

F-0056-23-02 (8100)
September 30, 2008

10/1/08
renewal
MAG 250960



US EPA, Region 1
NCCW GP Processing
Municipal Assistance Unit (CMU)
1 Congress Street, Suite 1100
Boston, MA 02114-2023

Re: **Noncontact Cooling Water General Permit Notice of Intent
Permit Number MAG250960**

To Whom It May Concern:

On behalf of our client, Chemitorp, Inc. (formerly Raytor Compounds, Inc.) located at 238 Nonotuck Street in Northampton, Massachusetts, we are providing you with this permit renewal application for non-contact cooling water discharges. The facility is proposing to continue non-contact cooling water discharges to the Mill River via Outfall No. 001A and 002A as previously permitted under the permit number MAG250960.

Please find enclosed a topographic map and a copy of the United States Environmental Protection Agency's Notice of Intent form. If you have any questions or require additional information, please contact me at 413-572-3215.

Very truly yours,

TIGHE & BOND, INC.

Douglas A. Stellato

Douglas A. Stellato
Environmental Compliance Specialist

Enclosures

Copy: Massachusetts Department of Environmental Protection (w/encl)
Scott Chisholm - Chemitorp, Inc. (w/ encl)

J:\F\F0056\Non-Contact Cooling Water NOI\EPA letter.doc



Section 1

Introduction

1.1 Background

Chemitorp, Inc., formerly Raytor Compounds (Chemitorp), is located at 238 Nonotuck Street in Northampton, Massachusetts. The Chemitorp facility manufactures urea and melamine molding compounds. The facility operates under a Standard Industrial Classification (SIC) code of 2821, "Plastics materials, Synthetic Resins, and Nonvulcanizable Elastomers". Chemitorp has an existing Non-Contact Cooling Water (NCCW) Discharge Permit, MAG250960.

1.2 Scope of the Application

This Notice of Intent (NOI) is intended to obtain coverage under the new General Permit for NCCW Discharges from the Massachusetts Department of Environmental Protection (MADEP) and the United States Environmental protection Agency (USEPA) for the Chemitorp facility. Chemitorp discharges their NCCW to the Mill River in Northampton.

1.3 NOI Supplemental Information

Chemitorp has two separate sources of water that is used for the facility's NCCW. Chemitorp's primary source of NCCW is a private well located at the facility. The backup source of NCCW is the municipal water supply. Chemitorp has had to utilize the backup supply approximately fifty times over the past three years. Because groundwater (well water) is used as one of the water sources, effluent sampling and testing had to be completed for the parameters required in Section 5.4 of the General Permit. The analysis of the samples is included in Section 4 of this application package. The pH testing of the effluent NCCW was performed by Tighe & Bond, Inc, whereas all other parameters were analyzed by Test America Laboratories, Inc.

1.4 Calculations

Chemitorp discharges its NCCW to the Mill River. Therefore, engineering calculations for the surface water temperature rise due to the discharge of the NCCW is required. The temperature rise of the surface water was calculated using the following formula:

$$\Delta T_r = \frac{mp}{mr} \times \Delta T_p$$

Where

ΔT_r = change in river temperature, °F

mp = flow rate of effluent, MGD

mr = flow rate of river, MGD

ΔT_p = change in temperature of NCCW, effluent – influent, °F

The flow rate of the Mill River (7Q10 value) is 4.1 million gallons per day (MGD). The maximum design flow rate of the NCCW from the Chemitorp facility is 0.072 MGD. The change in temperature of the NCCW at the facility is approximately 18 °F. The input of these values into the above equation results in a ΔT_r value of 3.161×10^{-1} °F. The 7Q10 value of the Mill River was confirmed by Kathleen Keohane of the MADEP.

