|---|--|
| Permittee Name: <b>Towamencin Township</b>  |   | NPDES Permit No.: <b>PAI130083</b>   |   |  |
| Date of Inspection: <b>6/24/2025</b>  |   | Outfall ID No.: <b>E6A</b>   |   |  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |  |
|   |   | Longitude: _____ ° _____ ' _____ "   |   |  |
|   |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |  |
|   |   | Date of Previous Precipitation: <b>6/19/25</b>   |   |  |
|   |   | Amount of Previous Precipitation: <b>0.39</b> in   |   |  |
| Inspector Name(s): <b>Sean O'Donnell</b>  |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |  |
|   |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |  |
| OUTFALL DESCRIPTION   |   |  |   |  |
| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
| <input checked="" type="checkbox"/> Closed Pipe   | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input checked="" type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel   | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)   |   |  |   |  |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A   |   |  |   |  |
| DRY WEATHER FLOW EVALUATION   |   |  |   |  |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.   |   |  |   |  |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.   |   |  |   |  |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/24/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |  |   |   |   |
|--|--|---|---|---|
| Permittee Name: <b>Towamencin Township</b>   |  | NPDES Permit No.: <b>PAI130083</b>  |   |   |
| Date of Inspection: <b>6/5/2025</b>  |  | Outfall ID No.: <b>AS</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |  | Latitude: _____ ° _____ ' _____ "   |   |   |
|  |  | Longitude: _____ ° _____ ' _____ "  |   |   |
|  |  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |  | Date of Previous Precipitation: <b>5/31/2025</b>  |   |   |
|  |  | Amount of Previous Precipitation: <b>0.06</b> in  |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |   |
| OUTFALL DESCRIPTION  |  |   |   |   |
| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
| <input type="checkbox"/> Closed Pipe   | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel   | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, skip to Certification Section)  |  |   |   |   |
| Description of Flow Rate: <input checked="" type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input type="checkbox"/> N/A  |  |   |   |   |
| DRY WEATHER FLOW EVALUATION  |  |   |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |  |   |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |  |   |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |  |   |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |  |   |   |   |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A1</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>5/31/2025</b><br>Amount of Previous Precipitation: <b>0.06 in</b> |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                    |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input checked="" type="checkbox"/> Other                        | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
|  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
|  |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
|  |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |
|  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A3</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☒ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

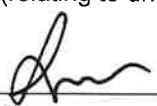
Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
|  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
|  |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
|  |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |
|  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>B16</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|--|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe  | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other  | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>  | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

|  |                |              |                  |                |              |
|--|----------------|--------------|------------------|----------------|--------------|
| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |                |              |                  |                |              |
| <b>FIELD / LABORATORY ANALYSIS</b>   |                |              |                  |                |              |
| <b>PARAMETER</b>   | <b>RESULTS</b> | <b>UNITS</b> | <b>PARAMETER</b> | <b>RESULTS</b> | <b>UNITS</b> |
| Flow Rate  |                | GPM          | Fecal Coliform   |                | No./100 mL   |
| pH   |                | S.U.         | COD              |                | mg/L         |
| Total Residual Chlorine (TRC)  |                | mg/L         | BOD5             |                | mg/L         |
| Conductivity   |                | µmhos/cm     | TSS              |                | mg/L         |
| Ammonia-Nitrogen   |                | mg/L         | TDS              |                | mg/L         |
| Other: _____   |                |              | Oil and Grease   |                | mg/L         |
| Other: _____   |                |              | Other: _____     |                |              |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |                |              |                  |                |              |
| <b>ILLICIT DISCHARGES</b>  |                |              |                  |                |              |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |                |              |                  |                |              |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |                |              |                  |                |              |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |                |              |                  |                |              |
| Inspector Comments:  |                |              |                  |                |              |

|  |  |
|--|--|
| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>  |  |
| I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification). |  |
| Sean O'Donnell   |  |
| Responsible Official Name  | Signature  |
| 215-340-0600   | 6/5/2025   |
| Telephone No.  | Date   |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>C12</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C5A</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____   |
|  | Longitude: _____  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>LSL</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION  |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |




## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/5/2025</b>  |   | Outfall ID No.: <b>L9A</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>5/31/2025</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.06</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <u>18</u> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |



| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION  |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>624</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C25</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____° _____' _____"  |
|  | Longitude: _____° _____' _____"   |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

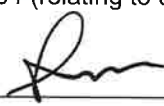
Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>620</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Amount of Previous Precipitation: <b>0.06 in</b>  |
|  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>C21</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____   |
|  | Longitude: _____  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
|  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
|  |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
|  |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |
|  |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION  |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date   |

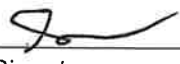


## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |  |   |   |   |
|--|--|---|---|---|
| Permittee Name: <b>Towamencin Township</b>   |  | NPDES Permit No.: PAI130083   |   |   |
| Date of Inspection: <b>6/5/2025</b>  |  | Outfall ID No.: <b>C26A</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |  | Latitude: _____° _____' _____"  |   |   |
|  |  | Longitude: _____° _____' _____"   |   |   |
|  |  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |  | Date of Previous Precipitation: <b>5/31/2025</b>  |   |   |
|  |  | Amount of Previous Precipitation: <b>0.06 in</b>  |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |   |
| OUTFALL DESCRIPTION  |  |   |   |   |
| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
| <input type="checkbox"/> Closed Pipe   | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel   | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |  |   |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |  |   |   |   |
| DRY WEATHER FLOW EVALUATION  |  |   |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |  |   |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |  |   |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |  |   |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |  |   |   |   |



| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |


| RESPONSIBLE OFFICIAL CERTIFICATION  |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br>_____<br>Responsible Official Name<br><br>215-340-0600<br>_____<br>Telephone No.  | <br>_____<br>Signature<br><br>6/5/2025<br>_____<br>Date |



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/5/2025</b>  |   | Outfall ID No.: <b>C26</b>   |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |   |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>5/31/2025</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.06</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Significant <input type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |   |

