UNITED STATES ENVIRONMENTAL PROTECTION AGENCY NEW ENGLAND REGION I ONE CONGRESS STREET, SUITE 1100 BOSTON, MASSACHUSETTS 02114 2023

Request for General Permit Authorization to Discharge
Wastewater
(Notice of Intent to be covered by the General Permit
(NOI)

Potable Water Treatment Facility (PWTF) NPDES General Permit No. MAG640000 and NHG640000

A. Facility Information Indicate applicable General Permit for discharge 1. MAG640000 NHG640000 2. Facility Data Phillips Road Pumping Station #3 (Greensand Filter Facility) Facility Name Street/PO Box _83 Phillips Road _____ City _ Lynnfield _ State Massachusetts Zip Code 01940 Latitude 42.545833 Longitude -71.050278 SIC Code(s) 4941 Type of Business Water Supply 3. Facility Mailing Address (if different from Location Address, above) Facility Name Street/PO Box _____ City _____ State _____ Zip Code _____

4. Facility Owner: <u>Legal Name</u> Lynnfield Center Water District						
	Email_					
	Street/PO Box _83 Phillips Road					
	State Massachusetts	Zip Code 01940				
	Contact Person Kenneth Burnham	_Tel # _781-334-3901				
	Owner is (check one): Federal State	_Tribal Private	_			
	Other (describe) Municipal Public Water District					
5.	Facility Operator (if different from above): Legal Name					
	Email					
	Street/PO Box	_ City		_		
	State	Zip Code				
	Contact Person	Tel #				
6.	Currently (Administratively) Covered Under the lor no):	Expired PWTF General Permi	t? (Please	check yes		
	√ Yes No					
a)	Has a prior NPDES permit (either individual or g discharge that is listed on the NOI? ✓ Yes					
b)	Is the discharge a "new discharger" as defined by	40 CFR Section 122.22?	Yes	No 🗸		
c)	Is the facility covered by an individual NPDES pe	ermit for <i>other</i> discharges?	Yes	No 🗸		
	If yes, Permit Number:					
d)	Is there a pending NPDES application (either indidischarge?	ividual or general permit) on fi	le with EP Yes	A for this No ✓		
	If yes, date of submittal: and P	ermit Number, if available				
7.	Attach a topographic map indicating the location water. Please see Figure 1	of the facility and the outfall(s	s) to the re	ceiving		