APPENDIX 5

Suggested Form for Notice of Intent (NOI) for the Noncontact Cooling Water General Permit

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

a) Name of facility: Chemitorp, Inc. (Formerly Raytor Compounds, Inc.)		Type of Business: Plastics Materials, Synthetic Resins, and Nonvulcanizable Elastomers
Facility Location Address : 238 Nonotuck Street Northampton, MA 01062 longitude: -72.674306 ____ latitude: 42.330193 ____	Facility SIC codes: 2821	Facility Mailing Address (if not location address)
b) Name of facility owner: Chemitorp, Inc.		Email address of owner: scott.chisholm@perstorpcompounds.com
Owner's Tel #: 413-584-2472 ____ Owner's Fax #: 413-586-4089 ____	Owner is (check one): 1. Federal ____ 2. State ____ 3. Tribal ____ 4. Private <input checked="" type="checkbox"/> 4. Other ____ (Describe)	
Address of owner (if different from facility address)		
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 topographic map indicating the locations of the facility and the receiving water; all NCCW discharge points; upstream and downstream monitoring points. Map attached? <input type="checkbox"/> Yes <input type="checkbox"/> No		
e) Check Yes or No for the following:		
1. Has a prior NPDES permit been granted for the discharge? Yes <input checked="" type="checkbox"/> No ____ If Yes, Permit Number: <u>MAG250960</u>		
2. Is the discharge a "new discharge" as defined by 40 CFR Section 122.22? Yes ____ No <input checked="" type="checkbox"/>		
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: _____		

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

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

b) Describe the discharge activities for which the owner/applicant is seeking coverage: Non-contact cooling water

c) FOR MASSACHUSETTS FACILITIES ONLY: Engineering Calculations: Submit the completed engineering calculation of the surface water temperature rise as shown in Attachment A of the General Permit. Check if attached: X

d) Number of outfalls 2

For each outfall: Outfall 1 (001A/008) Outfall 2 (002A/009)

e) What is the maximum daily and average monthly flow of the discharge? Note that EPA will use the flow reported here as the facility's permitted effluent flow limit. Max Daily Flow Outfall 1=0 Outfall 2=9200 GPD Average Flow Outfall 1=0 Outfall 2=1800 GPD

f) What is the maximum daily and average monthly temperature of the discharge (in degrees F)? Max Temp. Outfall 1=NA Outfall 2=78.4
Average Temp. Outfall 1=NA Outfall 2=63.3

g) What is the maximum and minimum monthly pH of the discharge (in s.u.)? Max pH Outfall 1=NA Outfall 2=8.0
Min pH Outfall 1=NA Outfall 2=7.0

h) FOR MASSACHUSETTS FACILITIES ONLY: Is the source water of the NCCW potable water? Yes Mixed No _____ If Yes, EPA will calculate the Total Residual Chlorine limit for facilities located in Massachusetts. Some municipal water, mostly well water.

i) Is the discharge continuous? Yes _____ No Outfall 1=No Outfall 2=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) Outfall 1=I Outfall 2=P

If (P), number of days or months per year of the discharge Outfall 2=appx 243 and the specific months of discharge Every Month;
If (I), number of days/year there is a discharge Outfall 1=0

j) Latitude and longitude of each discharge within 100 feet: outfall 1: long. -72.674134 lat. 42.329280; outfall 2: long. -72.673917 lat. 42.329303;
outfall .3: long. _____ lat. _____ (See http://www.epa.gov/tri/report/siting_tool)

k) Provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water 6.3 cfs
Please attach any calculation sheets used to support stream flow and dilution calculations. See General Permit Attachment B for equations and

additional information.

MASSACHUSETTS FACILITIES: See Part 3.4 and Appendix 1 of the General Permit for more information on ACEC.

Areas of Critical Environmental Concern (ACEC): Does the discharge occur in an ACEC? Yes _____ No

If yes, provide the name of the ACEC: _____

3. NCCW Source Water Information. Please provide information about the NCCW source water, using separate sheets as necessary:

a) Indicate source of the NCCW (i.e., municipal water supply, private well, surface water withdrawal, groundwater):

Source: Municipal Water Supply and Private Well

Name of Source Water: _____

Is the source registered/permitted under MA Water Management Act or NHDES Water User Registration Rule (Env Wq 2202)?

