



October 21, 2022

Russell Cornette
Town of Summerville
200 S Main Street
Summerville, SC 29483

RE: North Maple Street, Dorchester County
NPDES Coverage Number: SCR10ZBMY

Dear Russell Cornette:

The Department of Health and Environmental Control (Department or DHEC) has received approval of and the Notice of Intent for the above-referenced project from **Town of Summerville**. Based on your submission of this documentation and in accordance with the NPDES General Permit for Stormwater Discharges from Construction Activities SCR100000 (CGP), this project has been granted coverage under the CGP on **October 21, 2022**. This project's general permit coverage number is **SCR10ZBMY**. The total disturbed area for this site is **17.4 acres**.

See attached DHEC Office of Ocean and Coastal Resource Management (DHEC-OCRM) certification dated August 30, 2022 for additional conditions related to the Coastal Zone Consistency determination.

An as-built survey(s), signed and sealed by a S.C. Licensed Land Surveyor or Professional Engineer, should be submitted to **Town of Summerville** for all detention structure(s) on this site. The survey(s) should show grades, contours, and depths for all structure(s) and should include the elevations and dimensions of all outlet structures, including but not limited to pipes, orifices, risers, weirs, and emergency spillways. A statement signed by the project's S.C. Registered Engineer indicating that the structure(s) was installed and is operating as shown on approved plans and in approved calculations is required. If the elevations or dimensions of the structures listed above do not match those used in the approved plans, provide a certification statement signed by the project's S.C. Registered Engineer indicating that the structure, as built, will function as shown in approved calculations. A new analysis of the structure (routing) may be necessary.

The CGP can be downloaded at the following website: <http://www.scdhec.gov/Environment/docs/CGP-permit.pdf> or you may request a copy from us via email (stormwatercgp@dhec.sc.gov). You are responsible for ensuring your contractor(s) complies with the approved SWPPP and the minimum requirements of the CGP. Also, you are responsible for overall compliance with the Storm Water Management and Sediment Reduction Act of 1991 (1991 Act), SC Pollution Control Act, and the Federal Clean Water Act (CWA). Failure to comply with the approved SWPPP or applicable statutes and regulations may result in enforcement actions.

You must notify the local DHEC EA office prior to starting any land-disturbing activity. The address and telephone number are as follows:

Lowcountry EA Charleston
1362 McMillan Avenue, Suite 300
Charleston, SC 29405
843-953-0150

Inspections of this site must be performed by qualified personnel as described in Section 4.2.E of the CGP.

You should be aware that this approval is only applicable for the Stormwater Pollution Prevention Plan (SWPPP) that was submitted for this project. Any additional construction or land disturbing activity beyond the scope of the approved plans is not authorized. Any future work for this project not shown on the stamped, approved plans will require that you submit another site plan for review and approval. All major modifications require review and approval by **Town of Summerville**; the Department must be notified in writing by **Town of Summerville** of the approval of major modifications if the disturbed area changes. Minor modifications to the approved SWPPP may be made by the SWPPP preparer and do not require review and approval by the Department; these changes should be signed and dated by the SWPPP preparer. If you have a question about whether a modification is major or minor, contact the Coastal Stormwater Permitting Section at (843) 953-0200.

A copy of the stamped, approved SWPPP (including a copy the CGP, contractor certifications, inspection records, rainfall data, etc), NOI, and CGP coverage letter from DHEC must be retained and available at the construction site (or accessible within 30 minutes during normal business hours) from the date of commencement of construction activities to the date of final stabilization. If an on-site location is unavailable to store the SWPPP when no personnel are present, notice of the plan's location must be posted near the main entrance at the construction site.

All contractors who will conduct land-disturbing activities at the site must complete a Contractor Certification Form. You are also responsible for listing all contractors in the SWPPP and for holding a pre-construction conference with each contractor before they can conduct land-disturbing activity at the site.

The Department may conduct periodic inspections of your site. Any violations found during these inspections may result in enforcement action.

This NPDES coverage should be terminated by the permittee when one of the conditions listed in Section 5.1 of the CGP has been met. You must submit a Notice of Termination (NOT) to cancel your NPDES coverage under the CGP. Please see section 5.1 of the CGP for additional information required to be submitted with the NOT.