Name of receiving	na water into which d							
	Name of receiving water into which discharge will occur: Beaverdam Brook							
Check Appropri					Marine Water			
State Water Qua	ality Classification	Class B	_					
Type of Receivi	ng Water Body (e.g.,	stream, river, la	ke, reservoir,	estuary, etc.)	Brook			
Indicate the freq	quency of the discharg	e:						
ency Only	Infrequent (Once/Twi	ce a Year)	√ Intermitte	ent***	Continuous			
**								
***If Other, exp Describe the dis discharges not sp nich attain the eff escription should in filter presses, etc. ration of the entry p the receiving water	charge activities for we pecifically authorized fluent limits and other actude all treatment method if lagoons are used at the pipe; the time of travel for its; and the length of backs.	which the owner in the PWTF G conditions of the lods used on the left facility, please from the entry poi kwash cycle for a	/applicant is s P which need ne general per wastewater pric include the nur nt of the discha	to be author mit.) or to discharge mber and size or arge into the la	ized for discharge including lagoons, of lagoons; the size			
te water, operations see Figure 2 Identify the sour Surface water Number of Outf	rce of the water being Grou	w, treatment uni discharged: ndwater	ts, outfalls, a	nd receiving v	water(s).			
	Type of Receivi Indicate the frequency Only ** ***If Intermitte per year the disc discharges not should infilter presses, etc. ation of the entry per the receiving wate see Attachment Attach a line draw water, operation see Figure 2 Identify the sour Surface water Number of Outf	***If Intermittent (i.e., occurs sometime per year the discharge occurs ~140 da ***If Other, explain	Type of Receiving Water Body (e.g., stream, river, later Indicate the frequency of the discharge: Incy Only Infrequent (Once/Twice a Year) *** ***If Intermittent (i.e., occurs sometimes but not regulate the discharge occurs ~140 days of the year ***If Other, explain Describe the discharge activities for which the owner discharges not specifically authorized in the PWTF Goich attain the effluent limits and other conditions of the scription should include all treatment methods used on the scription should include all treatment methods used on the filter presses, etc. If lagoons are used at the facility, please atton of the entry pipe; the time of travel from the entry pointhe receiving waters; and the length of backwash cycle for a see Attachment #1 Attach a line drawing or flow schematic showing water water, operations contributing to flow, treatment unit see Figure 2 Identify the source of the water being discharged: Surface water Groundwater Number of Outfalls _1 Latitude and Longitude to	Type of Receiving Water Body (e.g., stream, river, lake, reservoir, Indicate the frequency of the discharge: """ """ """ """ """ """ """	Type of Receiving Water Body (e.g., stream, river, lake, reservoir, estuary, etc.) ***Indicate the frequency of the discharge: ***If Intermittent (i.e., occurs sometimes but not regularly as in batch discharge per year the discharge occurs ~140 days of the year ***If Other, explain ***If Other, explain Describe the discharge activities for which the owner/applicant is seeking cover discharges not specifically authorized in the PWTF GP which need to be author nich attain the effluent limits and other conditions of the general permit.) scription should include all treatment methods used on the wastewater prior to discharge filter presses, etc. If lagoons are used at the facility, please include the number and size ation of the entry pipe; the time of travel from the entry point of the discharge into the lather receiving waters; and the length of backwash cycle for any combination of filters.) see Attachment #1 Attach a line drawing or flow schematic showing water flow through the facility e water, operations contributing to flow, treatment units, outfalls, and receiving see Figure 2 Identify the source of the water being discharged: Surface water Groundwater Other (describ Number of Outfalls 1 Latitude and Longitude to the nearest second for ea			

Outfall #	Latitude_	71°3'1"W	Longitude41	.°32'45"N	
Outfall #	Latitude_		Longitude		
Outfall #	Latitude_		Longitude		
(when ap Outfall # Monthly:	plicable) and p 1 samples (Per N goon discharge	I, indicate the proposed sampling proposed consistent times of the MassDEP Letter included as Attace pipe.	month for collecting sam	nples:	
Outfall #					
1. I facility. adjustme	This includes c	ttach additional information (on chemicals (including aluminum, ion, control of biological growth	iron, or phosphorus-cont	taining chem	icals) for pH
2. F	Report any kno	wn remediation activities or wat	ter quality issues in the vi	icinity of the	discharge
As show	n in Figure 3, th	here are no tier classified ongoi	ng remediation activities	within the v	icinity of the
•		e is one open site currently listed is a gas station that was tier class			
3. A	Are aluminum o	compounds or polymers used as	coagulants at this facility	y?*	
				Yes_	No 🗸
*	If answer is "Y	Yes" and the facility was <i>not</i> cov	vered under the PWTF G	P that expire	d on

10/2/14, additional monitoring data and information is required. Please complete Item III.C.12.