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>624A</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>18</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☒ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>L17</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>C30</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE                                  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---------------------------------------|---|--|---|---|
| <input type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in<br><b>24 H x 36 W</b>                      | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☒ Trickle ☐ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |   |
|--|---|--|---|---|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |   |
| Date of Inspection: <b>6/5/2025</b>  |   | Outfall ID No.: <b>D4</b>  |   |   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____° _____' _____"   |   |   |
|  |   | Longitude: _____° _____' _____"  |   |   |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |   |
|  |   | Date of Previous Precipitation: <b>5/31/2025</b>   |   |   |
|  |   | Amount of Previous Precipitation: <b>0.06</b> in   |   |   |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |   |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |   |
| OUTFALL DESCRIPTION  |   |  |   |   |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
| <input checked="" type="checkbox"/> Closed Pipe  | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |
| Dry Weather Flow Present at Outfall During Inspection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |   |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input checked="" type="checkbox"/> Moderate <input type="checkbox"/> Significant <input type="checkbox"/> N/A  |   |  |   |   |
| DRY WEATHER FLOW EVALUATION  |   |  |   |   |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |   |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, provide a description below.  |   |  |   |   |



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>D5</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

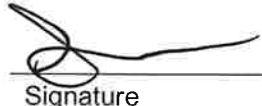
Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br>Responsible Official Name   | <br>Signature |
| 215-340-0600<br>Telephone No.   | 6/5/2025<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A19L</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>5/31/2025</b><br>Amount of Previous Precipitation: <b>0.06 in</b> |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                    |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>A19</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in<br><b>18(H)<br/>x 24(W)</b>                | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A23a</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION


Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____)  |         |          |                |         |            |
|---|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS   |         |          |                |         |            |
| PARAMETER   | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate   |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH  |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)   |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen  |         | mg/L     | TDS            |         | mg/L       |
| Other: _____  |         |          | Oil and Grease |         | mg/L       |
| Other: _____  |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:   |         |          |                |         |            |
| ILLICIT DISCHARGES  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If Yes, describe efforts made to determine the source(s) of the illicit discharge. |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.  |         |          |                |         |            |
| Inspector Comments:   |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION   |   |
|--|---|
| I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification). |   |
| Sean O'Donnell<br>Responsible Official Name<br>215-340-0600<br>Telephone No.   | <br>Signature<br>6/5/2025<br>Date |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>A21a</b>   |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____° _____' _____"  |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____° _____' _____"   |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>24</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

| BACKGROUND INFORMATION   |   |  |   |  |
|--|---|--|---|--|
| Permittee Name: <b>Towamencin Township</b>   |   | NPDES Permit No.: <b>PAI130083</b>   |   |  |
| Date of Inspection: <b>6/5/2025</b>  |   | Outfall ID No.: <b>A34</b>   |   |  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: |   | Latitude: _____ ° _____ ' _____ "  |   |  |
|  |   | Longitude: _____ ° _____ ' _____ "   |   |  |
|  |   | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |  |
|  |   | Date of Previous Precipitation: <b>5/31/2025</b>   |   |  |
|  |   | Amount of Previous Precipitation: <b>0.06</b> in   |   |  |
| Inspector Name(s): <b>Sean O'Donnell</b>   |   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |   |  |
|  |   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |   |  |
| OUTFALL DESCRIPTION  |   |  |   |  |
| TYPE   | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED  |
| <input checked="" type="checkbox"/> Closed Pipe  | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in  | <input checked="" type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel  | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |  |
| Dry Weather Flow Present at Outfall During Inspection? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If No, skip to Certification Section)  |   |  |   |  |
| Description of Flow Rate: <input type="checkbox"/> Trickle <input type="checkbox"/> Moderate <input type="checkbox"/> Significant <input checked="" type="checkbox"/> N/A  |   |  |   |  |
| DRY WEATHER FLOW EVALUATION  |   |  |   |  |
| Does the dry weather flow contain color? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |  |
| Does the dry weather flow contain an odor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.  |   |  |   |  |
| Is there an observed change in the receiving waters as a result of the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |
| Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, provide a description below.   |   |  |   |  |

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>A31</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____° _____' _____"  |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____° _____' _____"   |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input checked="" type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Sheet flow</b>  | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>L30a</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____   |
|  | Longitude: _____  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input checked="" type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>36</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☒ Yes ☐ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☒ Moderate ☐ Significant ☐ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

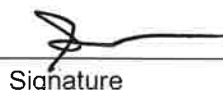
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>E9A</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>5/31/2025</b><br>Amount of Previous Precipitation: <b>0.06</b> in |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                    |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: ____                   |         |          | Oil and Grease |         | mg/L       |
| Other: ____                   |         |          | Other: ____    |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>D11</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>D9</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input checked="" type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in<br><b>36(H)</b><br><b>48(W)</b>            | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A 38</b>   |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>5/31/2025</b><br>Amount of Previous Precipitation: <b>0.06 in</b> |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                    |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input type="checkbox"/> RCP <input checked="" type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>18</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments:

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.

  
Signature

6/5/2025

Date





## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A42</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____ ° _____ ' _____ "   |
|  | Longitude: _____ ° _____ ' _____ "  |
|  | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
|  | Date of Previous Precipitation: <b>5/31/2025</b>  |
|  | Amount of Previous Precipitation: <b>0.06 in</b>  |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|  | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>18</b> in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No If Yes, provide a description below.

Were sample(s) collected of the dry weather flow? ☐ Yes ☒ No (If Yes, No. Samples: \_\_\_\_\_)

### FIELD / LABORATORY ANALYSIS

| PARAMETER                     | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
|-------------------------------|---------|----------|----------------|---------|------------|
| Flow Rate                     |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH                            |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC) |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity                  |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen              |         | mg/L     | TDS            |         | mg/L       |
| Other: _____                  |         |          | Oil and Grease |         | mg/L       |
| Other: _____                  |         |          | Other: _____   |         |            |

Indicate the parameters above that were analyzed by a DEP-certified laboratory:

### ILLICIT DISCHARGES

Is the dry weather flow an illicit discharge? ☐ Yes ☒ No

If Yes, describe efforts made to determine the source(s) of the illicit discharge.

Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.

Inspector Comments: *Outfall Not Found*  
*Basin outlet inspected*

### RESPONSIBLE OFFICIAL CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).

Sean O'Donnell

Responsible Official Name

215-340-0600

Telephone No.



Signature

6/5/2025

Date



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|   |   |
|---|---|
| Permittee Name: <b>Towamencin Township</b>  | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>   | Outfall ID No.: <b>A37</b>  |
| Land Uses in Outfall Drainage Area (Select All):                                  | Latitude: _____   |
| <input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential    | Longitude: _____  |
| <input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential | Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No              |
| <input type="checkbox"/> Open Space <input type="checkbox"/> Other:               | Date of Previous Precipitation: <b>5/31/2025</b>  |
|   | Amount of Previous Precipitation: <b>0.06</b> in  |
| Inspector Name(s): <b>Sean O'Donnell</b>  | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
|   | Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

### OUTFALL DESCRIPTION

| TYPE  | MATERIAL  | SHAPE  | DIMENSIONS  | SUBMERGED   |
|---|---|--|---|---|
| <input checked="" type="checkbox"/> Closed Pipe | <input checked="" type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input checked="" type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: <b>12</b> in<br><b>24</b>                           | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input type="checkbox"/> Open Channel           | <input type="checkbox"/> Concrete<br><input type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input type="checkbox"/> Other   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

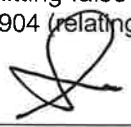
Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

Does the dry weather flow contain an odor? ☐ Yes ☒ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.

| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| FIELD / LABORATORY ANALYSIS  |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| ILLICIT DISCHARGES   |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments: <span style="color: blue; font-family: cursive;">Basin outlet inspected<br/>outfall not found</span>                           |         |          |                |         |            |

| RESPONSIBLE OFFICIAL CERTIFICATION  |  |
|---|--|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |  |
| Sean O'Donnell<br>_____<br>Responsible Official Name  | <br>_____<br>Signature |
| 215-340-0600<br>_____<br>Telephone No.  | 6/5/2025<br>_____<br>Date  |



## MS4 OUTFALL FIELD SCREENING REPORT

### BACKGROUND INFORMATION

|  |   |
|--|---|
| Permittee Name: <b>Towamencin Township</b>   | NPDES Permit No.: <b>PAI130083</b>  |
| Date of Inspection: <b>6/5/2025</b>  | Outfall ID No.: <b>A36</b>  |
| Land Uses in Outfall Drainage Area (Select All):<br><input type="checkbox"/> Industrial <input type="checkbox"/> Urban Residential<br><input type="checkbox"/> Commercial <input type="checkbox"/> Suburban Residential<br><input type="checkbox"/> Open Space <input type="checkbox"/> Other: | Latitude: _____<br>Longitude: _____<br>Dry Weather Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Date of Previous Precipitation: <b>5/31/2025</b><br>Amount of Previous Precipitation: <b>0.06 in</b> |
| Inspector Name(s): <b>Sean O'Donnell</b>   | Were Photographs Taken? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Are Photographs Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                    |

### OUTFALL DESCRIPTION

| TYPE   | MATERIAL   | SHAPE   | DIMENSIONS  | SUBMERGED   |
|--|--|---|---|---|
| <input type="checkbox"/> Closed Pipe             | <input type="checkbox"/> RCP <input type="checkbox"/> CMP<br><input type="checkbox"/> PVC <input type="checkbox"/> HDPE<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Circular <input type="checkbox"/> Single<br><input type="checkbox"/> Elliptical <input type="checkbox"/> Double<br><input type="checkbox"/> Box <input type="checkbox"/> Triple<br><input type="checkbox"/> Other <input type="checkbox"/> Other | Diameter: _____ in  | <input type="checkbox"/> In Water<br><input type="checkbox"/> With Sediment |
| <input checked="" type="checkbox"/> Open Channel | <input type="checkbox"/> Concrete<br><input checked="" type="checkbox"/> Earthen<br><input type="checkbox"/> Rip-Rap<br><input type="checkbox"/> Other                                   | <input type="checkbox"/> Trapezoid<br><input type="checkbox"/> Parabolic<br><input checked="" type="checkbox"/> Other<br><b>Swale</b>   | Depth: _____ in<br>Top Width: _____ in<br>Bottom Width: _____ |   |

Dry Weather Flow Present at Outfall During Inspection? ☐ Yes ☒ No (If No, skip to Certification Section)

Description of Flow Rate: ☐ Trickle ☐ Moderate ☐ Significant ☒ N/A

### DRY WEATHER FLOW EVALUATION

Does the dry weather flow contain color? ☐ Yes ☒ No If Yes, provide a description below.

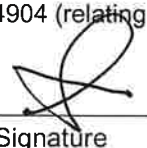
Does the dry weather flow contain an odor? ☐ Yes ☐ No If Yes, provide a description below.

Is there an observed change in the receiving waters as a result of the discharge? ☐ Yes ☒ No  
If Yes, provide a description below.