Yes _____ No

If yes, registration number: _____

b) If source water is surface water:

i) Is it a freshwater river or stream Yes _____ No _____

ii) Is it a lake? _____ reservoir? _____

iii) Is it tidal river? _____ estuary? _____ ocean? _____

c) Is the source water groundwater? Yes Partial No _____ If yes, see Appendix 8 and submit effluent and surface water test results, as required in Part 5.4 of the General Permit.

d) Does the facility use both a primary and backup source of noncontact cooling water?

Yes No _____

If yes, attach information that identifies and explains the primary and backup sources of noncontact cooling water for and how often the backup supply was used in last three years.

4. Best Technology Available for CWIS

Are you subject to BTA requirements at Part 4.2 of the General Permit? (Facility's discharge is covered by this General Permit and the facility withdraws noncontact cooling water from surface source water). Yes _____ No If No, explain: No CWIS

If YES, attach the facility-specific BTA description as required in Part 4.3 of the General Permit. For additional information and guidance, see Questions 13-23 of the NCCW Fact Sheet, posted at <http://www.epa.gov/region1/npdes/nccwgp.html>. Provide a map showing the location of each CWIS intake structure; NCCW outfall(s) and any CWIS feature referred to in the BTA description.

Include in your description:

_____ Measures to meet the General Permit Part 4.3.a general BTA requirements, including documentation that describes the facility's monitoring program for impinged fish and/or invertebrate; or the required alternative monitoring plan frequency and/or protocol

_____ A characterization of the source water body's aquatic life habitat in the vicinity of each CWIS during the seasons when the CWIS may be in use

_____ The attributes of the current CWIS

_____ Design measures of the CWIS

_____ Operation measures of the CWIS

_____ Historical occurrence of impinged fish for the past five years

_____ If applicable, a demonstration that the facility's intake rate is commensurate with a closed-cycle recirculation system

_____ Other components to reduce impingement and/or entrainment of aquatic life
4. BTA FOR CWIS CONTINUED:

Provide the following information for each CWIS to support your attached facility-specific BTA description.

Design capacity of the of the CWIS _____MGD

Maximum monthly average intake of the CWIS during the previous five years _____MGD Month in which this flow occurred _____

Maximum through-screen design intake velocity _____feet/second (fps)

For facilities where the CWIS is located on a freshwater river or stream, provide the following information:

The source water's annual mean flow _____cubic feet/second (cfs) as available from USGS or other appropriate source

The design intake flow as a % of the source water's annual mean flow _____ Attach calculations if equal to or less than 5% of annual mean flow.

The source water's 7Q10 _____cfs. See Attachment B of the General Permit for more information on 7Q10 determinations.

The design intake flow as a percent of the source water's 7Q10 _____

5. Contaminant Information

If applicable, attach a listing of all non-toxic pH neutralization and/or dechlorination chemicals used, including chemical name and manufacturer; maximum and average daily quantity used as well as the maximum and average daily expected concentrations (mg/l) in the NCCW discharge, and the vendor's reported aquatic toxicity (NOAEL and/or LC₅₀ in percent for aquatic organism(s)).

6. Determination of Endangered Species Act Eligibility: Provide documentation of ESA eligibility as required at Part 3.4 and Appendix 2, Part C, Step 4, of the General Permit. 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 X
- b) Has any consultation with the federal services been completed? Yes X No ___
- c) Is consultation underway? Yes ___ No X
- 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 X on a finding that the discharges are not likely to adversely affect any endangered species or
- e) Which of the five eligibility criteria listed in Appendix 2, Section B (A,B,C,D or E) have you met? B
- f) Attach a copy of the most current federal listing of endangered and threatened species from the USF&W web site listed in Appendices 2, 2.1 and 4

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

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 X

Have any State or Tribal historic preservation officers been consulted in this determination? Yes ___ or No X 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? 1