4.	Does the facility use any alum-based products for algae control?	*	
		Yes_	No √
	*If answer is "Yes" and the facility was <i>not</i> covered under the P 10/2/14, additional monitoring data and information is required.	•	
5.	Are iron-containing coagulants used at this facility?	Yes_	No √
6.	Does the facility's discharge contain residual chlorine?	√ Yes	No
	[If Yes, EPA will calculate a Total Residual Chlorine efflue	nt limit for your facilit	yl
7.	Does the facility provide treatment to remove arsenic from the ra	w water source? Yes	No √
8. a.	Are phosphorus-containing chemicals added to the treated water	at this facility? Yes	No✓
b.	If answer to 8.a. is Yes, does the facility discharge to Phosphoru	s-Impaired waters? Yes	No
c.	If answer to 8.b. is Yes, provide name of P-Impaired waterbody:		
	Does the facility remove radium or other radioactive substances from the drinking water standards?	om raw water sources to No	comply
Notice and/or the real Attack	Provide the reported or calculated seven day- ten year low flow (76):	Iculation and discussion mitting authority must be mine and/or confirm the shighly recommended to 7Q10 and/or dilution fac	regarding total e 7Q10 o contact ctor.
11. I	For <i>each</i> outfall, provide the following discharge information:		
O	outfall # <u>1</u>		
a)	Design Flow of Facility (in million gallons per day, MGD).0.610 This value will determine the facility's daily maximum flow MGD.		n of 1.0
<i>b</i>)	Discharge Flow (in gallons per day, GPD):		
	Maximum Daily Flow 12,000 GPD Average	ge Monthly Flow2,700	OGPD
c)	TSS (mg/l): Number of samples:(Minimum	of 10 samples)	

		Maxim	um Daily	10	mg/l	Average Mor	nthly	2.0	mg/l
(d)	pH (s.u	.): Number o	of samples:	10	(Minimum of 10	samples)		
	-,	Minim	um 6.5	5*S.	u.	Maximum		s.u.	
ϵ	e)		Residual Chlor um Daily			10	(Minim	um of 10 sar	mples)
			•		•	ch have been prev	iously chl	orinated or	
		contair	n residual ch	lorine		-	·		
						sidual chlorine res	-		
						y that answered "Y he water being trea			
						xpired on 10/2/14)		ansenar gea)	
				•	·				
	a)					d 10 ambient sur			om a
			•		•	ge. For facilities in		•	
				_		total recoverable A	Al in micro	grams per lit	ter.
			-		mitted on a separa	nsisting of four gra	nb samples	taken at	
			_			ighted basis during	_		
			_	_	_	er the start of the b		•	
		b.				urface water sample			
			-		•	arge event. The same	_		
			_	-		completing the NC ient water quality s		-	
					composited vertice		ample noi	ii iakes/iesei	vons,
		c.			•	ling should be reco	orded. Flow	w conditions	at the
			time of ambi	ient water sar	npling should be r	ecorded (or estima			
					then recording the			~	
		e.	and Footnote	e 10 of 3.1.1		tion 2.1.1 for MA for key information			
		f.	-	-	_	e year of the effecti	ive date of	this general	permit
						above may be sub		_	1
			samples. Th	is must be de	enoted with the sul	omitted data.			
	b)	Provide	e a description	n of control m	neasures chemical	substitutions, was	te handling	methods a	nd
	-,					cility to minimize			
		surface	waters. (Incl	lude addition	al sheet(s), if nece	ssary)			
									_

D. Endangered Species Act Engionity Informatio	n		
Using the instructions in Appendix III of the PWTF GP, which facility?	h of the follo	ving criteria apply to you	ur
U.S. Fish and Wildlife Service (USFWS) Criteria: A	В	С	
I. If you selected USFWS criteria B, has consultation with the completed? Yes No	e U.S. Fish an	d Wildlife Service been	
2. If consultation with US Fish & Wildlife Service was complete the discharge is "not likely to adversely affect" listed species			ıg that
Yes No			
 3. Attach documentation of ESA eligibility for USFWS as requested General Permit. Documentation attached? See Attachmed 4. For facilities seeking coverage under the Potable Water Trefirst time, respond to the following questions to assist in ES a) Indicate if the facility discharges into any of the stretches 	ent 5 atment Facili A eligibility	ty General Permit for the for NMFS:	
a) Indicate if the facility discharges into any of the stretches support or provide habitat to either Shortnose or Atlar		-	
Merrimack River (from Essex Dam in Lawrence, Downstream (including Haverhill) to mouth of River)	Yes	No	
Connecticut River (from Turner's Falls, downstream through Holyoke (including Holyoke Dam region)	Yes	No	
Taunton River	Yes	No	
Piscataqua River (in NH)	Yes	No	
b) Has the facility had any previous formal or informal con	sultation with	n NMFS?	
Yes No			
If yes, attach the results of the consultation(s).	Document	ation attached?	