Does the dry weather flow contain floating solids, scum, sheen or substances that result in deposits? ☐ Yes ☒ No  
If Yes, provide a description below.



| Were sample(s) collected of the dry weather flow? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, No. Samples: _____) |         |          |                |         |            |
|--|---------|----------|----------------|---------|------------|
| <b>FIELD / LABORATORY ANALYSIS</b>   |         |          |                |         |            |
| PARAMETER  | RESULTS | UNITS    | PARAMETER      | RESULTS | UNITS      |
| Flow Rate  |         | GPM      | Fecal Coliform |         | No./100 mL |
| pH   |         | S.U.     | COD            |         | mg/L       |
| Total Residual Chlorine (TRC)  |         | mg/L     | BOD5           |         | mg/L       |
| Conductivity   |         | µmhos/cm | TSS            |         | mg/L       |
| Ammonia-Nitrogen   |         | mg/L     | TDS            |         | mg/L       |
| Other: _____   |         |          | Oil and Grease |         | mg/L       |
| Other: _____   |         |          | Other: _____   |         |            |
| Indicate the parameters above that were analyzed by a DEP-certified laboratory:  |         |          |                |         |            |
| <b>ILLICIT DISCHARGES</b>  |         |          |                |         |            |
| Is the dry weather flow an illicit discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                  |         |          |                |         |            |
| If Yes, describe efforts made to determine the source(s) of the illicit discharge.   |         |          |                |         |            |
| Describe corrective actions taken by the permittee in response to the finding of an illicit discharge.   |         |          |                |         |            |
| Inspector Comments:  |         |          |                |         |            |

| <b>RESPONSIBLE OFFICIAL CERTIFICATION</b>   |   |
|---|---|
| <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowledge of violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification).</p> |   |
| Sean O'Donnell<br>_____<br>Responsible Official Name<br><br>215-340-0600<br>_____<br>Telephone No.  | <br>_____<br>Signature<br><br>6/5/2025<br>_____<br>Date |

# **Appendix M:**

## **PSCM BMP Inventory**

| Post Construction Storm Water Management BMPs in Towamencin Township, Montgomery County, PA     |  |   |                  |                  |                               |                       |             |   |   |                        |
|---|--|---|------------------|------------------|-------------------------------|-----------------------|-------------|---|---|------------------------|
| Owner/Operator Information  | Common Name/Type of Development            | Address                                 | NPDES Permit No. | TMP Number       | Longitude, Latitude           | BMP Type              | Date in use | O&M Required  | Was proper BMP O&M performed during year? | Complaints or Comments |
| The Robert Nicoletti Family Trust<br>100 Ross Road, Ste. 200,<br>King of Prussia, PA 19406      | Office Building - SKF                      | 890 Forty Foot Rd<br>Lansdale 19446     |                  | 53-00-08496-00-1 | 40°15'30.4"N,<br>75°19'47.6"W | Basin                 | 2008        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitation event | Owner's Responsibility                    | None                   |
| North Montco Technical Career Center  | School Addition                            | 1265 Sumneytown Pike<br>Lansdale 19446  |                  | 53-00-07976-00-8 | 40°14'02.2"N,<br>75°19'14.2"W | No new Facility       | 2010        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitation event | Owner's Responsibility                    | None                   |
| Christopher Dock Mennonite High School  | School Addition                            | 1000 Forty Foot Rd<br>Lansdale 19446    |                  | 53-00-03052-00-9 | 40°15'07.9"N,<br>75°20'04.2"W | Basin                 | 2005        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitation event | Owner's Responsibility                    | None                   |
| NAGD NNN CB PA LP<br>3131 McKinney Ave, Ste. L-10,<br>Dallas, TX 75204                          | Citizens Bank                              | 780 Valley Forge Road<br>Lansdale 19446 |                  | 53-00-08948-00-8 | 40°14'30.6"N,<br>75°18'08.1"W | Underground Facility? | 2007        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitation event | Owner's Responsibility                    | None                   |
| Tollgate Commons LLC<br>101 Cowpath Road, Lansdale, PA 19445                                    | Tollgate Plaza - Retail, Restaurant & Bank | 1586 Sumneytown Pike<br>Lansdale 19446  |                  | 53-00-08244-001  | 40°14'32.3"N,<br>75°20'14.7"W | Underground Basin?    | 2007        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitation event | Owner's Responsibility                    | None                   |
| Montgomery CIDC<br>PO Box 305, C/O Green Tweed & Co, Kulpville, PA 19443                        | Green, Tweed Leasing Corporation           | 2075 Detwiler Rd<br>Harleysville 19438  |                  | 53-00-02284-00-3 | 40°15'34.2"N,<br>75°20'31.5"W | Basin                 | 2002        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitation event | Owner's Responsibility                    | None                   |
| Mitul & Neha Ajmera,<br>1494 Maxwell Ct., Lansdale, PA 19446 (Maxwell Court Homeowners Assoc.?) | 15 Single Family Houses                    | 1494 Maxwell Ct<br>Lansdale 19446       |                  | 53-00-08380-54-9 | 40°14'26.7"N,<br>75°19'52.7"W | Basin                 | 2006        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitation event | Owner's Responsibility                    | None                   |
| DG Sumneytown LLC   | Rite Aid                                   | 1360 Valley Forge Rd<br>Lansdale 19446  |                  | 53-00-08880-00-4 | 40°13'48.1"N,<br>75°18'51.9"W | Underground Facility? | 2005        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitation event | Owner's Responsibility                    | None                   |

