



Yerkes Associates, Inc.

Consulting Engineers / Landscape Architects / Surveyors

Mr. Govind Daryani, P.E.
Project Manager - Water Management
Department of Environmental Protection
2 E. Main Street Norristown, Pa. 19401-4915

August 11, 2014

RE: DEP File No. D-15-146
Milltown Dam, East Goshen Township, Chester County
2013 Annual Inspection Report

Dear Mr. Daryani:

As requested in the Department's letter of June 17, 2014, enclosed are two original annual inspection report signed and sealed by a professional engineer. At the time of the original submission the original report was sent to Harrisburg, the copy sent to the regional office.

Thank you for meeting Louis F. Smith, Township Manager, Mark A. Miller, Director of Public Works, and me for our annual inspection of the Milltown Dam and Reservoir. As you may recall this was performed on Wednesday, November 13, 2013.

We walked the entire length of the dam and the face of the downslope embankment. We made a visual examination of the spillway. We also examined the interior of the valve house and witnessed the flow testing of the drain valves which were opened and working during the inspection. It was noted that the shaft on the main release valve was still bent due to a broken bracket halfway down the shaft. This did not affect opening and closing of the secondary valve. The shaft is scheduled to be repaired this coming summer. The new valve house roof installed after our last inspection has an access hatch which will make future repairs to the valves easier.

The specific issues discussed on site are listed below.

- Over growth of weeds on the downslope of the spillway. Mark Miller reported this area is sprayed twice a year with weed killer. He will continue to monitor the area and spray it more often if needed. He noted at our meeting he will schedule the removal of the weeds in the next few weeks.
- A new (concrete) roof for the valve house was replaced earlier this year as planned and noted in last year's report.
- The draw down valve is operated once a month by Mark Miller's employees. This frequency of this practice is more than required by DEP. But once a month will be continued.

Professional services since 1874

1444 Phoenixville Pike, P. O. Box 1568, West Chester, PA 19380-0078 / Tel: 610-644-4254 / Fax: 610-640-0771

- The bent shaft (left side) will be replace/repared during the summer of 2014. This was postponed from last year due to budgetary constraints.
- The wet/spongy area at the toe of the slope that has been monitored over the last several years (see enclosed pictures) was not holding water during our visit. The area was still spongy and will continue to be monitored.

This area was previously reported and addressed as follows: "Mr. Daryani noted that in his past inspections of the dam, he noticed that the soils below the downstream face of the west side of the dam had a higher content of moisture than he was used to seeing, even in the Summer months. The soils in that area below the face of the dam are "Wehadkee Silt Loam" which are deep, poorly drained soils on flood plains maps according to the "Soil Survey of Chester and Delaware Counties." The soils have a naturally high water table and are wet throughout the year, accounting for the dampness that is seen."

- Cracking and spalling on the face of the spillway that has been noted in previous reports was repaired this past summer. The Township went out to bid two times and hired a contractor to apply an epoxy-urethane based coating on the face of the spillway. All areas of loose concrete were removed and disposed of off-site and repaired before the coating was applied.

The latest version of the "Dam Inspection Checklist" follows and photographic exhibits are included at the end of this report to illustrate the present condition of the dam.

Please feel free to call me at 484-318-8888 if you have any questions concerning this summary or if additional information is needed.

Respectfully submitted,

YERKES ASSOCIATES, INC.



Daniel E. Malloy, P.E.
President

cc: Louis F. Smith, Township Manager
Mark A. Miller, Director of Public Works

DAM INSPECTION CHECKLIST
Department of Environmental Protection
Bureau of Waterways Engineering
Division of Dam Safety

NAME OF DAM: MILLTOWN DAM

DEP DAM NO.: 15-146

LOCATION: Municipality: EAST GOSHEN TOWNSHIP

County: CHESTER

DEP CLASSIFICATION DATA: Size: C

Hazard: 1

PHYSICAL DATA:

Type of Dam:
EARTHFILL/CONCRETE
CORE

Height of Dam: 20 FEET

Normal Pool Storage Capacity: 114
ACRE-FEET

ELEVATIONS:

Normal Pool: 345.0

Pool at Inspection: 345.0

Tailwater at Inspection: 329.0+/-

DAM OWNER: EAST GOSHEN TOWNSHIP

OPERATOR: EAST GOSHEN TOWNSHIP

ADDRESS: 1580 PAOLI PIKE

WEST CHESTER, PA

PHONE: 610-692-7171

FAX NO.: 610-692-8950

rsmith@eastgoshen.org

A completed and signed Dam Owners Notice Checklist is to accompany this Inspection Checklist.