You are responsible for obtaining any other federal, state, or local permit that may be required for this project. In particular, any permits through the U.S. Army Corps of Engineers for the placement of fill material in Waters of the United States. Please note we have not sent a copy of this letter to any county or city building official. You must send a copy of this letter to these agencies, if necessary.

If material excavated during construction activities leaves the site, a mine operating permit may be needed. You are responsible for contacting the Mining and Reclamation Section to determine if a mining permit is required for the site. The Mining and Reclamation Section can be reached at (803)898-1362 or via e-mail at AskMines@dhec.sc.gov.

Please see the enclosed "Notice of Appeal Procedure" document for information about the procedures for appealing this NPDES coverage.

If you have any questions or cannot access the referenced websites, please call me at 843-953-1594.

Sincerely,

Mallory Ware
Coastal Stormwater Permitting Section

EC: Lowcountry EA Charleston
Shanna Niswonger, Michael Baker International
Bonnie Miley, Town of Summerville



NOTICE OF INTENT (NOI)
For Coverage(s) of Primary Permittees
Under South Carolina NPDES General Permit
For Stormwater Discharges From Construction Activities SCR100000
(Maintain As Part of On-Site SWPPP)

For Official Use Only

File Number: _____
Permit Number: SCR10
Submittal Package Complete: _____



DAM SAFETY AND STORMWATER PERMITTING
DIVISION
CONSTRUCTION STORMWATER PERMITTING
APPROVED - FOR CONSTRUCTION ONLY

Submission of this Notice of Intent constitutes notice that the Applicant identified in Section II intends to be authorized as a Primary Permittee in the state of South Carolina under NPDES General Permit SCR1000000. Fees required for review and NPDES coverage of each application type are as listed on page 2 of the Instructions.

DHEC Permit # SCR10ZBMY
Date Issued 10/21/2022
Reviewer _____

Date: 09/24/2021
Project/Site Name: North Maple Street County: Dorchester
(Modification or Change of Information Only) Prior Approved NPDES Permit or File Number: _____

Do you want this project to be considered for the Expedited Review Program (ERP)? Yes or No (See Instructions)

I. Notice of Intent (NOI) Application Type(s)

- A. **Project (Application/Review) Type(s)** (Select **ALL** that apply):
 New Project (Initial Notification) Ongoing Project: Permitted or Un-Permitted
 Late Notification Low Impact Development (LID) or Project Design Above Regulatory Requirements
 New Owner/Operator or Company Name Change (see instructions, attach Form A (Transfer of Ownership))
 Major Modification: (see instructions, attach Form B (Major Modifications))
 MS4 Project Review
 Ocean and Coastal Resource Management (OCRM) Review
 Change of Information/Other (Specify): _____

- B. If Applicable, identify the entity designated as **MS4 Reviewer** and **MS4 Operator** (i.e., Lexington County, City of Greer, etc.): **MS4 Reviewer** Town of Summerville **MS4 Operator** Dorchester Cnty, Town of Summerville

II. Primary Permittee Information

Change of Information

Person or Company If a Company, are you a Lending Institution or Government Entity?
Company EIN (if applicable): EIN: _____

- A. **Primary Permittee Name:** Town of Summerville
Mailing Address: 200 S. Main Street City: Summerville State: SC Zip: 29483
Phone: 843-851-4226 Fax: _____ Email Address: _____
- B. **Contact /ODSA Name** (If different from above OR if owner is a company): Russell Cornette, PE
Mailing Address: 200 S. Main Street City: Summerville State: SC Zip: 29483
Phone: 843-851-4226 Fax: _____ Email Address: RCornette@summervillesc.gov
- C. **Property Owner Name** (If different from above): _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Email Address: _____

III. Comprehensive Stormwater Pollution Prevention Plan (C-SWPPP) Preparer Information Change of Information

- A. **C-SWPPP Preparer Name:** Shanna Niswonger, PE
- B. **Registered Professional** Engineer Landscape Architect Tier B Land Surveyor **S. C. Registration #:** 28678
- C. **Company/Firm Name:** Michael Baker International **S. C. COA #:** 673
Mailing Address: 700 Huger Street City: Columbia State: SC Zip: 29201
Phone: (803) 231-3996 Fax: _____ Email Address: sniswonger@mbakerintl.com