| Post Construction Storm Water Management BMPs in Towamencin Township, Montgomery County, PA                    |   |  |                  |                                    |   |                          |             |  |   |                        |
|--|---|--|------------------|------------------------------------|---|--------------------------|-------------|--|---|------------------------|
| Owner/Operator Information   | Common Name/Type of Development                           | Address                                    | NPDES Permit No. | TMP Number                         | Longitude, Latitude   | BMP Type                 | Date in use | O&M Required   | Was proper BMP O&M performed during year? | Complaints or Comments |
| The Robert Nicoletti Family Trust<br>100 Ross Road, Ste. 200,<br>King of Prussia, PA 19406                     | Courtyard by Marriott                                     | 1735 Sumneytown Pike<br>Harleysville 19438 |                  | 53-00-08100-00-1                   | 40°14'54.4"N,<br>75°20'23.5"W                                   | Regional Basin           | 2011        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| The Robert Nicoletti Family Trust<br>100 Ross Road, Ste. 200,<br>King of Prussia, PA 19406                     | Office Building   | 1400 Forty Foot Rd<br>Harleysville 19438   |                  | 53-00-02984-00-5                   | 40°14'54.4"N,<br>75°20'23.5"W                                   | Regional Basin           |             | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Sheftel Allen Forge LLC<br>555 E Lancaster Ave, Ste. 120,<br>Radnor, PA 19087                                  | Allen Forge Shopping Center                               | 850 Valley Forge Rd<br>Lansdale 19446      |                  | 53-00-08944-00-3                   | 40°14'28.4"N,<br>75°18'10.7"W                                   | Underground Basin?       | 2006        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Sandra & Bueters Visser<br>1407 Cheswold Dr, Lansdale, PA<br>19446 Cheswold Estates<br>Homeowners Association? | 17 Single Family Houses                                   | 1407 Cheswold Drive<br>Lansdale, PA 19446  |                  | 53-00-08368-02-7                   | 40°14'23.2"N<br>75°19'36.9"W                                    | Basin                    | 2007        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Immanuel Church of the Nazarene  | Church Addition   | 1260 Welsh Road<br>Lansdale, PA 19446      |                  | 53-00-01892-00-8                   | 40°15'06.3"N,<br>75°18'17.2"W                                   | Underground Facility     | 2012        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| North Penn School District   | Inglewood Elementary Addition                             | 1313 Allentown Rd<br>Lansdale 19446        |                  | 53-00-00316-00-9                   | 40°14'55.1"N,<br>75°18'23.6"W                                   | Basin                    | 2012        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Towamencin Retail Development LLC<br>2700 Funks Road, PO Box 902<br>Hatfield, PA 19440                         | Wawa, Chick-fil-A, Freddie's & Firestone                  | 130 Forty Foot Rd 200<br>Forty Foot Rd     |                  | 53-00-03072-007<br>53-00-03072-003 | 40°15'49.5"N,<br>75°19'16.3"W,<br>40°15'42.6"N,<br>75°19'21.7"W | Two Constructed Wetlands | 2010        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Lillian DiLaurenzo<br>268 Orvilla Road<br>Lansdale, PA 19446   | 3 Single Family Houses<br>(Ardent Development Group, LLC) | 260 Orvilla Rd Lansdale<br>19446           |                  | 53-00-06132-00-7                   | 40°15'12.4"N<br>75°18'32.9"W                                    | Basin                    | 2008        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Thorndale Community Association<br>404 Sumneytown Pike, Ste 200,<br>North Wales, PA 19454                      | Thorndale Housing Development                             | Allentown Rd                               |                  | 53-00-00364-00-6                   | 40°15'44.4"N,<br>75°19'47.0"W,<br>40°15'56.2"N,<br>75°19'34.7"W | Two Constructed Wetlands | 2012        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |

| Post Construction Storm Water Management BMPs in Towamencin Township, Montgomery County, PA                          |  |   |                  |   |   |  |             |  |   |                        |
|--|--|---|------------------|---|---|--|-------------|--|---|------------------------|
| Owner/Operator Information   | Common Name/Type of Development              | Address   | NPDES Permit No. | TMP Number  | Longitude, Latitude   | BMP Type   | Date in use | O&M Required   | Was proper BMP O&M performed during year? | Complaints or Comments |
| Guisepppe Ventimiglia<br>660 Kings Hwy North, Ste. 201<br>Cherry Hill, NJ 08034                                      | Walgreens                                    | 1375 Forty Foot Rd<br>Lansdale 19446                |                  | 53-00-02892-00-7  | 40°14'43.4"N,<br>75°20'17.1"W   | Underground<br>Basin?                                | 2010        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Richard A. & Linda C. Brennan<br>Derek & Amy C. Taylor<br>Rachele G. Lemon   | 3 Single Family Houses                       | 1573, 1575 & 1577<br>Allentown Rd Lansdale<br>19446 |                  | 53-00-00357-00-4<br>53-00-00357-01-3<br>53-00-00357-02-2      | 40°15'22.8"N,<br>75°19'11.1"W   | Underground<br>Facilities?                           | 2007        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Travis C. & Kathryn R. Wood<br>Andrew D. & Erin J. Way   | 2 Single Family Houses                       | 1 Avalon Way<br>3 Avalon Way                        |                  | 53-00-22115-00-8<br>53-00-22115-01-7                          | 40°15'02.0"N,<br>75°18'45.7"W   | Underground<br>Facilities?                           | 2013        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Matthew & Cindy Shepardson   | Single Family House                          | 4 Avalon Way  |                  | 53-00-08708-01-4  | 40°15'05.0"N,<br>75°18'50.0"W   | Underground<br>Facilities?                           | 2015        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Mainland Square Community<br>Association<br>2131 N Broad St, Ste 201<br>North Penn Real Estate<br>Lansdale, PA 19446 | Mainland Square Open Space                   | Wambold Road,<br>Sumneytown Pike &<br>Mainland Road | PAG02004614097   | 53-00-09239-00-5  | 40°15'14.7"N,<br>75°21'17.1"W,<br>40°15'12.4"N,<br>75°21'10.6"W,<br>40°15'10.6"N,<br>75°21'12.4"W | Two Rain<br>Gardens and<br>Detention<br>Basin        | 2015        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Micheal & Colleen Gilorma<br>1828 A Valley Forge Road<br>Lansdale, PA 19446  | Single Family House<br>(Braccia Subdivision) | 1828 Valley Forge Road                              |                  | 53-00-08824-01-5  | 40°13'17.8"N,<br>75°19'23.2"W   | Underground<br>along<br>Driveway                     | 2016        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Morningside at Towamencin<br>Property Company LLC<br>900 Towamencin Ave,<br>Lansdale, PA 19446                       | The Landing Of Towamencin                    | 900 Towamencin Ave.                                 | PAC460116        | 53-00-03036-02-5  | 40°15'01.0"N,<br>75°20'09.5"W,<br>40°15'01.1"N,<br>75°20'13.0"W                                   | Underground<br>Infiltration -<br>Detention<br>Basins | 2020        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Two Farms, Inc., SMG Kulpsville,<br>LLC & Edward & Carol Dougherty   | Royal Farms                                  | 1780 Sumneytown Pk                                  | PAC460090        | 53-00-08328-00-7, 53-<br>00-08324-00-2 & 53-<br>00-08320-00-6 | 40°14'43.2"N,<br>75°20'34.0"W   | Underground<br>Slow Release<br>Detention<br>Basin    | 2019        | Annually for first 5 Years after construction then once every 3 years thereafter or immediately upon the cessation of a 2-year or greater precipitaion event   | Owner's Responsibility                    | None                   |
| Wambold Realty LP  | Wambold Self Storage                         | 531 Wambold Road                                    | PAC460126        | 53-00-09284-00-5  | 40°16'06.2"N,<br>75°20'31.4"W,<br>40°16'02.0"N,<br>75°20'29.1"W,                                  | Infiltration/<br>Biorretention<br>Basins             | 2019 & 2024 | Annually or immediately upon the cessation of a significant precipitaion event   | Owner's Responsibility                    | None                   |
| Patriarch III, LLC<br>311 N Sumneytown Pk, Ste. 1A<br>North Wales, PA 19454  | Warehouse                                    | 2001 Gehman Road                                    |                  | 53-00-03356-00-2  | 40°15'09.8"N,<br>75°20'47.2"W,<br>40°15'09.1"N,<br>75°20'48.2"W                                   | Underground<br>Basin /<br>Detention<br>Basin         | 2021        | Annually or immediately upon the cessation of a significant precipitaion event   | Owner's Responsibility                    | None                   |