8. 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

9. 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 noncontact cooling water (NCCW) system; (2) the discharge consists solely of NCCW (to reduce temperature) and authorized pH adjustment and/or dechlorination chemicals; (3) the discharge does not come in contact with any raw materials, intermediate product, water product (other than heat) or finished product; (4) if the discharge of noncontact cooling water subsequently mixes with other wastewater (i.e. stormwater) prior to discharging to the receiving water, any monitoring provided under this permit will be only for noncontact cooling water; (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: Chemitorp, Inc

Operator signature: Scott Chisholm

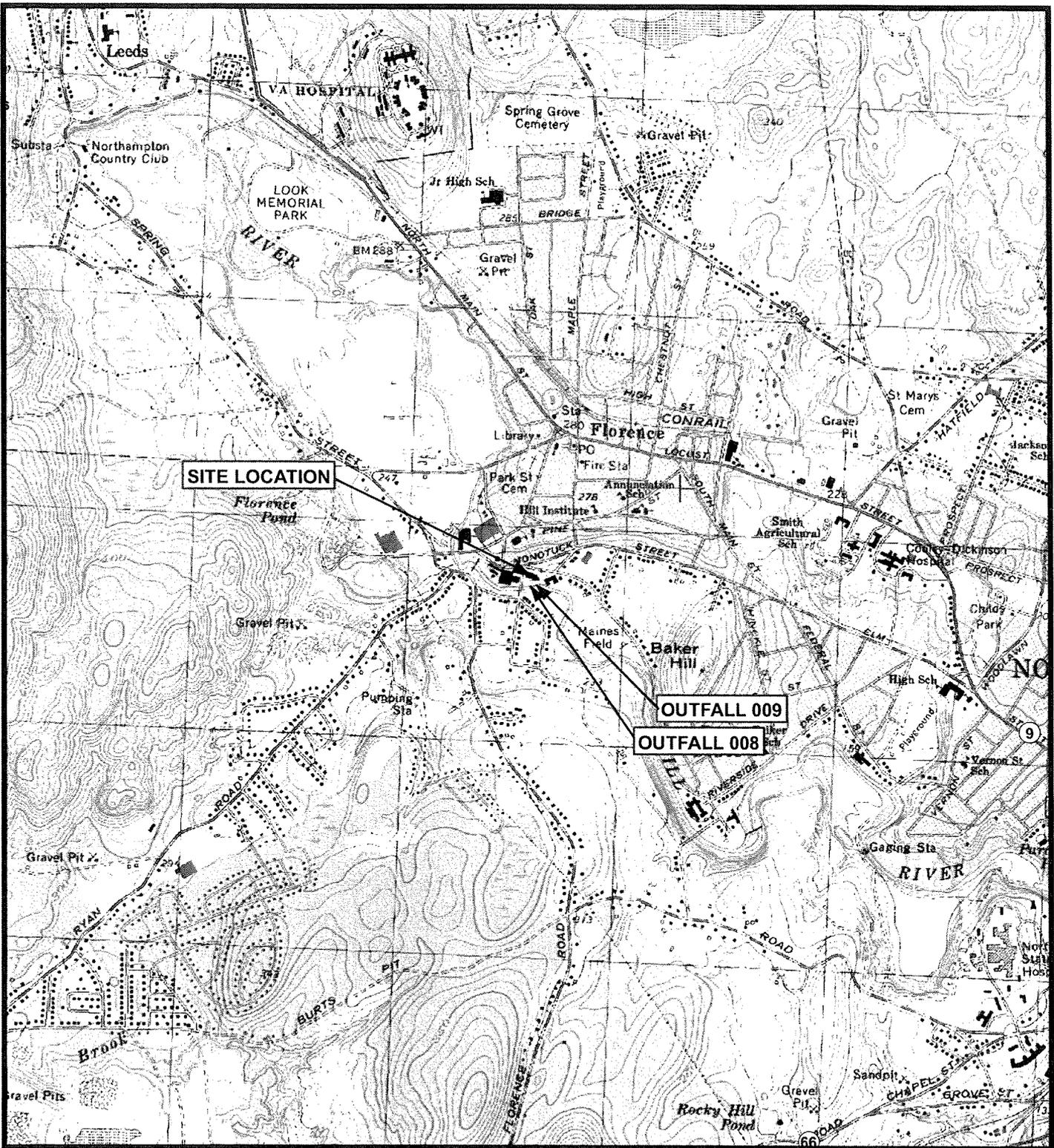
Scott Chisholm GM/RCI 9-24-08

Title: General Manager

Date:

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 a 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.