PERSONS PRESENT AT INSPECTION:

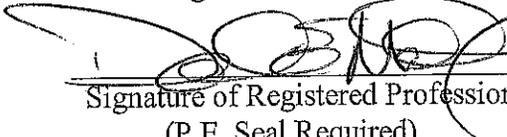
<u>Name</u>	<u>Title/Position</u>	<u>Representing</u>
<u>Govind Duryani, P.E.</u>	<u>Proj. Manager, Water Mgmt.</u>	<u>DEP</u>
<u>Louis F. Smith, Jr.</u>	<u>Township Manager</u>	<u>East Goshen Township</u>
<u>Mark A. Miller</u>	<u>Director of Public Works</u>	<u>East Goshen Township</u>
<u>Daniel E. Malloy, P.E.</u>	<u>Township Engineer</u>	<u>Yerkes Associates, Inc.</u>

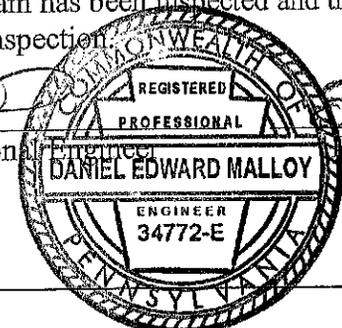
DATE OF INSPECTION: NOVEMBER 13, 2013

WEATHER: Sunny, Dry, Windy

TEMPERATURE: 35° (ESTIMATED)

This is to certify that the above dam has been inspected and the following are the results of this inspection.


Signature of Registered Professional Engineer
(P.E. Seal Required)



Date 11/14

ITEM	CONDITION	COMMENTS	MONITOR	INVESTIGATE	REPAIR
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EMBANKMENT: CREST

1	Surface Cracking	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Sinkhole, Animal Burrow	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Low Area(s)	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Horizontal Alignment	GOOD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Ruts and/or Puddles	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Vegetation Condition	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Warning Signs	1 sign at entrance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable): 7 – Warning sign is damaged and will be replaced.

EMBANKMENT: UPSTREAM FACE

10	Slide, Slough, Scarp	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Slope Protection	GOOD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Sinkhole, Animal Burrow	NONE OBSERVED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Embkmnt.-Abut. Contact	GOOD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Erosion	NONE OBSERVED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Vegetation Condition	NONE EVIDENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

ITEM	CONDITION	COMMENTS	MONITOR	INVESTIGATE	REPAIR
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EMBANKMENT: DOWNSTREAM FACE

18	Wet Area(s) (No Flow)	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	Seepage	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	Slide, Slough, Scarp	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	Embkmt. - Abut. Contact	GOOD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22	Sinkhole, Animal Burrow	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23	Erosion	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24	Unusual Movement	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25	Vegetation Control	FAIR – DEAD WEEDS ON DOWNSTREAM FACE BETWEEN PROTECTIVE RIPRAP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

EMBANKMENT: INSTRUMENTATION

28	Piezometers/Observ. Wells	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29	Staff Gauge and Recorder	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	Weirs	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31	Survey Monuments	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	Drains	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33	Low Flow Release	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34	Frequency of Readings	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35	Location of Records	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