| Post Construction Storm Water Management BMPs in Towamencin Township, Montgomery County, PA |                                 |                           |                  |                  |                                |                                |             |  |   |                        |
|---|---------------------------------|---------------------------|------------------|------------------|--------------------------------|--------------------------------|-------------|--|---|------------------------|
| Owner/Operator Information  | Common Name/Type of Development | Address                   | NPDES Permit No. | TMP Number       | Longitude, Latitude            | BMP Type                       | Date in use | O&M Required   | Was proper BMP O&M performed during year? | Complaints or Comments |
| North Penn School District  | North Penn High School          | 1340 S. Valley Forge Road | PAC460382        | 53-00-07964-00-2 | 40°14'03.8"N,<br>75°19'09.0"W  | Underground Basin - Turf Field | 2021        | Annually or immediately upon the cessation of a significant precipitaion event   | Owner's Responsibility                    | None                   |
| Twain GL X LLC<br>2200 Washington Ave<br>St. Louis, MO 63103                                | Self Storage Building           | 1520 Franklin St.         | PAC460482        | 53-00-03192-00-4 | 40°14'38.7"N,<br>75°20'30.2"W  | Underground Basin              | 2023        | Annually or immediately upon the cessation of a significant precipitaion event   | Owner's Responsibility                    | None                   |
| Keli Elizabeth & Thomas Joseph Price Jr   | Single Family House             | 2180 Old Morris Road      |                  | 53-00-06036-01-3 | 40°14'27.0"N,<br>75°21'47.8"W  | Rain Garden                    | 2024        | Annually for first 5 Years after construction then once every 2 years thereafter or immediately upon the cessation of a 100-year or greater precipitaion event | Owner's Responsibility                    | None                   |
| Wambold Realty LP   | Wambold Self Storage - Phase 2  | 531 Wambold Road          | PAC460001C       | 53-00-09284-00-5 | 40°16'07.6", N<br>75°20'28.7"W | Bioretention Basin with MRC    | 2024        | Annually or immediately upon the cessation of a significant precipitaion event   | Owner's Responsibility                    | None                   |

# **Appendix N:**

## **Operation & Maintenance Plan**

## MCM #6: GOOD HOUSEKEEPING FOR MUNICIPAL OPERATIONS

### BMP #1: Inventory of Facilities and Activities

| <i>Facility/Activity</i>               | <i>Storm Sewer System Impact</i>                          | <i>Discharge To:</i>                | <i>O&amp;M Responsibilities</i>   | <i>Attachment</i> |
|--|---|-------------------------------------|---|-------------------|
|  |   |                                     |   |                   |
| Public Works Yard,<br>1979 Bustard Rd. | Runoff from Yard  | Towamencin Creek                    | Vehicle<br>Maintenance,<br>Material Storage                                 | 1                 |
| Streets                                | inlets, storm sewers,<br>swales                           | Skippack Creek,<br>Towamencin Creek | Inlet Cleaning,<br>Maintenance of<br>Storm Sewers and<br>Swales             | 2                 |
| Township Owned<br>Properties           | inlets, storm sewers,<br>swales, stormwater<br>facilities | Skippack Creek,<br>Towamencin Creek | Inlet Cleaning,<br>Maintenance of<br>Stormwater<br>Management<br>Facilities | 3                 |