BASED ON USGS TOPOGRAPHIC MAP FOR
 EASTHAMPTON
 MASSACHUSETTS QUADRANGLE
 REVISED 1979
 10-FOOT CONTOUR INTERVAL

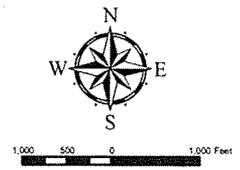
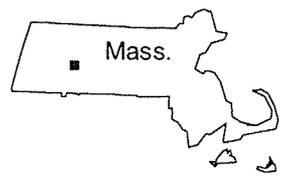


FIGURE 1 SITE LOCUS

CHEMITORP, INC.
 238 NONOTUCK STREET
 FLORENCE, MASSACHUSETTS

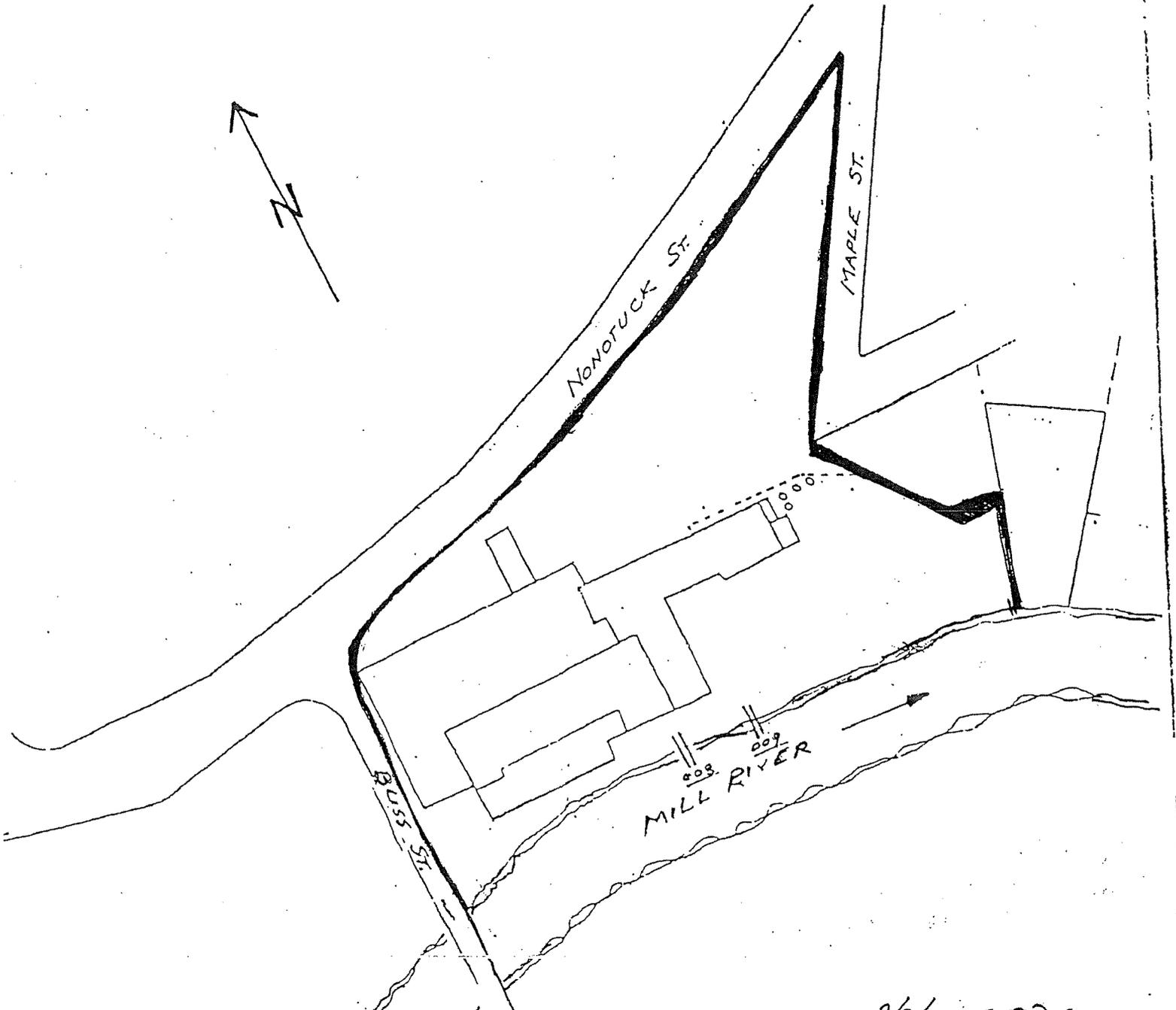
Tighe & Bond

SCALE 1:25,000

SEPTEMBER 2008

Perstorp Compounds, Inc.
238 Nonotuck Street
Florence, MA 01062 USA

General Permit: Surface Water
Discharge of Non-Contact Cooling
Water
Appendix B (BRP WM 11)
Discharge Points # 008 and 009



Section 4

Sample Analysis

This section includes the results of the sample analysis of the NCCW effluent and can be summarized as follows:

- Antimony – ND
- Arsenic - ND
- Cadmium - ND
- Chromium(Total) - ND
- Chromium(VI) - ND
- Copper – 0.023 mg/L
- Iron - ND
- Mercury - ND
- Nickel - ND
- Silver - ND
- Zinc – 0.260 mg/L
- pH – 7.8 s.u.
- Chloride – 4.6 mg/L
- Hardness (receiving water) – 32 mg/L

Doug Stellato
 Tighe & Bond
 53 Southampton Road
 Westfield, MA 01085

Job Number: 360-18993-1

Client Sample ID: Raytor- 1
