

II. Suggested Notice of Intent (NOI) Form

1. General facility information. Please provide the following information about the facility.

a) Name of facility:	Mailing Address for the Facility:	
b) Location Address of the Facility (if different from mailing address):	Facility Location	Type of Business:
	longitude: _____ latitude: _____	Facility SIC codes:
c) Name of facility owner: _____ Owner's email: _____ Owner's Tel #: _____ Owner's Fax #: _____ Address of owner (if different from facility address) Owner is (check one): 1. Federal _____ 2. State _____ 3. Tribal _____ 4. Private _____ 4. Other _____ (Describe)		
Legal name of Operator, if not owner: _____ Operator Contact Name: _____ Operator Tel Number: _____ Fax Number: _____ Operator's email: _____ Operator Address (if different from owner)		
d) Attach a topographic map indicating the location of the facility and the outfall(s) to the receiving water. Map attached? _____		
e) Check Yes or No for the following: 1. Has a prior NPDES permit been granted for the discharge? Yes _____ No _____ If Yes, Permit Number: _____ 2. Is the discharge a "new discharge" as defined by 40 CFR Section 122.22? Yes _____ No _____ 3. Is the facility covered by an individual NPDES permit? Yes _____ No _____ If Yes, Permit Number _____ 4. Is there a pending application on file with EPA for this discharge? Yes _____ No _____ If Yes, date of submittal: _____		

2. Discharge information. Please provide information about the discharge, (attaching additional sheets as needed)

a) Name of receiving water into which discharge will occur: _____
State Water Quality Classification: _____ Freshwater: _____ Marine Water: _____

- b) Describe the discharge activities for which the owner/applicant is seeking coverage:
1. Construction dewatering of groundwater intrusion and/or storm water accumulation.
 2. Short-term or long-term dewatering of foundation sumps.
 3. Other.

c) Number of outfalls _____

For each outfall:

d) Estimate the maximum daily and average monthly flow of the discharge (in gallons per day – GPD). Max Daily Flow _____ GPD
Average Monthly Flow _____ GPD

e) What is the maximum and minimum monthly pH of the discharge (in s.u.)? Max pH _____ Min pH _____

f) Identify the source of the discharge (i.e. potable water, surface water, or groundwater). If groundwater, the facility shall submit effluent test results, as required in Section 4.4.5 of the General Permit.

g) What treatment does the wastewater receive prior to discharge?

h) Is the discharge continuous? Yes _____ No _____ If no, is the discharge periodic (P) (occurs regularly, i.e., monthly or seasonally, but is not continuous all year) or intermittent (I) (occurs sometimes but not regularly) or both (B) _____
If (P), number of days or months per year of the discharge _____ and the specific months of discharge _____;
If (I), number of days/year there is a discharge _____
Is the discharge temporary? Yes _____ No _____
If yes, approximate start date of dewatering _____ approximate end date of dewatering _____

i) Latitude and longitude of each discharge within 100 feet (See http://www.epa.gov/tri/report/siting_tool): Outfall 1: long. _____ lat. _____;
Outfall 2: long. _____ lat. _____; Outfall 3: long. _____ lat. _____.

j) If the source of the discharge is potable water, please provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water and attach any calculation sheets used to support stream flow and dilution calculations _____ cfs
(See Appendix VII for equations and additional information)

MASSACHUSETTS FACILITIES: See Section 3.4 and Appendix 1 of the General Permit for more information on Areas of Critical Environmental Concern (ACEC):

- k) Does the discharge occur in an ACEC? Yes _____ No _____
If yes, provide the name of the ACEC: _____

3. Contaminant Information

- a) Are any pH neutralization and/or dechlorination chemicals used in the discharge? If so, include the chemical name and manufacturer; maximum and average daily quantity used as well as the maximum and average daily expected concentrations (mg/l) in the discharge, and the vendor's reported aquatic toxicity (NOAEL and/or LC₅₀ in percent for aquatic organism(s)).
- b) Please report any known remediation activities or water-quality issues in the vicinity of the discharge.