## MCM #6: GOOD HOUSEKEEPING FOR MUNICIPAL OPERATIONS

### BMP #2: O&M Actions

Contact: Dave Hillmantel, Public Works Director

Attachment #1: Public Works Yard, 1979 Bustard Road

| <i>Responsibility</i>  | <i>When and How Often?</i> | <i>Actions</i>  | <i>Additional Considerations</i> |
|------------------------|----------------------------|---|----------------------------------|
| Maintenance Operations | Daily                      | <ul style="list-style-type: none"><li>• Perform maintenance of equipment and vehicles in building</li><li>• Eliminate leaks in vehicles and equipment. Use drip pans as needed</li><li>• Minimize use of solvents. Non-hazardous cleaners and solvents will be used whenever possible.</li><li>• Follow spill prevention and control measures and maintain a supply of materials for the cleanup of spills</li><li>• Recycle used oil</li><li>• Maintain appropriate signage</li><li>• Keep area clean</li><li>• Indoor floor drains will not be connected to the storm sewer</li></ul> |                                  |
| Vehicle Washing        | As needed                  | <ul style="list-style-type: none"><li>• Utilize commercial car wash whenever possible</li><li>• If washed on-site, perform washing in building or on grass or permeable surface. No wash water shall enter the storm sewer or stream</li><li>• Use phosphate-free biodegradable detergents when possible</li></ul>  |                                  |
| Road Salt Maintenance  | Daily, when in use         | <ul style="list-style-type: none"><li>• Keep rain off of stored road salt</li><li>• Calibrate spreaders</li><li>• Haul and stock salt during dry weather</li><li>• Sweep up spills around salt/loading area</li></ul>   |                                  |
| Fuel                   | Daily                      | <ul style="list-style-type: none"><li>• All fueling operations will be monitored to prevent or react to spills</li><li>• All spills to be cleaned up immediately.</li><li>• Topping off of vehicle fuel tanks is discouraged</li><li>• Above ground storage tanks are maintained within a suitable secondary containment area.</li><li>• Appropriate clean up materials such as oil dry or absorbent pads will be maintained at the fueling area and will be used to prevent spillage from entering the storm sewer.</li></ul>  |                                  |

## MCM #6: GOOD HOUSEKEEPING FOR MUNICIPAL OPERATIONS

### BMP #2: O&M Actions

Attachment #2: Streets, 57.73 miles

| <i>Responsibility</i> | <i>When and How Often?</i> | <i>Actions</i>  | <i>Additional Considerations</i>                 |
|-----------------------|----------------------------|---|--|
|                       |                            |   |  |
| Inlets                | Annually                   | Inspect and clean inlets in Township roads  | Check inlets after heavy rain as needed          |
| Swales                | Annually                   | Inspect for erosion and stabilize as needed                                       | Check inlets after heavy rain as needed          |
| Storm Sewers          | Annually and As Needed     | Verify storm sewers are functioning and clean or repair as needed                 |  |
| Street Sweeping       | Annually and As Needed     | Sweep township owned streets to collect and properly dispose of collected debris. |  |
| Snow Removal/Deicing  | As needed                  | Salting and plowing the roads, as needed, during and after a snow or ice event    | Minimize the amount of salt used on the roadways |
| Street Paving/Repair  | As needed                  | Milling, patching, paving or repairs of Township Roads is conducted as needed     |  |



## MCM #6: GOOD HOUSEKEEPING FOR MUNICIPAL OPERATIONS

### BMP #2: O&M Actions

#### Attachment #3: Township Owned Property

| <i>Responsibility</i>                 | <i>When and How Often?</i> | <i>Actions</i>  | <i>Additional Considerations</i>   |
|---------------------------------------|----------------------------|---|--|
|                                       |                            |   |  |
| Parks                                 | Seasonally                 | <ul style="list-style-type: none"><li>• Maintain lawn areas</li><li>• Verify all areas are stabilized to prevent erosion</li><li>• Maintain parking areas and clean inlets, storm sewers or swales associated with parking lots</li></ul>   | See list of park attached.   |
| Open Space                            | Annually                   | <ul style="list-style-type: none"><li>• Inspect swales and vegetated areas for eroded areas and stabilize as needed</li><li>• Inspect streambank for eroded areas</li></ul>   | Some open spaces areas are along the stream corridor of Towamencin Creek |
| Township Pool                         | Seasonally                 | <ul style="list-style-type: none"><li>• Maintain lawn areas</li><li>• Verify all areas are stabilized to prevent erosion</li><li>• Maintain parking areas and clean inlets, storm sewers or swales associated with parking lots</li><li>• Maintain permeable pavement, vacuum as needed</li></ul> |  |
| Stormwater Basins and/or Rain Gardens | Annually and As Needed     | <ul style="list-style-type: none"><li>• Maintain appropriate vegetation</li><li>• Address any eroded areas</li><li>• Verify that basin or rain garden is functioning properly</li></ul>   | Check stormwater management facilities after heavy rain as needed        |
| Township Office,<br>1090 Troxel Road  | Seasonally                 | <ul style="list-style-type: none"><li>• Maintain lawn areas</li><li>• Verify all areas are stabilized to prevent erosion</li><li>• Maintain parking areas and clean inlets, storm sewers or swales associated with parking lots</li></ul>   |  |

## MCM #6: GOOD HOUSEKEEPING FOR MUNICIPAL OPERATIONS

### BMP #2: O&M Actions

#### Attachment #3: Township Owned Property

#### Township-Owned Stormwater Basins or Rain Gardens:

| <i>Type of Stormwater Management Facility</i> | <i>Location</i>   | <i>O&amp;M Needs</i>  |
|---|---|---|
| Wet Pond                                      | Township Building, 1090 Troxel Road, Lansdale, PA 19446 | <ul style="list-style-type: none"><li>• Inspect outlet structure, outfall pipe, incoming storm sewers and repair as needed</li><li>• Inspect after major storm events</li></ul> |
| Rain Garden                                   | Fischer's Park  | <ul style="list-style-type: none"><li>• Inspect vegetation</li><li>• Inspect and maintain outlet structure</li><li>• Inspect after major storm events</li></ul>                 |
| Detention Basins                              | Grist Mill Park   | <ul style="list-style-type: none"><li>• Inspect outlet structure, outfall pipe, incoming storm sewers and repair as needed</li><li>• Inspect after major storm events</li></ul> |