ITEM	CONDITION	COMMENTS	MONITOR	INVESTIGATE	REPAIR
DOWNSTREAM AREA					
38	Abutment Leakage	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39	Foundation Seepage	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40	Slide, Slough, Scarp	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41	Drainage System	GOOD CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42	Boils	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43	Wet Areas	SMALL DEPRESSION 30' BELOW DAM TOE WAS DAMP	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44	Reservoir Slopes	GOOD, ESTABLISHED VEGETATIVE CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45	Access Roads	EARTHEN DRIVE FROM STONE PARKING AREA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46	Security Devices	FENCE AND LOCKED GATE IN GOOD CONDITION ONLY PERMITTING FOOT ACCESS. SPILLWAY AREAS AT EAST AND WEST TRAINING WALLS PROTECTED BY 6-FOOT HIGH CHAIN LINK FENCE. SIGNS AROUND PERIMETER OF RESERVOIR PROHIBITING SWIMMING, WADING AND BOATING ARE INSTALLED.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47	Act 91 Run-of-the-River Signs or Bouys	NOT A LOW HEAD DAM.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>Additional Comments (Refer to item number if applicable):</p> <p>43 AREA IN QUESTION PREVIOUSLY HELD WATER ON PAST TWO INSPECTIONS. THIS YEAR THE AREA WAS DRY BUT SPONGY.</p>					

ITEM	CONDITION	COMMENTS	MONITOR	INVESTIGATE	REPAIR
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SPILLWAYS: ERODABLE CHANNEL

50	Slide, Slough, Scarp	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51	Erosion	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52	Vegetation Condition	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53	Debris	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable): 50. – SPILLWAY IS CONSTRUCTED OF CONCRETE.

SPILLWAYS: NON-ERODABLE CHANNEL

56	Sidewalls	GOOD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57	Channel Floor	GOOD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58	Unusual Movement	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59	Approach Area	GOOD / CLEAR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60	Weir or Control	GOOD – NO BLOCKAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61	Discharge Channel	CLEAR WITH NO BUILDUP OF DEBRIS. SOME RIPRAP NEEDS TO BE RELOCATED BELOW TOE OF SPILLWAY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62	Boils	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

56 & 57 – SURFACE CRACKING ON CONCRETE SPILLWAY AREAS IN CONTACT WITH FLOW HAVE BEEN REPAIRED AND COATED WITH AN EPOXY MATERIAL DURING THE SUMMER OF 2013.

ITEM	CONDITION	COMMENTS	MONITOR	INVESTIGATE	REPAIR
OUTLET WORKS					
70	Intake Structure	CLEAR	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
71	Trashrack	NONE VISIBLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
72	Stilling Basin	ABANDONED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
73	Primary Closure	GOOD, EXERCISED MONTHLY & DAY OF INSPECTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74	Secondary Closure	POOR, NOT OPERABLE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
75	Control Mechanism	GOOD (SEE NOTE BELOW FOR PRIMARY CLOSURE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
76	Outlet Pipe	GOOD (DUCTILE IRON PIPE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
77	Outlet Tower	GOOD, STONE MASONRY WITH CONCRETE CAP. CAP RECENTLY REPAIRED (SEE BELOW)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
78	Outlet Structure	GOOD, INSIDE CLEAN & WELL MAINTAINED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
79	Seepage	NONE EVIDENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
80	Unusual Movement	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
81			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
82			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

74 – THE CONTROL SHAFT BETWEEN THE OPERATOR WHEEL ON THE RIGHT SIDE AND THE PRIMARY CLOSURE VALVE BENT IN THE MIDDLE DUE TO A FAILED WALL BRACKET. THIS ALLOWED THE SHAFT TO BEND. REPAIRS ARE SCHEDULED SPRING/SUMMER OF 2014.

THE OPERATION OF THE LEFT CONTROL VALVE AND SHAFT ARE WORKING NORMALLY.

77 - CONCRETE CAP WAS REPLACED IN SPRING 2013.