4. Determination of Endangered Species Act Eligibility: Provide documentation of ESA eligibility as required at Part 3.4 and Appendices III and IV. In addition, respond to the following questions.

- a) Are any listed threatened or endangered species, or designated critical habitat, in proximity to the discharge? Yes ___ No ___
- b) Has any consultation with the federal services been completed? Yes ___ No ___
- c) Is consultation underway? Yes ___ No ___
- d) What were the results of the consultation with the U.S. Fish and Wildlife Service and/or NOAA Fisheries Service (check one): a “no jeopardy” opinion _____ or written concurrence _____ on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat.
- e) Which of the five eligibility criteria listed in Appendix 2, Section B (A,B,C,D,or E) have you met? _____
- f) Please attach a copy of the most current federal listing of endangered and threatened species, found at USF&W website.

5. Documentation of National Historic Preservation Act requirements: Please respond to the following questions:

- a) Are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility site or in proximity to the discharge? Yes _____ No _____
- b) Have any State or Tribal historic preservation officers been consulted in this determination? Yes _____ or No _____ If yes, attach the results of the consultation(s).
- c) Which of the three National Historic Preservation Act requirements listed in Appendix 3, Section C (1,2 o3) have you met? _____

6. Supplemental Information: Please provide any supplemental information. Attach any analytical data used to support the application. Attach any certification(s) required by the general permit

7. Signature Requirements: The Notice of Intent must be signed by the operator in accordance with the signatory requirements of 40 CFR Section 122.22 (see below) including the following certification:

I certify under penalty of law that (1) no biocides or other chemical additives except for those used for pH adjustment and/or dechlorination are used in the dewatering system; (2) the discharge consists solely of dewatering and authorized pH adjustment and/or

dechlorination chemicals; (3) the discharge does not come in contact with any raw materials, intermediate product, water product or finished product; (4) if the discharge of dewatering subsequently mixes with other permitted wastewater (i.e. stormwater) prior to discharging to the receiving water, any monitoring provided under this permit will be only for dewatering discharge; (5) where applicable, the facility has complied with the requirements of this permit specific to the Endangered Species Act and National Historic Preservation Act; and (6) 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 certify that I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Facility Name: Frederick Law Olmsted National Historic Site

Operator signature:



Title: Construction Manager

Date:

4/18/11

Federal regulations require this application to be signed as follows:

1. For a corporation, by a principal executive officer of at least the level of vice president;
2. For partnership or sole proprietorship, by a general partner or the proprietor, respectively, or,
3. For a municipality, State, Federal or other public facility, by either a principal executive officer or ranking elected official.

List of Attachments

Supplemental Information

MA Fee Transmittal Form and Copy of check

Locus Map

CSO Outfall Map

Natural Heritage and Endangered Species
Program Information Map



engineering and constructing a better tomorrow

National Park Service – Olmstead House
99 Warren Street, Brookline, Massachusetts

Supplemental Information

- 2.b.) This Notice of Intent is for the discharge of groundwater as a result of drilling a geothermal well field. This is a short term dewatering project.
- 2.d.) The actual discharge volume to the storm drain will be based upon the water production of the geothermal well. The storm drain will be used as a contingency for water quantity above groundwater infiltration rates of the property.
- 2.f.) The source of the discharge is groundwater produced during drilling of geothermal wells. As the wells have not yet been drilled, no groundwater is available for water quality analysis. The applicant respectfully requests that a groundwater sample be obtained when the first well is drilled, with analytical results sent to US Environmental Protection Agency, MA Department of Environmental Protection and City of Brookline prior to initial discharge. Sampling and analysis will be conducted in accordance with 4.4.5 of the Final Dewatering Permit.
- 2.g) All ground water will be pumped to a weir tank employing floc-blocks to facilitate sediment precipitation prior to discharge.
- 2.h.) The number of days is an anticipated maximum for the project completion.
2. i.) The proposed receiving point is connected to the City of Brookline storm drain system. The discharge point (outfall) is a Combined Sewerage Overflow discharge outfall into Leverett Pond.
- 2.j.) Not applicable.
- 3.a.) No chemicals are added to the discharge.
- 3.b.) There are no known remediation or water quality issues in the vicinity of the discharge.
- 4) There are no listed threatened or endangered species, or designated critical habitat in proximity to the discharge location. Massachusetts Natural Heritage and Endangered Species Program has identified Priority Habitat 752 downgradient of Leverett Pond (discharge location). As the discharge location is a Combined Sewer Overflow, the addition of clean groundwater to this discharge is not anticipated to have any adverse impact to the mapped habitat or species therein.