## MCM #6: GOOD HOUSEKEEPING FOR MUNICIPAL OPERATIONS

### BMP #2: O&M Actions

#### Attachment #3: Township Owned Property

##### Township Parks:

| <i><b>Name of Park</b></i> | <i><b>Location</b></i>                    | <i><b>Facilities</b></i>  | <i><b>Watershed</b></i>                  |
|----------------------------|---|---|--|
| Bustard Park               | 1979 Bustard Rd Harleysville, PA 19438    | 2 softball fields, 3 soccer fields and 10 junior league baseball fields   | Towamencin Creek Watershed               |
| Butch Clemens Park         | 130 Forty Foot Rd, Lansdale, PA           | Baseball Field  | Skippack Creek Watershed                 |
| Drinnon Park               | 670 Drinnon Way, Lansdale, PA 19446       | Neighborhood playground   | Towamencin Creek Watershed               |
| Firehouse Park             | 1601 Bustard Road, Harleysville, PA 19438 | Park with walking trails  | Towamencin Creek Watershed               |
| Fischer's Park             | 2225 Bustard Rd Lansdale, PA 19446        | 77-acre park with 2 playgrounds, amphitheater, nature trails, pavilion, baseball field and multi-use open areas | Towamencin Creek Watershed               |
| Green Lane Park            | 2201 Kriebel Rd Lansdale PA 19446         | Park with 2 baseball fields   | Towamencin Creek Watershed               |
| Grist Mill Park            | 1611 Allentown Rd, Lansdale, PA 19446     | 54 acres of area around the Grist Mill Neighborhood and Jacob's Woods with soccer fields and natural areas      | Headwaters of Towamencin Creek Watershed |
| Heebner Way Park           | 1600 Heebner Way, Lansdale, PA 19446      | 2-acre neighborhood park with small ballfield and tennis court  | Towamencin Creek Watershed               |
| Kibler Meadows Park        | 2365 Kerr Rd, Harleysville, PA 19438      | 35 acres of meadow w/ Parking Lot   | Towamencin Creek Watershed               |
| Morgan Way Park            | 1610 Morgan Way, Lansdale, PA 19446       | 2-acre playground with swings and slide   | Towamencin Creek Watershed               |
| Valley View Way Park       | 2005 Valley View Way, Lansdale, PA 19446  | 4-acre facility with two new play surfaces and family seating area  | Towamencin Creek Watershed               |

**Appendix O:**  
**Public Works Stormwater Maintenance**  
**Reports**

# Storm Water Repairs

## July 2024

7/10/2024 Replace a C-Top on Spring Meadow



# Storm Water Repairs

## September 2024

9/9/2024 and 9/10/2024 Install a new storm pipe from inlet to inlet on Lisa then install two new c tops.

9/11/2024 Install a new drainage pipe at the Police station for the gutters.

9/16/2024 Replace a storm pipe and headwall on Old Morris Rd near Bustard Rd.

9/16/2024 Fix a storm pipe that came apart on Kreibel Rd near the turnpike bridge.

9/19/2024 Replace a second pipe going into the same area on Bustard Rd.

9/24/2024 Replace a c-top on Old Morris Rd.

# Storm Water Repairs

## February 2025

Clean out Rittenhouse Rd pipe crossing

# Storm Water Repairs

## April 2025

4/1/2025 Replace c-tops on Staley, Old Morris and Bishopwood Blvd East.

4/2/2025 Replace a c-top on Bustard and Kreibel Rd.

4/8/2025 and 4/9/2025 Replace a storm pipe on Kreible Rd that runs back through a property to the back corner.

4/21/2025 Street Sweepers came in to clean the debris on the streets.

4/21/2025 and 4/22/2025 Replace c-tops on Old Morris Rd and clean out 200 lbs of Debris.

4/23/2025 Replace a c-top and rebuild the inlet on the corner of Old Morris and Old Forty Foot Rd.

4/25/2025 Replace a c-top on Tomlinson and Gehman

# Storm Water Repairs

## May 2025

5/16/2025 We had two inches of rain come down in a short period of time. When the water went down, we cleaned out ends of pipes and opened clogged inlets.

5/19/2025 Concrete an inlet at Rittenhouse and Candlewood that caused a sinkhole along the curb.

5/19/2025 Clean up all the trails in the parks for the rest of the week.

Put four-inch stone around inlets from sink holes behind Central from the storms.

# Storm Water Repairs

## June 2025

Install a new c-top at the corner of Gehman and Detwiller and clean out 400 lbs of debris.

Install 3 c-tops on Jacks Circle

Install c-tops at Pheasant Hill Way

Flush out the storm pipe at the Corner of Candlewood and Rittenhouse roads.

Clean out the end of the pipe on Old Morris Rd.

Clean out inlets on Pheasant Hill, Rittenhouse Rd and Gehman Rd removing 1750 lbs of debris.

Install six c-tops on Misty Meadow.

Install two inlets and c-tops on Heebner.

Replace a c-top on Heebner



# **Appendix P:**

# **Training Program**

## Training Program Towamencin Township

| <b>Persons to receive Training for MS4 Topics</b> | <b>Type of Training</b>  | <b>MS4 Topics for Training</b>  |
|---|--|---|
| Township Supervisors                              | Provide information at Public Meetings. Attend workshops or seminars, as needed.   | All MS4 Requirements and Regulations.   |
| Volunteer Township Committee Members              | Provide information at Public Meetings. Encourage Participation in Township events such as Towamencin Community Day and the Annual Stream Clean-Up where training or educational information is available. | All MS4 Requirements and Regulations especially Public Education, Public Participation and Post-Construction Stormwater Management Requirements.  |
| Township Zoning Office and L&I Staff/Consultants  | Provide information on Stormwater Management Requirements. Attend workshops or seminars, as appropriate.   | All MS4 Requirements and Regulations especially Public Education, Public Participation, Illicit Discharge Detection and Elimination and Post-Construction Stormwater Management Requirements. |
| Public Works Employees                            | Provide information on O&M procedures and good housekeeping procedures. Attend workshops or seminars, as appropriate.  | All MS4 Requirements and Regulations especially Pollution Prevention/Good Housekeeping for Municipal Operations and Post Construction Stormwater Management.                                  |
| Township Engineers                                | Attend or participate in webinars, seminars, PADEP workshops, etc. to remain current on MS4 requirements and regulations and to provide guidance to the municipality.                                      | All MS4 Requirements and Regulations.   |
| Township Police                                   | Provide information on the required response for any reported illicit discharges or other stormwater related issues.   | All MS4 Requirements and Regulations especially Illicit Discharge Detection and Elimination.  |