

July 24, 2013

**Via First Class Mail**

EPA-Region 1,  
Office of Ecosystem Protection  
5 Post Office Square,  
Boston, Massachusetts, 02109-3912  
Attn: Victor Alvarez

Re: Chestnut Street Bridge – Ashland, MA  
NOI

Dear Mr. Alvarez,

On behalf of The Town of Ashland (Owner) and N. Granese and Sons (Contractor/Operator), Haley and Ward, Inc (Consultant) submits the enclosed Notice of Intent along with attachments.

Very truly yours,

HALEY AND WARD, INC.



Bryan Manter, P.E.

Cc: Mr. David Manugian, Director Ashland DPW  
Mr. Steven Granese, Vice President N. Granese and Sons

Attachments

- (1) U.S. Department of the Interior – Fish and Wildlife Service letter
- (1) Massachusetts Historical Commission letter

**AUG - 8 2013**

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**II. Suggested Notice of Intent (NOI) Form**

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

a) Name of facility: Not available		Mailing Address for the Facility: Not available	
b) Location Address of the Facility (if different from mailing address): Location. Chestnut Street bridge. Roughly 650 feet south east of the intersection of Union St (Rt. 135) and Chestnut Street		Facility Location longitude: 42 15.424 latitude: 71 27.289	Type of Business: Not available Facility SIC codes: Not available
c) Name of facility owner: Ashland Department of Public Works Owner's Tel #: 508-881-0120 Address of owner (if different from facility address) 20 Ponderosa Road Ashland, MA 01721		Owner's email: dpw@ashlandmass.com Owner's Fax #: 508-881-3255	Town of Ashland
Owner is (check one): 1. Federal _____ 2. State _____ 3. Tribal _____ 4. Private _____ 4. Other <input checked="" type="checkbox"/> (Describe)			
Legal name of Operator, if not owner: <u>N. GRANDE AND SONS, INC</u>			
Operator Contact Name: <u>STEVEN G. GRANDE</u>			
Operator Tel Number: <u>781-592-8121</u> Fax Number: <u>781-631-8466</u>			
Operator's email: <u>info@ngranese.com</u>			
Operator Address (if different from owner) <u>59 JEFFERSON AVE</u> <u>ASHLEM, MA 01970</u>			
d) Attach a topographic map indicating the location of the facility and the outfall(s) to the receiving water. Map attached? <input checked="" type="checkbox"/>			
e) Check Yes or No for the following:			
1. Has a prior NPDES permit been granted for the discharge? Yes _____ No <input checked="" type="checkbox"/> If Yes, Permit Number: _____			
2. Is the discharge a "new discharge" as defined by 40 CFR Section 122.22? Yes <input checked="" type="checkbox"/> No _____ If Yes, Permit Number _____			
3. Is the facility covered by an individual NPDES permit? Yes _____ No <input checked="" type="checkbox"/> If Yes, Permit Number _____			
4. Is there a pending application on file with EPA for this discharge? Yes _____ No <input checked="" type="checkbox"/> If Yes, date of submittal: _____			

AUG - 8 2013

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

- a) Name of receiving water into which discharge will occur: Cold Spring Brook  
State Water Quality Classification: N/A Freshwater: Yes 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. b) 1. Dewatering of groundwater will be temporary to allow for the installation of a new sewer pipe and  
3. Other. watermain
- c) Number of outfalls 1
- For each outfall:
- d) Estimate the maximum daily and average monthly flow of the discharge (in gallons per day – GPD). Max Daily Flow 3,840 GPD  
Average Monthly Flow 3,840 GPD
- e) What is the maximum and minimum monthly pH of the discharge (in s.u.)? Max pH 7.5 Min pH 6.5
- 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. Groundwater
- g) What treatment does the wastewater receive prior to discharge? It will go to a settling tank
- 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) (I) \_\_\_\_\_  
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 <30 \_\_\_\_\_  
Is the discharge temporary? Yes  No \_\_\_\_\_  
If yes, approximate start date of dewatering July 1, 2013 approximate end date of dewatering August 16, 2013
- i) Latitude and longitude of each discharge within 100 feet (See [http://www.epa.gov/tri/report/siting\\_tool](http://www.epa.gov/tri/report/siting_tool)): Outfall 1: long. 42 15.42 lat. 71 27.28  
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 LC<sub>50</sub> 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? B (2) \_\_\_\_\_
- 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 (1.2-03) have you met? 1 \_\_\_\_\_

**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: N/A

Operator signature: 

Title: VICE PRESIDENT

Date: 7/18/2013

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.