IV. Project/Site Information

Change of Information

- A. **Type of Construction Activity(ies)** (Select **ALL** that apply):
 Commercial Industrial Institutional Mass Grading Linear Utility/Infrastructure
 Residential: Single-family Residential: Multi-family Multi-use (Commercial & Residential)
 Site Preparation (No New Impervious Area) Other (Specify) _____
- B. **Site Address/Location** (street address, nearest intersection, etc.) North Maple from Parsons Rd to approx 760' S of Old Dairy
City/Town (If in limits): _____ Zip Code: _____
Latitude: 33 ° 02 ' 03 " N Longitude: - 80 ° 11 ' 19 " W (Source): GPS Web Site: Google Earth
Tax Map Number (s) (List all): _____

- C. Is this site located on Indian Land? Yes No
- D. Proposed Start Date: 11/01/2021 Proposed Completion Date: 11/01/2026
- E. Disturbed Area (nearest tenth of an acre): 17.4 Total Area (acres): 19.4
- F. Modification Only: (nearest tenth of an acre): Disturbed Area: Current (Approved) Area: _____
Disturbed Area Change (Increase Only): _____ Total Disturbed Area (After Change): _____
- G. Is this project part of a Larger Common Plan for Development or Sale (LCP)? Yes No
LCP/ Overall Development Name: _____ Check here if this is the First Phase.
Previous State Permit/File Number: _____ Previous NPDES Coverage Number: SCR10 _____
- H. Any Flooding Problems exist downstream of or adjacent to this site? Yes No (If yes, provide detailed description of flooding problems and applicable floodway/flood zone information in the C-SWPPP).
- I. Active S.C. DHEC Warning Notice, Notice to Comply or Notice of Violation for this site or LCP? Yes No
- J. List Relevant State and Federal Environmental Permits or Approvals applied for or obtained for this site (e.g., RCRA, USACOE, Nationwide, etc.). If None, list None.
USACOE Nationwide Permit / Section 401 Water Quality Certification
- K. Any Waiver(s)/Variances/Exceptions Requested for this Project? (If yes, identify below and include Waiver Request and Justifications in the C-SWPPP for each proposed request).
- | | |
|--|---------------------------|
| 1. Small Construction Activity Waiver(s) From NPDES permitting (Section 1.4 & Appendix B)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, identify requested waiver: <input type="checkbox"/> Rainfall Erosivity Waiver <input type="checkbox"/> TMDL Waiver <input type="checkbox"/> Equivalent Analysis Waiver | |
| 2. Detention Waiver (72-302(B))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 3. Other (Specify): _____ |

V. Waterbody Information (Attach additional sheet(s) as needed) Change of Information

A. Receiving Waterbody(s) (RWB) Information (List the nearest and next nearest receiving waterbodies to which the sites stormwater discharges will drain. If stormwater discharges drain to multiple waterbodies, list all such waterbodies).

1. Name of Receiving Waterbodies (RWB)	2. Distance to RWB (feet)	3. Classification of RWB
a. Nearest: <u>UNNAMED TRIBUTARY (north)</u>	<u>2500</u>	<u>FW</u>
b. Next Nearest: <u>RUMPHS HILL CREEK (north)</u>	<u>3800</u>	<u>FW</u>
c. Coastal Zone ONLY: Coastal Receiving Water (CRW): <u>ASHLEY RIVER</u>	<u>43000</u>	<u>Not Applicable</u>
d. Other Waterbodies: _____		<u>FW</u>

B. Waters of the U.S. / State Information (Attach additional sheet(s) as needed)

Waters of the U.S./ State	1. On the site?	2. Delineated/ Identified?	3. Impacts?	4. Amount of impacts
a. Jurisdictional wetlands	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>0.30</u> Ac
b. Non-jurisdictional wetlands	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac
c. Other Water(s): <u>jurisdictional stream</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>0.01</u> Ac <u>134</u> Feet
d. Coastal Zone ONLY: Direct Critical Area	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac _____ Feet

5. If yes for Impacts in B.3, describe each impact and activity, and list all permits (e.g., USACOE Nationwide Permit, DHEC General Permit) and certifications that have been applied for or obtained for each impact:
Roadway fill, USACOE Nationwide Permit / Section 401 Water Quality Certification

C. S.C. Navigable Waters (SCNW) Information (Section 2.6.5) The Department will address any issues related to State Navigable Waters' Program under SC Regulation 19-450 during the review of the C-SWPPP for activities that will **NOT** require a 404 permit or a 401 certification. (Attach additional sheet(s) as needed).