 Lab Sample ID: 360-18993-1

Date Sampled: 09/24/2008 1530
 Date Received: 09/24/2008 1630
 Client Matrix: Water

Analyte	Result/Qualifier	Unit	RL	Dilution
Method: Total Recoverable-200.7 Rev 4.4		Date Analyzed:	09/25/2008 1400	
Prep Method: 200.7		Date Prepared:	09/25/2008 0823	
Silver	ND	ug/L	5.0	1.0
Arsenic	ND	ug/L	10	1.0
Cadmium	ND	ug/L	1.0	1.0
Chromium	ND	ug/L	5.0	1.0
Copper	23	ug/L	10	1.0
Iron	ND	ug/L	100	1.0
Nickel	ND	ug/L	10	1.0
Antimony	ND	ug/L	6.0	1.0
Zinc	260	ug/L	50	1.0

Doug Stellato
Tighe & Bond
53 Southampton Road
Westfield, MA 01085

Job Number: 360-18993-1

Client Sample ID: Raytor- 2
Lab Sample ID: 360-18993-2

Date Sampled: 09/24/2008 1530
Date Received: 09/24/2008 1630
Client Matrix: Water

Analyte	Result/Qualifier	Unit	RL	Dilution
Method: 245.1			Date Analyzed: 09/26/2008 1257	
Prep Method: 245.1			Date Prepared: 09/26/2008 0835	
Mercury	ND	ug/L	0.20	1.0

Doug Stellato
Tighe & Bond
53 Southampton Road
Westfield, MA 01085

Job Number: 360-18993-1

Client Sample ID: Raytor- 3
Lab Sample ID: 360-18993-3

Date Sampled: 09/24/2008 1530
Date Received: 09/24/2008 1630
Client Matrix: Water