engineering and constructing a better tomorrow

5) The subject site is listed on the National Register of Historic Places, and is part of the National Park system. The National Park Service (NPS) is not required to notify a state historical office when working on federal property. However, NPS Project Manager, Balise Davi, provided verbal notification to the Massachusetts Historical Commission of the overall project (installation of a geothermal well field) prior to project commencement. Project Proponents have determined that the discharge of groundwater to the storm drain will not affect the subject site.



Enter your transmittal number

X237459
Transmittal Number

Your unique Transmittal Number can be accessed online: <http://mass.gov/dep/service/online/trasmfrm.shtml>

Massachusetts Department of Environmental Protection Transmittal Form for Permit Application and Payment

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three copies of this form will be needed.

Copy 1 - the original must accompany your permit application. **Copy 2** must accompany your fee payment. **Copy 3** should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to:

MassDEP
P.O. Box 4062
Boston, MA
02211

* **Note:**
For BWSC Permits, enter the LSP.

A. Permit Information

MRP WM 10

Construction Site Dewatering

1. Permit Code: 7 or 8 character code from permit instructions

2. Name of Permit Category

Dewatering discharge from geothermal well drilling

3. Type of Project or Activity

B. Applicant Information – Firm or Individual

National Park Service

1. Name of Firm - Or, if party needing this approval is an individual enter name below:

2. Last Name of Individual

3. First Name of Individual

4. MI

99 Warren Street

5. Street Address

Brookline

MA

02445

6. City/Town

7. State

8. Zip Code

9. Telephone #

10. Ext. #

Blaise Davi

Blaise_Davi@NPS.gov

11. Contact Person

12. e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

Fredrick Law Olmstead House National Historic Site

1. Name of Facility, Site Or Individual

99 Warren Street

2. Street Address

Brookline

MA

02445

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. DEP Facility Number (if Known)

9. Federal I.D. Number (if Known)

10. BWSC Tracking # (if Known)

D. Application Prepared by (if different from Section B)*

MACTEC Engineering and Consulting

1. Name of Firm Or Individual

511 Congress Street

2. Address

Portland

ME

04101

207-828-367

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

Alicia Robinson

8. Contact Person

9. LSP Number (BWSC Permits only)

E. Permit - Project Coordination

1. Is this project subject to MEPA review? yes no
If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOEA File Number

F. Amount Due

Special Provisions:

1. Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less).
There are no fee exemptions for BWSC permits, regardless of applicant status.
2. Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).
3. Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).
4. Homeowner (according to 310 CMR 4.02).

DEP Use Only

Permit No:

Rec'd Date:

Reviewer:

647582

\$385.00

March 31, 2011

Check Number

Dollar Amount

Date

CHECK NO: 647582

REORDER CHECKSEAL (888) 624-5786

PAGE: 1 of 1

DATE March 31, 2011

VENDOR NAME COMMONWEALTH OF MASSACHUSETTS

VENDOR NO 6111

INVOICE NO.	INVOICE DATE	DESCRIPTION	VO #	NET AMOUNT
CKREQ03301	30-MAR-11	POR	1129980	385.00

PLEASE DETACH AND RETAIN THIS STATEMENT AS YOUR RECORD OF PAYMENT.