1. Are S. C. Navigable Waters (SCNW) on the site: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
a. If no, do not complete this question. Proceed to Section D (Impaired Waterbodies).		
b. If yes, provide the name of S.C. Navigable Waters (SCNW) on the site: _____		
2. If yes for C.1, will construction activities cross over or occur in, under, or thru the SCNW? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe SCNW activities (e.g., road crossing, sub-aqueous utility line, temporary or permanent structures, etc.) and proceed to Section C.3: _____		
3. Identify permits providing coverage of SCNW activities proposed for your site. If NONE, list none.		
Permits/Certifications	Permit or Certification No.	Corresponding Covered SCNW Activity(ies)
a. DHEC General/ Other DHEC Permit		
b. USACOE 404 Permit or 401 Certification		
c. SCNW Permit If applied for or issued, identify Date applied for or issued: _____		<input type="checkbox"/> All Activities or <input type="checkbox"/> Some Activities (Describe): _____
d. If a SCNW Permit has NOT been applied for provide an additional plan sheet that shows plan and profile views (drawn to scale) of the SCNW and associated activities. Include a description of all proposed activities on this plan.		

D. Impaired Waterbodies Information (Attach additional sheet(s) as needed)

1. 303(d) Listed Impaired Waterbodies				
a. Name of Nearest DHEC Water Quality Monitoring Stations (WQMS)(s) that receives stormwater from your construction site and/or thru an MS4 and the Name of the Corresponding Waterbody?	b. Is this WQMS(s) listed on the most current 303(d) List? If No, proceed to Section 2 of this table. If Yes, complete items c thru f.	c. List the pollutant(s) identified as "CAUSES" of the impairment	d. Will any pollutants causing the impairment be present in your site's construction stormwater discharges?	e. If yes for d, list the "USE SUPPORT" impairment(s) affected by the pollutant(s) identified in c.
SEE ATTACHED	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
f. If yes for d above, will use of the BMPs proposed for your project ensure the site's discharges will NOT contribute to or cause further WQS violations for the impairment(s) listed in c? <input type="checkbox"/> Yes <input type="checkbox"/> No (NOTE: If no for f, this site is NOT eligible for coverage under the CGP). See Instructions.				
2. TMDL Impaired Waterbodies				
a. Name of Nearest DHEC Water Quality Monitoring Stations (WQMS)(s) that receives stormwater from your construction site and/or thru an MS4?	b. Has a TMDL(s) been developed for this WQMS(s)? If No, identify as such below and proceed to Section VI. If Yes, complete items c thru f of this table.	c. If yes for b, what pollutants are listed as "CAUSES" or causing the impairment?	d. If yes for b, has the standard been "ATTAINED" or "Fully Supported" for the impairment(s)?	e. If no for d (Not Attained), will any pollutants causing the impairment be present in your site's construction stormwater discharges?
SEE ATTACHED	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. If yes for e above, are your discharges consistent with the assumptions and requirements of the TMDL(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No (NOTE: If no for f, this site is NOT eligible for coverage under the CGP). See Instructions.				

VI. Signatures and Certifications DO NOT SIGN IN BLACK INK! Read the Certifications below (In entirety). Provide date, printed name, and signatures below. If you are a New Owner/Operator, as Primary Permittee you must also sign and date the applicable Comprehensive SWPPP Acceptance & Compliance Agreement below.

C-SWPPP PREPARER: "One copy of the C-SWPPP, all specifications and supporting calculations, forms, and reports are herewith submitted and made a part of this application. I have placed my signature and seal on the design documents submitted signifying that I accept responsibility for the design of the system. Further, I certify to the best of my knowledge and belief that the design is consistent with the requirements of Title 48, Chapter 14 of the Code of Laws of SC, 1976 as amended, pursuant to Regulation 72-300 et seq. (if applicable), and in accordance with the terms and conditions of SCR100000." (This should be the person identified in Section III).