Analyte	Result/Qualifier	Unit	RL	Dilution
Method: SM 3500 CR D Chromium (hexavalent)	ND	mg/L	Date Analyzed: 09/25/2008 0852 0.0050	1.0

Doug Stellato
Tighe & Bond
53 Southampton Road
Westfield, MA 01085

Job Number: 360-18993-1

Client Sample ID: Raytor- 4
Lab Sample ID: 360-18993-4

Date Sampled: 09/24/2008 1530
Date Received: 09/24/2008 1630
Client Matrix: Water

Analyte	Result/Qualifier	Unit	RL	Dilution
Method: 300.0 Chloride	4.6	mg/L	Date Analyzed: 09/25/2008 2114 1.0	1.0

Doug Stellato
Tighe & Bond
53 Southampton Road
Westfield, MA 01085

Job Number: 360-18993-1

Client Sample ID: Raytor- 5
Lab Sample ID: 360-18993-5

Date Sampled: 09/24/2008 1535
Date Received: 09/24/2008 1630
Client Matrix: Water

Analyte	Result/Qualifier	Unit	RL	Dilution
Method: 200.7 Rev 4.4		Date Analyzed:	09/26/2008 1312	
Prep Method: 200.7		Date Prepared:	09/25/2008 0916	
Calcium	9700	ug/L	400	1.0
Magnesium	1800	ug/L	400	1.0
Method: SM 2340B		Date Analyzed:	09/26/2008 1312	
Hardness as calcium carbonate	32	mg/L	2.6	1.0

Section 5 Endangered Species

The current federal list of endangered and threatened species from the United States Fish and Wildlife Services (USF&WS) website is included in this section. The Massachusetts Division of Fisheries & Wildlife was contacted in 2004 by Tighe & Bond, Inc. on behalf of the Chemitorp facility. The USF&WS was also contacted in 2004 in regards to the Chemitorp facility. The response letters from both of these agencies are included in this section. Both letters declare that no rare plants or animals are in the area of the facility.

Massachusetts

Common Name	Scientific Name	Status	Distribution
FISHES:			
Sturgeon, shortnose*	Northeastern bulrush	E	Atlantic coastal waters and rivers (Conn. R.)
REPTILES:			
Turtle, bog	Clemmys muhlenbergii	T	Berkshire County
Turtle, green*	Chelonia mydas	T	Oceanic straggler in southern New England
Turtle, hawksbill*	Eretmochelys imbricata	E	Oceanic straggler in southern New England
Turtle, leatherback*	Dermochelys coriacea	E	Oceanic summer resident
Turtle, loggerhead*	Caretta caretta	T	Oceanic summer resident
Turtle, Atlantic ridley*	Lepidochelys kempii	E	Oceanic summer resident
Turtle, Northern red-bellied couter (Plymouth redbelly)	Chrysemys rubriventris bangsi	E	Plymouth & Dukes Counties
BIRDS:			
Plover, piping		T	Atlantic coast, nesting
Tern, roseate	Charadrius melodus	E	Atlantic coast/islands, nesting
	Sterna dougallii dougallii		
MAMMALS:			
Bat, Indiana		E	Berkshire County/historic
Whale, blue*	Myotis sodalis	E	Oceanic
Whale, finback*	Balaenoptera musculus	E	Oceanic
Whale, humpback*	Balaenoptera physalus	E	Oceanic
Whale, right*	Megaptera novaeangliae	E	Oceanic
Whale, sei*	Eubalaena spp. (all species)	E	Oceanic
Whale, sperm*	Balaenoptera borealis	E	Oceanic
	Physeter catodon		
MOLLUSKS:			
Wedgemussel, dwarf		E	Hampshire, Franklin County
	Alasmidonta heterodon		

INSECTS:

Beetle, Puritan tiger		T	Hampshire County
Beetle, Northeastern beach	<i>Cicindela puritana</i>	T	Dukes & Bristol Counties
Beetle, American burying	<i>Cicindela dorsalis dorsalis</i>	E	Penikese & Nantucket Isl., reintroduced populations
	<i>Nicrophorus americanus</i>		

PLANTS:

Small whorled pogonia		T	Hampshire, Essex, Hampden, Worcester, Middlesex Counties
	<i>Isotria medeoloides</i>		
Sandplain gerardia		E	Barnstable & Dukes Counties
Northeastern bulrush	<i>Agalinus acuta</i>	E	Franklin County
	<i>Scirpus ancistrochaetus</i>		

* Except for sea turtle nesting habitat, principal responsibility for these species is vested with the National Marine Fisheries Service
Rev. 1/8/02



United States Department of the Interior



FISH AND WILDLIFE SERVICE
New England Field Office
70 Commercial Street, Suite 300
Concord, New Hampshire 03301-5087

June 18, 2004

Reference:	<u>Project</u>	<u>Location</u>
	NOI, NPDES stormwater discharge general permit, stormwater pollution prevention plan	Florence, MA

Russell Fleury
Tighe & bond
53 Southampton Road
Westfield, MA 01085

Dear Mr. Fleury:

This responds to your recent correspondence requesting information on the presence of federally-listed and/or proposed endangered or threatened species in relation to the proposed activity(ies) referenced above.

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.

This concludes our review of listed species and critical habitat in the project location(s) and environs referenced above. No further Endangered Species Act coordination of this type 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 coordination. Please contact us at 603-223-2541 if we can be of further assistance.

Sincerely yours,

Michael J. Amaral
Endangered Species Specialist
New England Field Office

Section 6

Historic Places

A review of the National Register of Historic Places information listed on the United States National Park Service's web site indicated that no historic properties are on-site or in the proximity of the facility's discharge of NCCW. The current list of historic properties in Northampton was exported from the National Register of Historic Places website and has been included in this section.

Index by State and City report

Row	STATE	COUNTY	RESOURCE NAME	ADDRESS	CITY	LISTED	MULTIPLE
1	MA	Hampshire	Building at 8--22 Graves Avenue	8--22 Graves Ave.	Northampton	1985-11-07	
2	MA	Hampshire	Coolidge, Calvin, House	19-21 Massasoit St.	Northampton	1976-12-12	
3	MA	Hampshire	Dorsey--Jones House	191 Nonotuck St.	Northampton	2005-09-02	Underground Railroad in Massachusetts MPS
4	MA	Hampshire	Fort Hill Historic District	Roughly South St. from Lyman to Monroe	Northampton	1989-04-07	
5	MA	Hampshire	Grove Hill Mansion	Florence Rd. and Front St.	Northampton	1982-08-11	
6	MA	Hampshire	Manse, The	54 Prospect St.	Northampton	1976-10-14	
7	MA	Hampshire	Miss Florence Diner	99 Main St.	Northampton	1999-09-22	Diners of Massachusetts MPS
8	MA	Hampshire	Northampton Downtown Historic District	Roughly bounded by Hampton, Pearl, Strong, Bedford, Elm, MA 66, and railroad tracks	Northampton	1976-05-17	
9	MA	Hampshire	Northampton Downtown Historic District (Boundary Increase)	East of RR Tracks including 2--10 Bridge and 1--30 Market Sts.	Northampton	1985-07-03	
10	MA	Hampshire	Northampton State Hospital	1 Prince St.	Northampton	1994-07-25	Massachusetts State Hospitals And State Schools MPS
11	MA	Hampshire	Parsons, Shepherd and Damon, Houses Historic District	546,58 and 66 Bridge St.	Northampton	2001-06-06	
12	MA	Hampshire	Ross Farm	123 Meadow St.	Northampton	2008-01-08	Underground Railroad in Massachusetts MPS
13	MA	Hampshire	Smith Alumnae Gymnasium	Smith College campus Green St.	Northampton	1976-04-30	