\$ 385.00

THIS CHECK IS VOID WITHOUT A BLUE & RED BACKGROUND AND A WATERMARK - HOLD TO THE LIGHT TO VIEW



Bank of America
Atlanta, Dekalb County, GA

64-1278/611

647582

March 31, 2011

1105 Lakewood Parkway, Suite 300
Alpharetta, GA 30004
Accounts Payable

\$ *****385.00

PAY: **Three Hundred Eighty-Five Dollars And 00 Cents*******

TO THE ORDER OF: COMMONWEALTH OF MASSACHUSETTS
DEPT OF ENVIRONMENTAL PROTECTION
P O BOX 4062
BOSTON, MA 02211

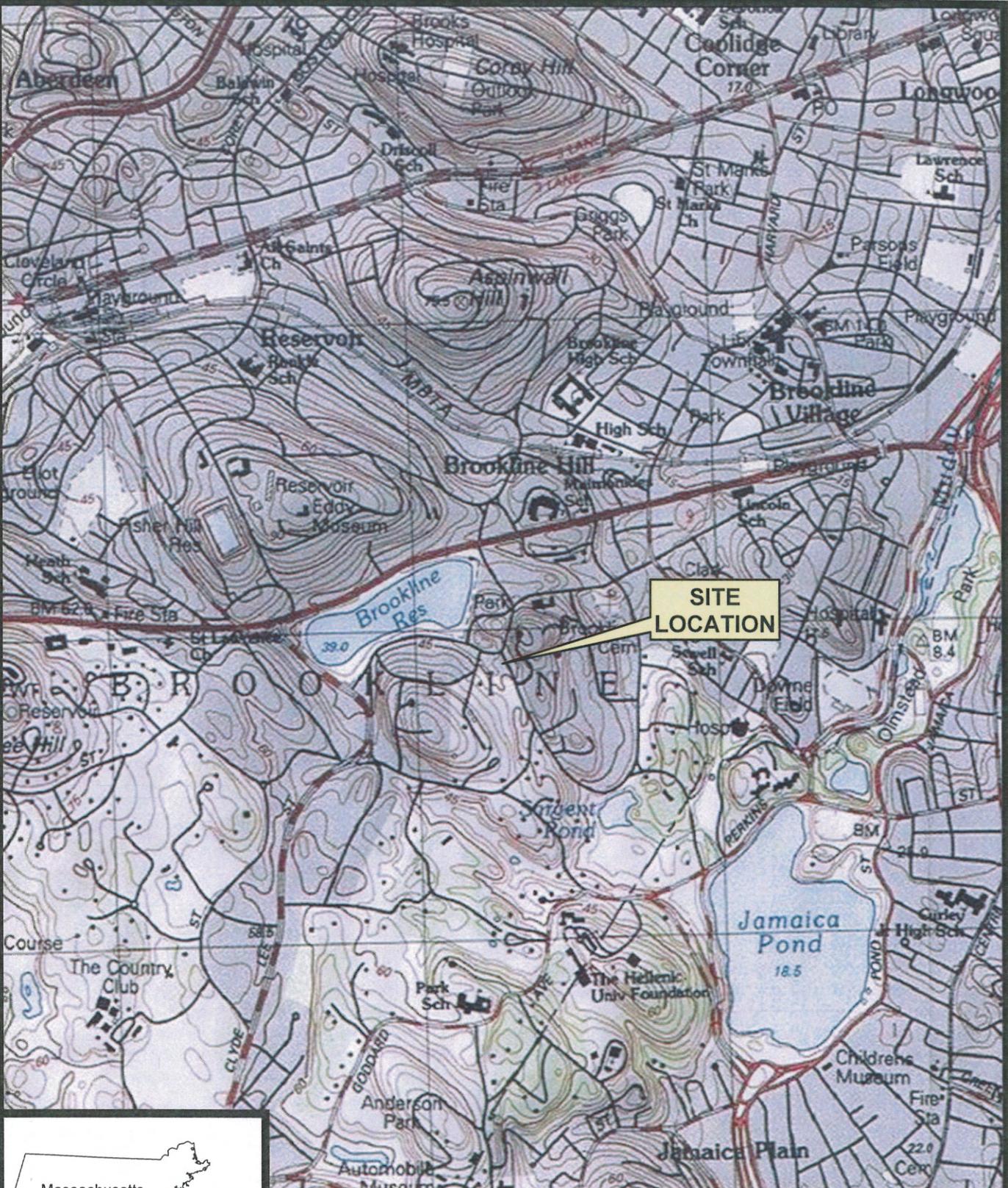
Walter H. Jooop

(VOID AFTER 90 DAYS)