CONCRETE/MASONRY DAMS: UPSTREAM FACE

83	Surface Conditions	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
84	Condition of Joints	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
85	Unusual Movement	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
86	Abutment-Dam Contacts	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
87			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
88			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

ITEM	CONDITION	COMMENTS	MONITOR	INVESTIGATE	REPAIR
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CONCRETE/MASONRY DAMS: DOWNSTREAM FACE

89	Surface Conditions	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
90	Condition of Joints	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
91	Unusual Movement	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
92	Abutment-Dam Contacts	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
93	Drains	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
94	Leakage	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
95			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
96			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

CONCRETE/MASONRY DAMS: CREST

97	Surface Conditions	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
98	Horizontal Alignment	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
99	Vertical Alignment	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
100	Condition of Joints	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
101	Unusual Movements	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
102			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
103			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

ITEM	CONDITION	COMMENTS	MONITOR	INVESTIGATE	REPAIR
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RESERVOIR AREA

104	Sedimentation	SOME EVIDENT AT LAST DRAWDOWN	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
105	Slope Stability	GOOD, WELL VEGETATED & MAINTAINED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
106	Sinkholes	NONE EVIDENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
107	Fractures	NONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
108	Unwanted Growth	NONE EVIDENT OTHER THAN NATIVE & NON NATIVE SPECIES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
109	Storage Gage	NONE INSTALLED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
110			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
111			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments (Refer to item number if applicable):

Final Comments:

DAM OWNERS NOTICE CHECKLIST
Department of Environmental Protection
Bureau of Waterways Engineering
Division of Dam Safety

NAME OF DAM: MILLTOWN DAM | **DEP DAM NO.:** 15-146

This is to certify that both the Downstream Hazard Description is accurate and the Posted Notice locations listed below have been inspected and the following are the results of these inspections.

EAST GOSHEN TOWNSHIP

Name of Dam Owner _____ Signature of Dam Owner _____ Date _____

This Dam Owners Notice Checklist is to accompany the Inspection Checklist filed by the Engineer.

EMERGENCY ACTION PLAN

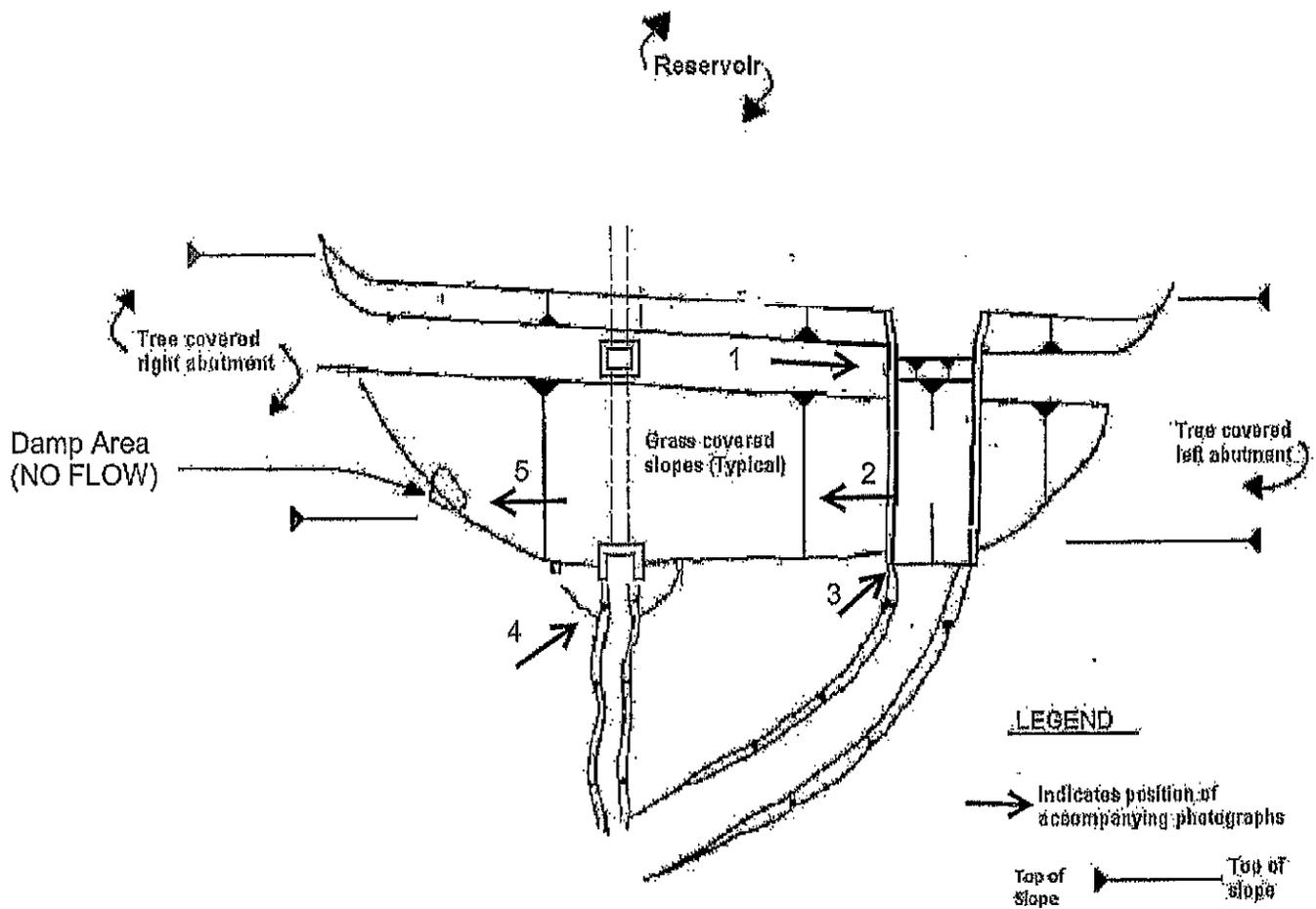
Date of Last Update of Emergency Plan: | OCTOBER 20, 2010