# United States Department of the Interior



## FISH AND WILDLIFE SERVICE

New England Field Office  
70 Commercial Street, Suite 300  
Concord, NH 03301-5087  
<http://www.fws.gov/newengland>

January 7, 2013

To Whom It May Concern:

This project was reviewed for the presence of federally listed or proposed, threatened or endangered species or critical habitat per instructions provided on the U.S. Fish and Wildlife Service's New England Field Office website:

(<http://www.fws.gov/newengland/EndangeredSpec-Consultation.htm>)

Based on information currently available to us, no federally listed or proposed, threatened or endangered species or critical habitat under the jurisdiction of the U.S. Fish and Wildlife Service are known to occur in the project area(s). Preparation of a Biological Assessment or further consultation with us under section 7 of the Endangered Species Act is not required. No further Endangered Species Act coordination is necessary for a period of one year from the date of this letter, unless additional information on listed or proposed species becomes available.

Thank you for your cooperation. Please contact Mr. Brett Hillman of this office at 603-223-2541 if we can be of further assistance.

Sincerely yours,

Thomas R. Chapman  
Supervisor  
New England Field Office

950 CMR: OFFICE OF THE SECRETARY OF THE COMMONWEALTH

APPENDIX A MASSACHUSETTS HISTORICAL COMMISSION 220 MORRISSEY BOULEVARD BOSTON, MASS. 02125 617-727-8470, FAX: 617-727-5128

PROJECT NOTIFICATION FORM

RECEIVED

Project Name: Chestnut Sewer Rehabilitation

MAR 11 2013

Location / Address: 600-feet south east of Union Street and Chestnut

MASS. HIST. COMM

City / Town: Ashland, MA 01721

RC 53919

Project Proponent Name: Ashland Department of Public Works

Address: 20 Ponderosa Road

City/Town/Zip/Telephone: Ashland, MA 01721

After review of MHC's files and the materials you submitted, it has been determined that this project is unlikely to affect significant historic or archaeological resources.

Agency license or funding for the project (list all licenses, permits, approvals, grants or other commitments being sought from state and federal agencies).

MHC#RC 53919

Agency Name Type of License or funding (specify)

Edward L. Bell 14 March 2013 Date Deputy State Historic Preservation Officer Massachusetts Historical Commission

Funding - Town of Ashland

Permits- Ashland Conservation/MA DEP - Order of Conditions EPA - Dewatering Permit U.S. Army Corps of Engineers - Category 1 Notification

cc: David Webster, EPA Region 1  
Thelma Murphy EPA Region 1 FPO

Project Description (narrative): The scope of the project is to increase the capacity of an existing 14-inch sewer pipe that crosses under Cold Spring Brook to a 24-inch pipe. In the same area as the sewer, there is a 6-inch water main that crosses over Cold Spring Brook via the bridge on Chestnut Street. The main has deteriorated and needs to be replaced. Currently this section of pipe has been isolated from the system using nearby gate valves. Analysis of the bridge concluded that the condition of the concrete is questionable. Hanging the pipe from the bridge is not recommended, since there are other alternatives. Due to the current condition of the bridge, the replacement 8-inch water main will be installed alongside the sewer in Cold Spring Brook.

Does the project include demolition? If so, specify nature of demolition and describe the building(s) which are proposed for demolition. No

Does the project include rehabilitation of any existing buildings? If so, specify nature of rehabilitation and describe the building(s) which are proposed for rehabilitation. No

Does the project include new construction? If so, describe (attach plans and elevations if necessary). No

950 CMR: OFFICE OF THE SECRETARY OF THE COMMONWEALTH  
APPENDIX A (continued)

To the best of your knowledge, are any historic or archaeological properties known to exist within the project's area of potential impact? If so, specify. No

What is the total acreage of the project area?

Woodland _____ acres	Productive Resources:
Wetland <u>.01</u> acres	Agriculture _____ acres
Floodplain _____ acres	Forestry _____ acres
Open space _____ acres	Mining/Extraction _____ acres
Developed <u>.1</u> acres	Total Project Acreage <u>.11</u> acres

What is the acreage of the proposed new construction? 0 acres

What is the present land use of the project area?

Commercial, wetland and low density residential also please see attached map.

Please attach a copy of the section of the USGS quadrangle map which clearly marks the project location.

This Project Notification Form has been submitted to the MHC in compliance with 950 CMR 71.00.

Signature of Person submitting this form: Bryan Manter Date: March 7, 2013

Name: Bryan Manter

Address: 63 Great Road, Suite 200

City/Town/Zip: Maynard, MA 01754

Telephone: 978-648-6025

REGULATORY AUTHORITY 950 CMR 71.00: M.G.L. c. 9, §§ 26-27C as amended by St. 1988, c. 254.