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USGS 1:24,000 scale digital topographic map from ArcGIS Online map services. Map service information available at: http://goto.arcgisonline.com/maps/USA_Topo_Maps



Prepared/Date: BRP 03/21/11
Checked/Date: AKR 03/21/11

Olmsted House
99 Warren Street
Brookline, MA



Site Location
Project 3650-10-0163
Figure 1

Leverett Pond CSO Outfall

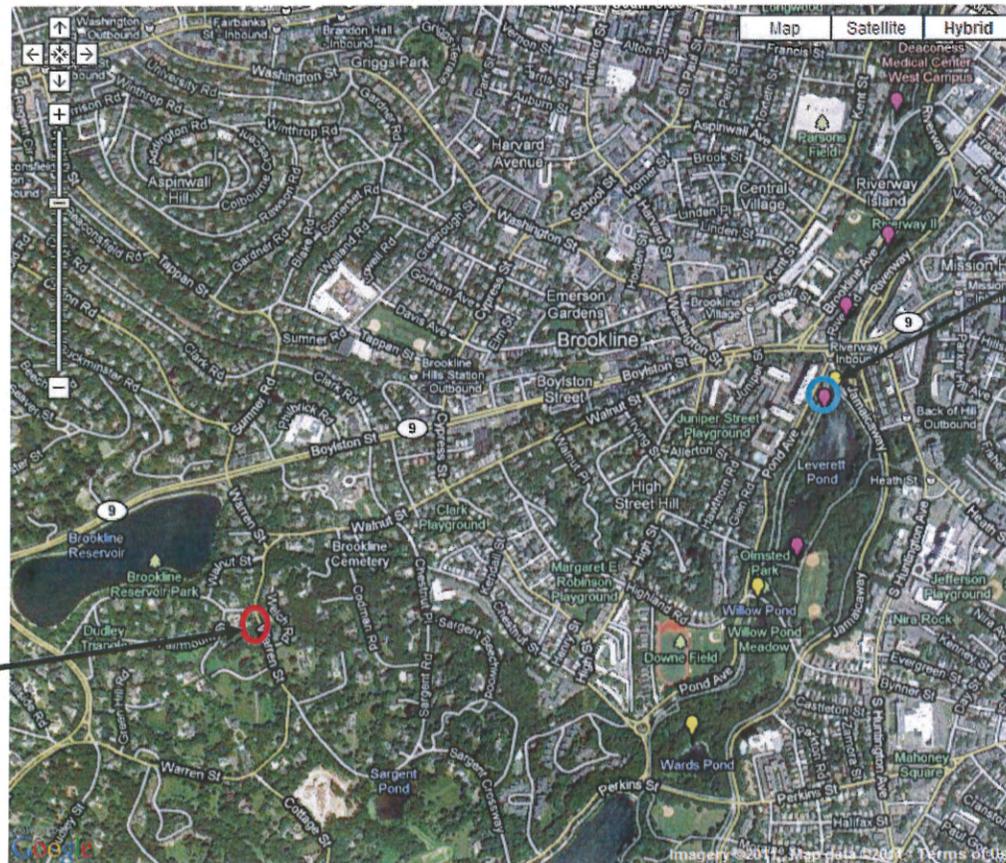
Construction Dewatering NPDES Permit Notice of Intent For Fredrick Law Olmstead National Historic Site