Downstream Hazard Description (Refer to sections II.C and II.D in the EAP), additionally, specify any new developments, structures, etc. downstream within the inundation area: NONE KNOWN

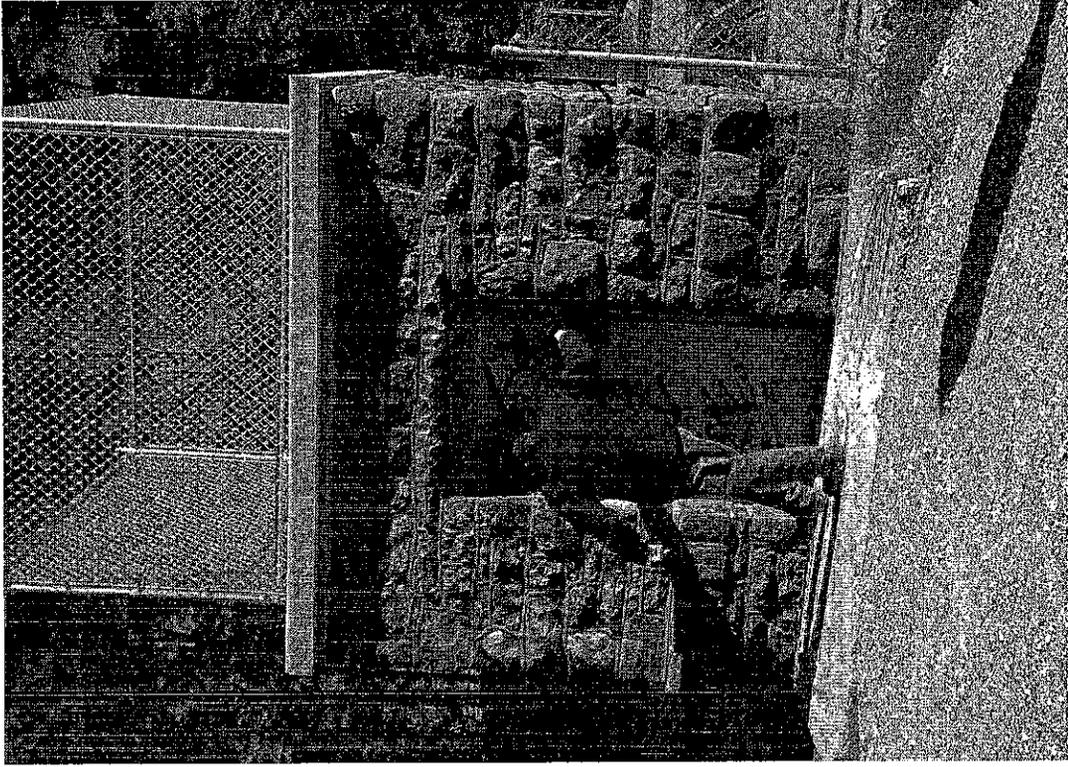
POSTED NOTICES (Refer to section V.A in the EAP)

