



Catherine B. Templeton, Director

Promoting and protecting the health of the public and the environment

June 19, 2013

STEPHEN C HESS
EXEL INC (STEVE HESS)
570 POLARIS PKWY
WESTERVILLE OH 43082-7900

RE: PROJECT GEKKO (EXEL) @ RIVERWALK, York County
File number: 46-07-12-01D
NPDES Coverage Number: SCR10S217

Dear Stephen C Hess:

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 **CITY OF ROCK HILL**. 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 **June 19, 2013**. This project's general permit coverage number is **SCR10S217**. The total disturbed area for this site is **62.6 acres**.

Because this project disturbs 10 or more acres, a pre-construction meeting must be held onsite with all co-permittees and contractors who are not co-permittees (contractors) prior to that co-permittee or contractor performing construction related work intended to disturb soils at the above-referenced site. Please refer to SCR100000, mainly Section 3.2, for information about requirements for pre-construction meetings and certification of those meetings.

Because this project is part of a larger common plan for development or sale (LCP), all applications for future land-disturbing activities that are part of this LCP (phases, outparcels, etc.) should include the above-referenced file number (46-07-12-01D), NPDES coverage number (SCR10S217), and project name **RIVER FALLS INDUSTRIAL PARK**.

An as-built survey(s), signed and sealed by a S.C. Licensed Land Surveyor or Professional Engineer, should be submitted to **CITY OF ROCK HILL** 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 as-built survey and/ or analysis must be accepted by **CITY OF ROCK HILL** before a Notice of Termination (NOT) can be submitted to the Department.

The CGP can be downloaded at the following website:

<http://www.scdhec.gov/environment/water/swater/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 this DHEC EQC Regional Office prior to starting any land-disturbing activity. The address and telephone number of the EQC office are as follows:

Lancaster EQC Office
2475 DHEC RD
LANCASTER SC 29720
803-285-7461

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 **CITY OF ROCK HILL**; the Department must be notified in writing by **CITY OF ROCK HILL** 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 Stormwater Permitting Section at (803) 898-4300.

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.

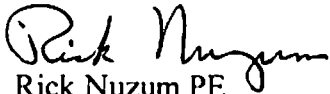
You are responsible for obtaining any other federal, state, or local permit that may be required for this project. In particular, any permits through the U.S. Army Corps of Engineers for the placement of fill material in Waters of the United States. Please note we have not sent a copy of this letter 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)896-4261 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 803-898-4034.

Sincerely,


Rick Nuzum PE
Stormwater Permitting

CC: Lancaster EQC Office
Brian Upton—ISAACS GROUP THE
CITY OF ROCK HILL

RECEIVED



JUN 12 2013

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)

South Carolina Department of Health and Environmental Control

Stormwater, Construction & Agricultural Permitting Division

For Official Use Only

File Number: 46-07-12-01D
Permit Number: SCR10-5217
Submittal Package Complete:

SOUTH CAROLINA
DEPT OF HEALTH AND ENVIRONMENTAL CONTROL
ENVIRONMENTAL QUALITY CONTROL
STORMWATER PERMITTING SECTION
APPROVED FOR CONSTRUCTION ONLY

DHEC PERMIT #: SCR105217
FILE #: 46-07-12-01D
DATE ISSUED: 06/19/13
BY: Rick Nugum

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.

Date: 4/30/13
Project/Site Name: Project Gekko (Exel) County: York
(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
Major Modification
MS4 Project Review
Ocean and Coastal Resource Management (OCRM) Review
Change of Information/Other

B. If Applicable, identify the entity designated as MS4 Reviewer and MS4 Operator (i.e., Lexington County, City of Greer, etc.): MS4 Reviewer: City of Rock Hill MS4 Operator: City of Rock Hill

II. Primary Permittee Information

Person or Company
If a Company, are you a Lending Institution or Government Entity?
Company EIN (if applicable): EIN: 04-2801160