Shanna D. Niswonger, PE _____ Shanna D. Niswonger _____ 28678 _____
 Printed Name of C-SWPPP Preparer Signature of C-SWPPP Preparer S. C. Registration #

PRIMARY PERMITTEE: "I or I (on behalf of my company and its contractors and agents), as the case may be, 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 gather and evaluate 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 understand that DHEC enforcement actions may be taken if the terms and conditions of the C-SWPPP are not met and I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

"I or I (on behalf of my company and its contractors and agents), as the case may be, also hereby certify that all land-disturbing construction and associated activity pertaining to this site shall be accomplished pursuant to and in keeping with the terms and conditions of the approved plans and SCR100000. I also certify that a responsible person will be assigned to the project for day-to-day control. I hereby grant authorization to the to S. C. Department of Health and Environmental Control (DHEC) and/or the local implementing agency the right of access to the site at all times for the purpose of on site inspections during the course of construction and to perform maintenance inspections following the completion of the land-disturbing activity." (See Section 122.22 of S.C. Reg. 61-9 for signatory authority information.) Having understood the above information, I am signing this certification as Primary Permittee to the aforementioned NPDES general permit."

Russell Cornette, PE _____ Director of Public Works & Town Engineer _____
 Printed Name of Primary Permittee Title/Position
 Signature of Primary Permittee _____ 6/6/2022 _____
 Date Signed

V. Waterbody Information		
1. Name of Receiving Waterbodies (RWB)	2. Distance to RWB (feet)	3. Classification of RWB
a. Nearest: Unnamed Tributary	2400	FW
b. Next Nearest: Sawmill Branch	9100	FW
c. Coastal Receiving Water: Sawmill Branch	9100	Not Applicable
d. Next Nearest: Ashley River	48000	FW

D. Impaired Waterbodies Information

1. 303(d) Listed Impaired Waterbodies					
a. Name of Nearest DHEC Water Quality Monitoring Stations (WQMS)(s) that receives stormwater from your construction site and/or thru an MS4 and the Name of the Corresponding Waterbody?		b. Is this WQMS(s) listed on the most current 303(d) list? If No, proceed to Section 2 of this table. If Yes, complete items C through f.	c. List the pollutant(s) identified as "CAUSES" of the impairment	d. Will any pollutants causing the impairment be present in your site's construction stormwater discharges?	e. If yes for d, list the "USE SUPPORT" impairment(s) affected by the pollutant(s) identified in c.
Nearest DHEC WQMS(s)	Corresponding Waterbody				
CSTL-102	ASHLEY RIVER	YES	ENTERO, ECOLI	NO	
CSTL-043	SAWMILL BRANCH	YES	DO	NO	
CSTL-013	SAWMILL BRANCH	YES	DO <i>SDN</i>	NO	
CSTL-560	ASHLEY RIVER	YES	HG	NO	
RT-032046	ASHLEY RIVER	YES	ENTERO	NO	
MD-049	ASHLEY RIVER	YES	TURBIDITY	YES	AL <i>SDN</i>
MD-049	ASHLEY RIVER	YES	ENTERO, pH	NO	

f. If yes for d above, will use of the BMPs proposed for your project ensure the site's discharges will NOT contribute to or cause further WQS violations for the impairment(s) listed in c? Yes No *SDN*
 (NOTE: If no for f, this site is NOT eligible for coverage under the CGP). See Instructions.

2. TMDL Impaired Waterbodies				
a. Name of Nearest DHEC Water Quality Monitoring Station (WQMS)(s) that receives stormwater from your construction site and/or thru an MS4 and the Name of the Corresponding Waterbody?	b. Has a TMDL(s) been developed for this WQMS(s)? If No, identify as such below and proceed to Section VI. If Yes, complete items c thru f on this table.	c. If yes for b, what pollutants are listed as "CAUSES" or causing the impairment?	d. If yes for b, has the standard been "ATTAINED" or "Fully Supported" for the impairment(s)?	e. If no for d (Not Attained), will any pollutants causing the impairment be present in your site's construction stormwater discharges?
CSTL-102	YES	DO	YES	
CSTL-043	YES	FC	NO	NO
CSTL-013	YES	FC	NO	NO
CSTL-560	NO			
RT-032046	YES	DO	YES	
MD-049	YES	DO	YES	

f. If yes for e above, are your discharges consistent with the assumptions and requirements of the TMDL(s)? Yes No
 (NOTE: If no for f, this site is NOT eligible for coverage under the CGP). See Instructions

Mayor
Ricky Waring

Councilmembers:
Bill McIntosh, Mayor Pro Tem
Russ Touchberry
Aaron Brown
Kima Garten-Schmidt
Bob Jackson
Terry Jenkins