E. National Historic Properties Act Eligibility

on the i	facility site or in	proximity to th	e discharge? Y	es]	No √	
2. Have a	ny State or Triba	l Historic Prese	ervation Officers	been consul	ted in this determination	on?
-	Yes	No 🗸	/			
	If yes, attach the	results of the o	consultation(s).	Docur	mentation attached?	no
3. Which you me	3. Which of the three National Historic Preservation Act scenarios listed in Appendix II, Section III have					
you me	1√	2	3			

1. Are any historic properties listed or eligible for listing on the National Register of Historic Places located

F. Supplemental Information

Please provide any supplemental information, including antidegradation review information applicable to new or increased discharges. Attach any analytical data used to support the application. Attach any certification(s) required by the General Permit.

G. Signature Requirements

The NOI must be signed by the operator in accordance with the signatory requirements of 40 CFR § 122.22 (see below) including the following certification:

I certify under penalty of law that (1) the discharge for which I am seeking coverage under the general permit consists solely of a surface water discharge from a potable water treatment facility; (2) any chemicals used to treat the discharge have been identified in this NOI; and (3) where applicable, the facility has complied with the requirements of this permit specific to the Endangered Species Act and National Historic Preservation Act.

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 gathered and evaluated 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 have no personal knowledge that the information submitted is other than 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.

Signature	4 34		Date 5-31-	2017
Printed Name and Title	REMMEND +	- BURNAGM	Surganisa	L.C.w.D

Federal regulations require this application to be signed as follows:

- 1. For a corporation, by a responsible corporate party;
- 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.

Note: Permits No. MAG640000 and NHG640000 may be found at http://www3.epa.gov/region1/npdes/pwtfgp.html

Н.	"Opt-Out Request" from NetDMR Requirement
1.	Check the box if you are applying for an "opt-out request."
2.	Provide a detailed explanation of the technical or administrative factors that support your request to "opt-out" from the requirement to submit DMRs and reports electronically. (Add additional lines, if necessary.)

List of Attachments

Figures

Figure 1: Project Location Map

Figure 2: Source Water Supply and Treatment Schematic

Figure 3: MassDEP Chapter 21E Sites

Attachments

Attachment 1: Phillips Road Pumping Station No. 3: Treatment Processes

Attachment 2: Letter from MassDEP to District / Reduced Sampling Frequency

Attachment 3: Chemical Additives

Attachment 4: 7Q10 Calculation & Discussion on Total Residual Chlorine and pH Results