ITEM	DATE INSPECTED	LOCATION	COMMENTS	EXISTING	MISSING	REPLACED
1	12-08-10	Chester County Advanced Life Support	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	12-08-10	West Goshen Police Department	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	12-06-10	PA State Police	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	12-06-10	Westtown-East Goshen Police Department	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	12-06-10	Chester County EMA	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	12-06-10	Good Will Fire Company	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	12-06-10	Goshen Fire Company	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	12-06-10	PEMA State EOC	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	12-08-10	Thornbury Township	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	12-08-10	West Goshen Township	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	12-08-10	Wawa Store	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	12-08-10	Genuardi's Store	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	12-08-10	Westtown Township	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14	12-08-10	CVS Store	See attached transmittal letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Comments (Refer to item number if applicable)						



TYPICAL FIELD SKETCH



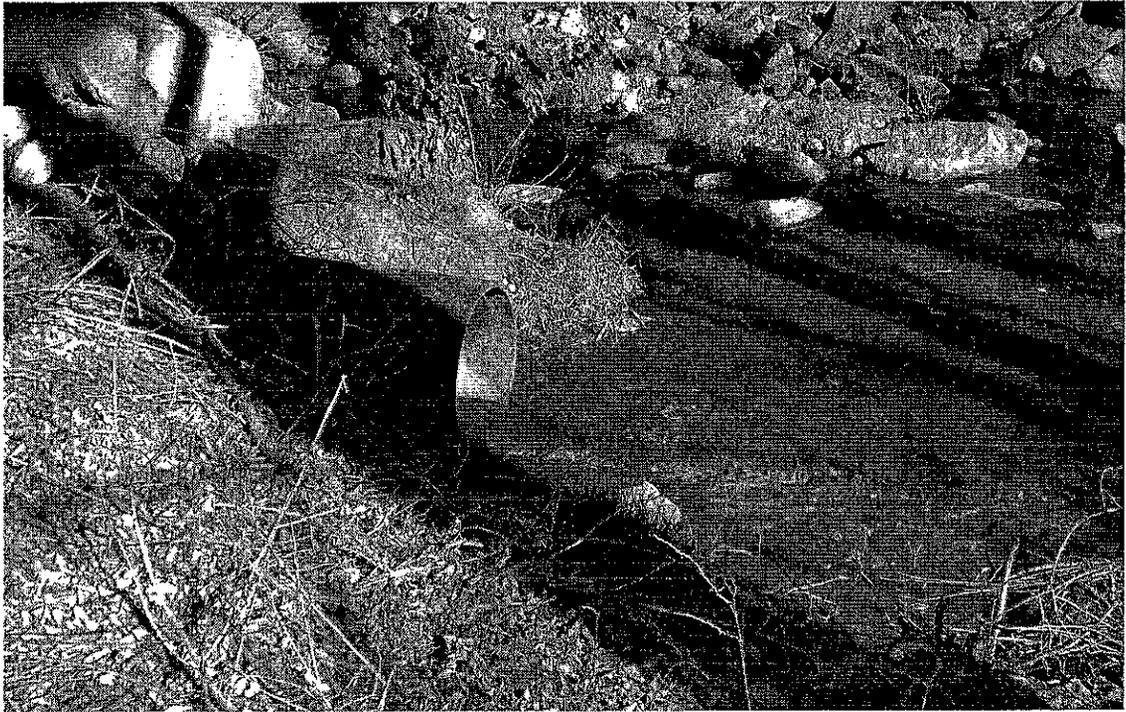
IMAG 1



IMAG 2



IMAG 3



IMAG 4



IMAG 5