

APPENDIX E

Notice of Intent (NOI) for coverage under Small MS4 General Permit

Part I: General Conditions

General Information

Name of Municipality or Organization: State

EPA NPDES Permit Number:

Primary MS4 Program Manager Contact Information

Name: Title:

Street Address Line 1

Street Address Line 2

City State Zip Code

Email: Phone Number:

Fax Number:

Other Information

Check the box if your municipality or organization was covered under the 2003 MS4 General Permit

Stormwater Management Program (SWMP) Location (web address or physical location):

Eligibility Determination

Endangered Species Act (ESA) Determination Complete? Eligibility Criteria (check all that apply): A B C D E F

National Historic Preservation Act (NHPA) Determination Complete? Eligibility Criteria (check all that apply): A B C D

MS4 Infrastructure (if covered under the 2003 permit)

Estimated Percent of Outfall Map Complete? If 100% of 2003 requirements not met, enter an estimated date of completion (MM/DD/YY):

(Part II, III, IV or V, Subpart B.3.(a.) of 2003 permit)

Web address where MS4 map is published:

If outfall map is unavailable on the internet an electronic or paper copy of the outfall map must be included with NOI submission (see section V for submission options)

Regulatory Authorities (if covered under the 2003 permit)

Illicit Discharge Detection and Elimination (IDDE) Authority Adopted?: Effective Date or Estimated Date of Adoption (MM/DD/YY):

(Part II, III, IV or V, Subpart B.3.(b.) of 2003 permit)

Construction/Erosion and Sediment Control (ESC) Authority Adopted?: Effective Date or Estimated Date of Adoption (MM/DD/YY):

(Part II, III, IV or V, Subpart B.4.(a.) of 2003 permit)

Post- Construction Stormwater Management Adopted?: Effective Date or Estimated Date of Adoption (MM/DD/YY):

(Part II, III, IV or V, Subpart B.5.(a.) of 2003 permit)

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Part II: Summary of Receiving Waters

Please list the waterbody segments to which your MS4 discharges. For each waterbody segment, please report the number of outfalls discharging into it and, if applicable, any impairments.

For Massachusetts list of impaired waters click here: www.mass.gov/dep/water/resources/10list6.pdf

For New Hampshire list of impaired waters click here: [New Hampshire Final 303\(d\) Materials: http://des.nh.gov/organization/divisions/water/wmb/swqa/2010/index.htm](http://des.nh.gov/organization/divisions/water/wmb/swqa/2010/index.htm)

Source of pollutants column should be completed with a preliminary source evaluation of pollutants for discharges to impaired waterbodies (see above 303(d) lists) without an approved TMDL in accordance with Section 2.2.2a of the permit

Waterbody segment that receives flow from the MS4	Number of outfalls into receiving water segment	Pollutant list (select one at a time to add)	Click impairment at left to add, or at right to remove	Pollutant(s) causing impairment, if applicable (select one at a time to remove)	Does the waterbody segment have an applicable TMDL?
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved pH	Add/Remove		
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved pH	Add/Remove		
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved pH	Add/Remove		
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved pH	Add/Remove		

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Part III: Stormwater Management Program Summary

MCM 3: Illicit Discharge Detection and Elimination (IDDE)

BMP Categorization (enter your own text to override the drop down menu)	BMP Description	Responsible Department/Parties (enter your own text to override the drop down menu)	Measurable Goal (all text can be overwritten)
SSO inventory			Develop SSO inventory within 120 days of effective date of permit
Storm sewer system map			Develop map within 2 years of effective date of permit
Outfall inventory			Complete inventory of within 1 year of the effective date of permit
Written IDDE program development			Complete within one year of the effective date of permit
Implement IDDE Program			Implement catchment investigations according to program and permit conditions
Employee Training			Train annually
Conduct dry weather screening			Conduct in accordance with outfall screening procedure and permit conditions
Conduct wet weather screening			Conduct in accordance with outfall screening procedure and permit conditions

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Part III: Stormwater Management Program Summary

MCM 5: Post-Construction Stormwater Management in New Development and Redevelopment

BMP Categorization (enter your own text to override the drop down menu or entered text)	BMP Description	Responsible Department/ Parties (enter your own text to override the drop down menu)	Measurable Goal (all text can be overwritten)	Beginning Year of BMP implemen tation
As-built plans for on-site stormwater control	The procedures to require submission of as-built drawings and ensure long term operation and maintenance will be a part of the SWMP.		Require submission of as-built plans for completed projects	2013
Estimation of impervious and directly connected impervious areas (IA and DCIA)	Estimate and update the baseline values or DCIA and IA including conventional pavements, sidewalks, driveways, roadways, parking lots, and rooftops.		Complete by the end of year 2. Update annually.	2014
Inventory and priority ranking of MS4-owned properties that may be retrofitted with BMPs	Conduct detailed inventory of MS4 owned properties and rank for retrofit potential		Completed by the end of year 3	2015
Allow green infrastructure	Develop a report assessing existing local regulations to determine the feasibility of making green infrastructure practices allowable when appropriate site conditions exist		Completed by the end of year 3	2015
Street design and parking lot guidelines	Develop a report assessing requirements that affect the creation of impervious cover. The assessment will help determine if changes to design standards for streets and parking lots can be modified to support low impact design options.		Complete by the end of year 2	2014
Ensure any stormwater controls or management practices for new development and redevelopment will prevent or minimize impacts to water quality.	Adoption, amendment or modification of a regulatory mechanism that ensures stormwater controls on new and redevelopment minimize impacts to water quality			

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Part III: Stormwater Management Program Summary

MCM 6: Municipal Good Housekeeping and Pollution Prevention

BMP Categorization (enter your own text to override the drop down menu or entered text)	BMP Description	Responsible Department/ Parties (enter your own text to override the drop down menu)	Measurable Goal (all text can be overwritten)	Beginning Year of BMP implementation
Create written O&M procedures for parks and open spaces, buildings and facilities, and vehicles and equipment			Complete by the end of Year 1	2013
Inventory all permittee-owned parks and open spaces, buildings and facilities (including their storm drains), and vehicles and equipment			Complete inventory within 6 months of effective date of permit	2012
Establish and implement program for repair and rehabilitation of MS4 infrastructure			Develop program within 1 year of effective date of permit. Implement continuously.	2013
Stormwater Pollution Prevention Plan (SWPPP) for maintenance garages, transfer stations and other waste-handling facilities			Complete by the end of Year 1	2013
Catch Basin Cleaning				2012
Street Sweeping Program				2012
Road Salt use optimization program				2012

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Part IV: Notes and additional information

Use the space below to provide any additional information about your MS4 program

Click to add text

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Part V: 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 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, I certify that 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.

Name:

Title:

Date:

Signature

DRAFT