Town Administrator
Lisa Wallace

Town Clerk
Beth Messervy

Town Attorney
G.W. Parker

TOWN of SUMMERVILLE

September 23, 2022

C-SWPPP PREPARER:
Shanna Niswonger, PE
Michael Baker International, Inc.
700 Huger Street
Columbia, South Carolina 29201
sniswonger@mbakerintl.com

PERMITTEE:
Town of Summerville
Attn: Russ Cornette, PE
200 South Main Street
Summerville, South Carolina 29483
rcornette@summervillesc.gov

**RE: MS4 Project Approval
North Maple Street
Disturbed Area: 17.4 Acres
Stormwater Construction Approval #: SCA22-000001**

Dear Ms. Niswonger and Mr. Cornette:

This letter is for the purpose of approving the project listed above consisting of construction drawings and the Stormwater Management Design Study, both signed and dated through January 4, 2022. The drainage improvements and erosion and sediment control features are consistent with the Town of Summerville's ordinance and comply with the SC Department of Transportation's Requirements for Hydraulic Design Studies. Land disturbing activities may not commence until all applicable state and federal approvals are obtained, including SCDHEC issuing coverage under the NPDES Construction General Permit (CGP). A copy of the approved set of plans shall be maintained on site while construction is underway. Should you have any questions, please contact me at (843) 851-4235.

Sincerely,

A handwritten signature in blue ink that reads "Bonnie Miley".

Bonnie C. Miley, PE
Assistant Town Engineer


Enclosure: Approved MS4 Application

CC: Mallory Ware—SCDHEC Coastal Stormwater Permitting
Amanda Y. Deaton, PE—Michael Baker International, Inc.



Coastal Zone Consistency Determination

To: Mallory Ware, BOW Coastal Stormwater Permitting Section

From: Christopher M Stout, OCRM Coastal Zone Consistency Section 

Applicant: Russell Cornette, Town of Summerville

Project Name: North Maple Street

Finding: Conditionally Consistent with the SC Coastal Zone Management Program

Site Location: North Maple from Parsons Rd to approx 760' of Old Dairy, na, Dorchester County, South Carolina (TMS#: N/A)

Reference #: HPF-B8EX-08KSY

Date: August 30, 2022

The staff of the Office of Ocean and Coastal Resource Management (OCRM) reviewed the above referenced Coastal Zone Consistency project request for land disturbance associated with widening the existing roadway from two to four travel lanes from the Nexton Parkway to U.S. Route 78 and widening from two to three lanes (two travel lanes with a center turn lane) from U.S. Route 78 to the tie in with Parsons Road and adding improvements (turn lanes) to its intersections with US 78 (5th North Street), S-65 (West Richardson Avenue), and S-59 (Parson Road). The project would also include improving pedestrian safety by adding sidewalks and proper curb ramps. The proposed project will result in the placement of fill material in 0.19-acre, land clearing of 0.05-acre, and 0.06-acre of excavation in jurisdictional wetlands and 134 linear feet of fill in jurisdictional channels. These impacts were reviewed and certified under SAC-2018-01003. The total area of disturbance will be 17.4 acres of a 19.4 acre project site.

We hereby certify that the above referenced project is **Conditionally Consistent** with the **Guidelines for Evaluation of All Projects** as well as the Transportation Facilities (*Roads and Highways*), Wildlife and Fisheries Management, Activities in Areas of Special Resource Significance (*Wetlands*), and Stormwater Management (*Runoff*) policies contained in the S.C. Coastal Zone Management Program provided the following conditions are included in the permits and adhered to by the applicant.

1. In the event that any historic or cultural resources and/or archaeological materials are found during the course of work, the applicant must notify the State Historic Preservation Office and the South Carolina Institute of Archaeology and Anthropology. Historic or cultural resources consist of those sites listed in the

National Register of Historic Places and those sites that are eligible for the National Register. Archaeological materials consist of any items, fifty years old or older, which were made or used by man. These items include, but are not limited to, stone projectile points (arrowheads), ceramic sherds, bricks, worked wood, bone and stone, metal and glass objects, and human skeletal materials.