Maps

Muddy River Water Quality Monitoring and Sampling Analysis Plan - Sampling Locations Map

Please note that the locations are approximations based upon the documents provided by the City of Boston. Also note that during every sampling there is a "floating site" which is not shown on this map

Legend:  Outfall Sample Sites  Receiving Water Sample Sites

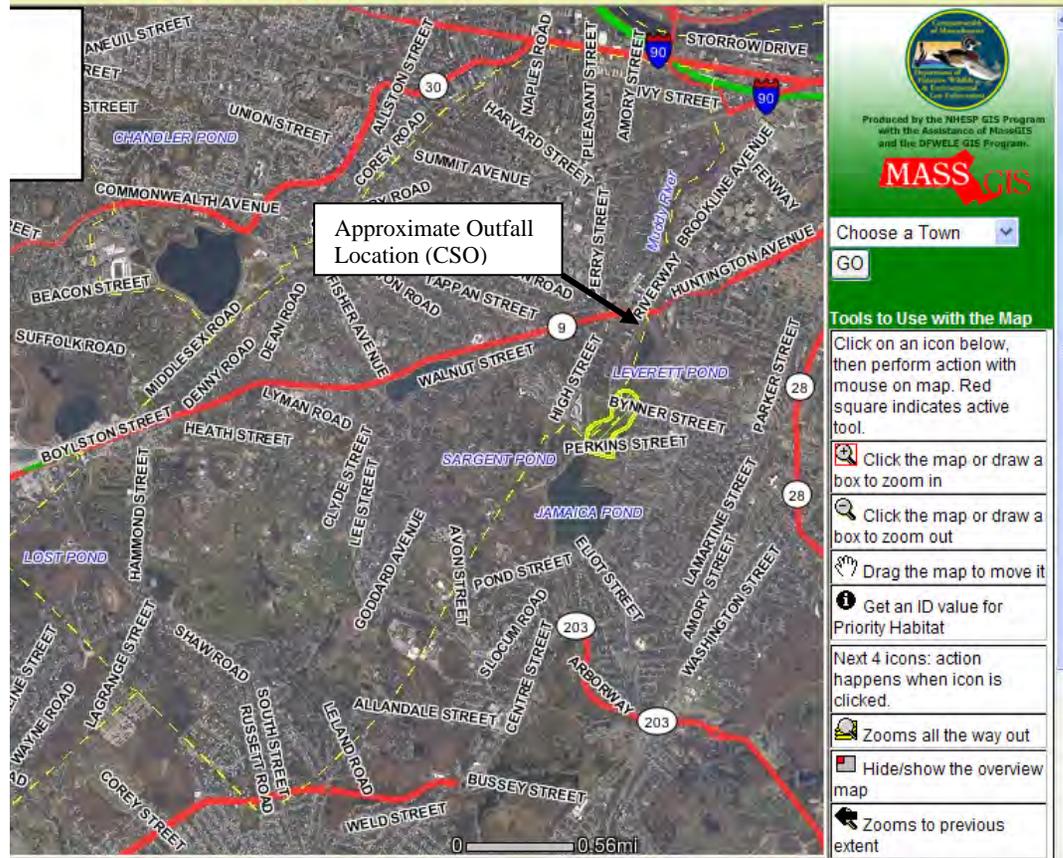


Site
Locus

Outfall location

2008 Priority Habitat & Estimated Habitat

- [NHESP Review](#)
- [Dept. of Fish and Game Home Page](#)
- [Priority Habitat Info](#)
- [Estimated Habitat Info](#)



Natural Heritage and Endangered Species Program Information
 Fredrick Law Olmstead National Historic Site
 Groundwater Discharge