A. Primary Permittee Name: Steve Hess - Exel Inc.
Mailing Address: 570 Polaris Parkway City: Westerville State: OH Zip: 43082
Phone: 614-865-9269 Fax: 614-865-9864 Email Address: Steve.hess@exel.com
B. Contact /ODSA Name (if different from above OR if owner is a company): Larry Wright - Exel, Inc
Mailing Address: 570 Polaris Parkway City: Westerville State: OH Zip: 43082
Phone: 614-565-0117 Fax: 614-865-9864 Email Address: laurence.wright@exel.com
C. Property Owner Name (if different from above): Exel, Inc.
Mailing Address: 570 Polaris Parkway City: Westerville State: OH Zip: 43082
Phone: 614-565-0117 Fax: 614-865-9864 Email Address: laurence.wright@exel.com

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

A. C-SWPPP Preparer Name: Brian Dutton
B. Registered Professional: Engineer
C. Company/Firm Name: The Isaacs Group
Mailing Address: 9720 Red Oak Blvd Suite 430 City: Charlotte State: NC Zip: 28217
Phone: 704-527-3440 Fax: 704-527-8335 Email Address: bdupon@isaacsgrp.com

IV. Project/Site 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
B. Site Address/Location (street address, nearest intersection, etc.): Paragon Way (996)
City/Town (if in limits): Rock Hill Zip Code: 29730
Latitude: 34° 57' 16" N Longitude: -80° 58' 33" W (Source): GPS Web Site: Google
Tax Map Number (s) (List all): 6620701132

- C. Is this site located on Indian Land? Yes No
- D. Proposed Start Date: July 1, 2013 Proposed Completion Date: March 30, 2014
- E. Disturbed Area (nearest tenth of an acre): 62.6 Total Area (acres): 65.0
- 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: Riverwalk Check here if this is the First Phase.
- Previous State Permit/File Number: _____ Previous NPDES Coverage Number: SCR10 H216
- 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, National, etc.). If None, list None.
None

- 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>Manchester Creek</u>	<u>1,500</u>	<u>FW</u>
b. Next Nearest: <u>Catawba River</u>	<u>4,950</u>	<u>FW</u>
c. Coastal Zone ONLY: Coastal Receiving Water (CRW): <u>N/A</u>	<u>-</u>	<u>Not Applicable</u>
d. Other Waterbodies: <u>N/A</u>	<u>-</u>	<u>-</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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>-</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	<u>-</u> Ac
c. Other Water(s): _____	<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	<u>-</u> Ac <u>-</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	<u>-</u> Ac <u>-</u> 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:

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: Yes 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: N/A
2. If yes for C.1, will construction activities cross over or occur in, under, or thru the SCNW? Yes 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: N/A

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	<u>None</u>	<u>None</u>
b. USACOE 404 Permit or 401 Certification	<u>None</u>	<u>None</u>
c. SCNW Permit If applied for or issued, identify Date applied for or issued: _____	<u>None</u>	<input type="checkbox"/> All Activities or <input type="checkbox"/> Some Activities (Describe): <u>N/A</u>

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 <u>most current</u> 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.
Nearest DHEC WQMS(s) <u>CW-041</u>	Corresponding Waterbody	<input type="checkbox"/> Yes <input checked="" 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? Yes No
 (NOTE: if no for f, this site is NOT eligible for coverage under the CGP). See Instructions.

2. TMDL Impaired Waterbodies

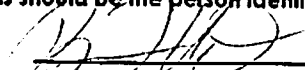
a. Name of Nearest DHEC Water Quality Monitoring Stations (WQMS)(s) that receives stormwater from your construction site and/or thru an MS4?	b. Has a TMDL(s) been developed for this WQMS(s)? If No, identify as such below and proceed to Section VI. If Yes, complete items c thru f of this table.	c. If 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?
<u>CW-041</u>	<input type="checkbox"/> Yes <input checked="" 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)? Yes 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).

Brian T. Upton



23419

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."

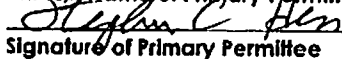
"I or I (on behalf of my company and its contractors and agents), as the case may be, also hereby certify that all land-disturbing construction and associated activity pertaining to this site shall be accomplished pursuant to and in keeping with the terms and conditions of the approved plans and SCR100000. 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."

Stephen C. Hess

Senior Director Real Estate Development,
Exel Inc.

Printed Name of Primary Permittee

Title/Position



5-7-13

Signature of Primary Permittee

Date Signed