2. Prior to land disturbance and impacts to jurisdictional wetlands of 0.00 acres, applicant must fully comply with all general, special and regional terms and conditions of the US Army Corps of Engineers Permit (SAC-2018-01003) as well as SCDHEC requirements for Water Quality and Coastal Zone Certifications.
3. All construction BMPs must be installed, inspected and maintained to hold sediment onsite and to protect any adjacent or downstream wetlands and waters through the life of the project. Upon completion of construction activities, all disturbed (includes undeveloped) areas, including those impacted for access, must be immediately stabilized.
4. The project must be fully consistent with local zoning and comprehensive plans prior to work being conducted.

This determination shall serve as the SCDHEC OCRM Coastal Zone Consistency Determination for the work described above. However, this determination **does not** serve as a Department permitting decision and **does not** alleviate the applicant's responsibility to obtain any applicable State or Federal permit(s) for the work. Local government authorizations **may also** be required.

South Carolina Board of Health and Environmental Control

Guide to Board Review

Pursuant to S.C. Code Ann. § 44-1-60

The decision of the South Carolina Department of Health and Environmental Control (Department) becomes the final agency decision fifteen (15) calendar days after notice of the decision has been mailed to the applicant, permittee, licensee and affected persons who have requested in writing to be notified, unless a written request for final review accompanied by a filing fee in the amount of \$100 is filed with Department by the applicant, permittee, licensee or affected person.

Applicants, permittees, licensees, and affected parties are encouraged to engage in mediation or settlement discussions during the final review process.

If the Board declines in writing to schedule a final review conference, the Department's decision becomes the final agency decision and an applicant, permittee, licensee, or affected person may request a contested case hearing before the Administrative Law Court within thirty (30) calendar days after notice is mailed that the Board declined to hold a final review conference. In matters pertaining to decisions under the South Carolina Mining Act, appeals should be made to the South Carolina Mining Council.

I. Filing of Request for Final Review

1. A written Request for Final Review (RFR) and the required filing fee of one hundred dollars (\$100) must be received by Clerk of the Board within fifteen (15) calendar days after notice of the staff decision has been mailed to the applicant, permittee, licensee, or affected persons. If the 15th day occurs on a weekend or State holiday, the RFR must be received by the Clerk on the next working day. RFRs will not be accepted after 5:00 p.m.
2. RFRs shall be in writing and should include, at a minimum, the following information:
 - The grounds for amending, modifying, or rescinding the staff decision;
 - a statement of any significant issues or factors the Board should consider in deciding how to handle the matter;
 - the relief requested;
 - a copy of the decision for which review is requested; and
 - mailing address, email address, if applicable, and phone number(s) at which the requestor can be contacted.
3. RFRs should be filed in person or by mail at the following address:
South Carolina Board of Health and Environmental Control
Attention: Clerk of the Board
2600 Bull Street
Columbia, South Carolina 29201
Alternatively, RFR's may be filed with the Clerk by facsimile (803-898-3393) or by electronic mail (boardclerk@dhec.sc.gov).
4. The filing fee may be paid by cash, check or credit card and must be received by the 15th day.
5. If there is any perceived discrepancy in compliance with this RFR filing procedure, the Clerk should consult with the Chairman or, if the Chairman is unavailable, the Vice-Chairman. The Chairman or the Vice-Chairman will determine whether the RFR is timely and properly filed and direct the Clerk to (1) process the RFR for consideration by the Board or (2) return the RFR and filing fee to the requestor with a cover letter explaining why the RFR was not timely or properly filed. Processing an RFR for consideration by the Board shall not be interpreted as a waiver of any claim or defense by the agency in subsequent proceedings concerning the RFR.
6. If the RFR will be processed for Board consideration, the Clerk will send an Acknowledgement of RFR to the Requestor and the applicant, permittee, or licensee, if other than the Requestor. All personal and financial identifying information will be redacted from the RFR and accompanying documentation before the RFR is released to the Board, Department staff or the public.
7. If an RFR pertains to an emergency order, the Clerk will, upon receipt, immediately provide a copy of the RFR to all Board members. The Chairman, or in his or her absence, the Vice-Chairman shall based on the circumstances, decide whether to refer the RFR to the RFR Committee for expedited review or to decline in writing to schedule a Final Review Conference. If the Chairman or Vice-Chairman determines review by the RFR Committee is appropriate, the Clerk will forward a copy of the RFR to Department staff and Office of General Counsel. A Department response and RFR Committee review will be provided on an expedited schedule defined by the Chairman or Vice-Chairman.
8. The Clerk will email the RFR to staff and Office of General Counsel and request a Department Response within eight (8) working days. Upon receipt of the Department Response, the Clerk will forward the RFR and Department Response to all Board members for review, and all Board members will confirm receipt of the RFR to the Clerk by email. If a Board member does not confirm receipt of the RFR within a twenty-four (24) hour period, the Clerk will contact the Board member and confirm receipt. If a Board member believes the RFR should be considered by the RFR Committee, he or she will respond to the Clerk's email within forty-eight (48) hours and will request further review. If no Board member requests further review of the RFR within the forty-eight (48) hour period, the Clerk will send a letter by certified mail to the Requestor, with copy by

regular mail to the applicant, permittee, or licensee, if not the Requestor, stating the Board will not hold a Final Review Conference. Contested case guidance will be included within the letter.

NOTE: If the time periods described above end on a weekend or State holiday, the time is automatically extended to 5:00 p.m. on the next business day.

9. If the RFR is to be considered by the RFR Committee, the Clerk will notify the Presiding Member of the RFR Committee and the Chairman that further review is requested by the Board. RFR Committee meetings are open to the public and will be public noticed at least 24 hours in advance.
10. Following RFR Committee or Board consideration of the RFR, if it is determined no Conference will be held, the Clerk will send a letter by certified mail to the Requestor, with copy by regular mail to the applicant, permittee, or licensee, if not the Requestor, stating the Board will not hold a Conference. Contested case guidance will be included within the letter.

II. Final Review Conference Scheduling

1. If a Conference will be held, the Clerk will send a letter by certified mail to the Requestor, with copy by regular mail to the applicant, permittee, or licensee, if not the Requestor, informing the Requestor of the determination.
2. The Clerk will request Department staff provide the Administrative Record.
3. The Clerk will send Notice of Final Review Conference to the parties at least ten (10) days before the Conference. The Conference will be publically noticed and should:
 - include the place, date and time of the Conference;
 - state the presentation times allowed in the Conference;
 - state evidence may be presented at the Conference;
 - if the conference will be held by committee, include a copy of the Chairman's order appointing the committee; and
 - inform the Requestor of his or her right to request a transcript of the proceedings of the Conference prepared at Requestor's expense.
4. If a party requests a transcript of the proceedings of the Conference and agrees to pay all related costs in writing, including costs for the transcript, the Clerk will schedule a court reporter for the Conference.

III. Final Review Conference and Decision

1. The order of presentation in the Conference will, subject to the presiding officer's discretion, be as follows:
 - Department staff will provide an overview of the staff decision and the applicable law to include [10 minutes]:
 - Type of decision (permit, enforcement, etc.) and description of the program.
 - Parties
 - Description of facility/site
 - Applicable statutes and regulations
 - Decision and materials relied upon in the administrative record to support the staff decision.
 - Requestor(s) will state the reasons for protesting the staff decision and may provide evidence to support amending, modifying, or rescinding the staff decision. [15 minutes] *NOTE: The burden of proof is on the Requestor(s)*
 - Rebuttal by Department staff [15 minutes]
 - Rebuttal by Requestor(s) [10 minutes]

Note: Times noted in brackets are for information only and are superseded by times stated in the Notice of Final Review Conference or by the presiding officer.
2. Parties may present evidence during the conference; however, the rules of evidence do not apply.
3. At any time during the conference, the officers conducting the Conference may request additional information and may question the Requestor, the staff, and anyone else providing information at the Conference.
4. The presiding officer, in his or her sole discretion, may allow additional time for presentations and may impose time limits on the Conference.
5. All Conferences are open to the public.
6. The officers may deliberate in closed session.
7. The officers may announce the decision at the conclusion of the Conference or it may be reserved for consideration.
8. The Clerk will mail the written final agency decision (FAD) to parties within 30 days after the Conference. The written decision must explain the basis for the decision and inform the parties of their right to request a contested case hearing before the Administrative Law Court or in matters pertaining to decisions under the South Carolina Mining Act, to request a hearing before the South Carolina Mining Council.. The FAD will be sent by certified mail, return receipt requested.
9. Communications may also be sent by electronic mail, in addition to the forms stated herein, when electronic mail addresses are provided to the Clerk.

The above information is provided as a courtesy; parties are responsible for complying with all applicable legal requirements.