Attachment 5: Endangered Species Act Eligibility Information

Figure 1 Project Location Map

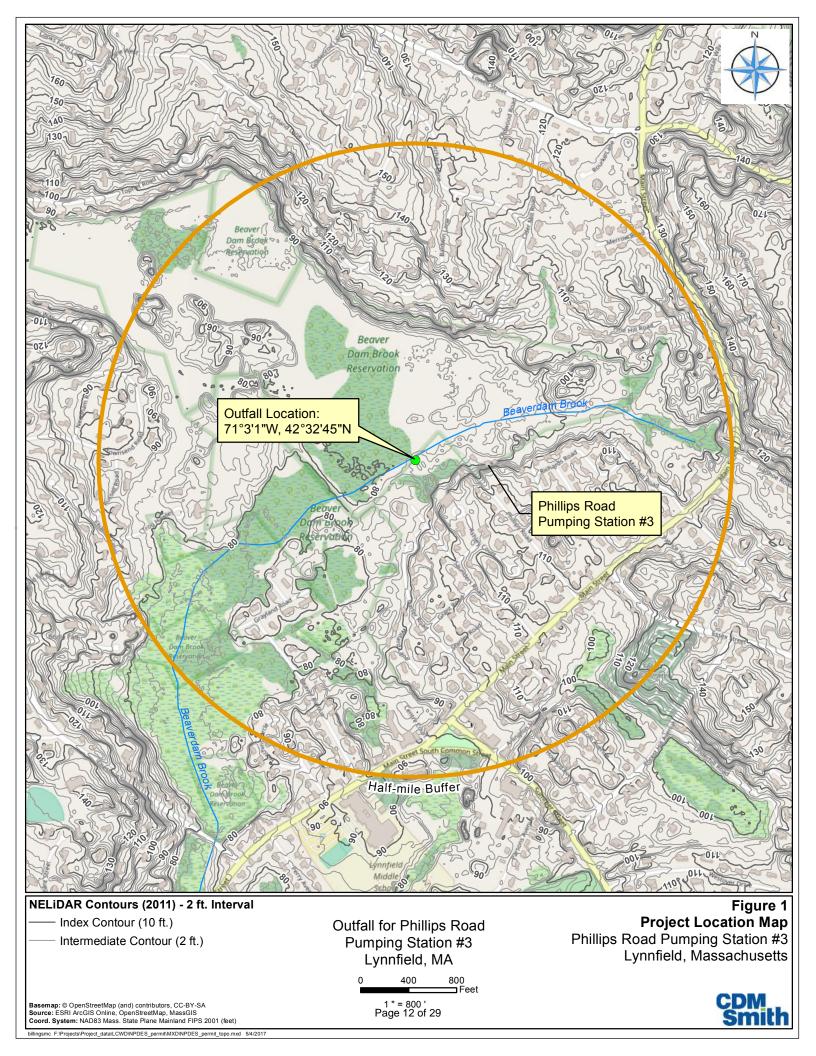
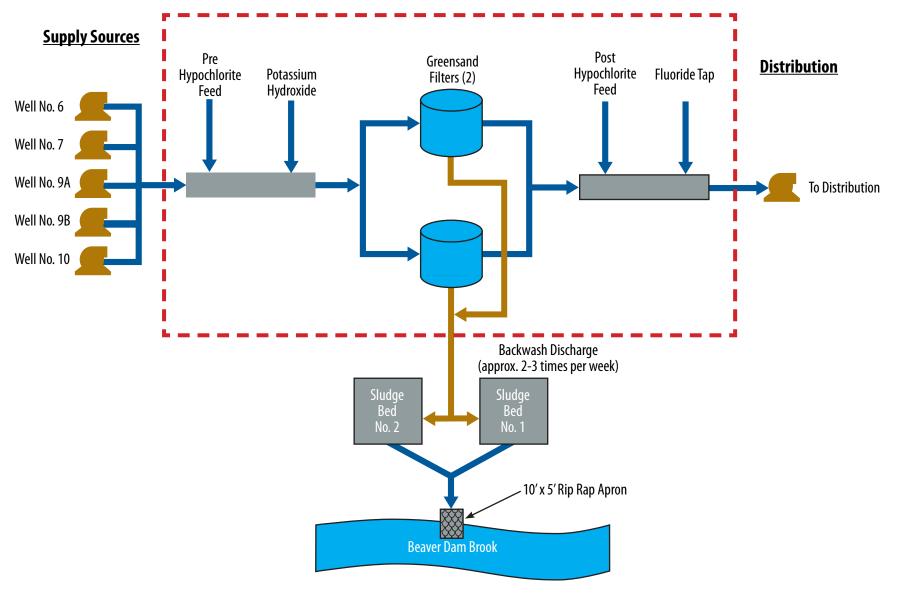


Figure 2 Source Water Supply and Treatment Schematic

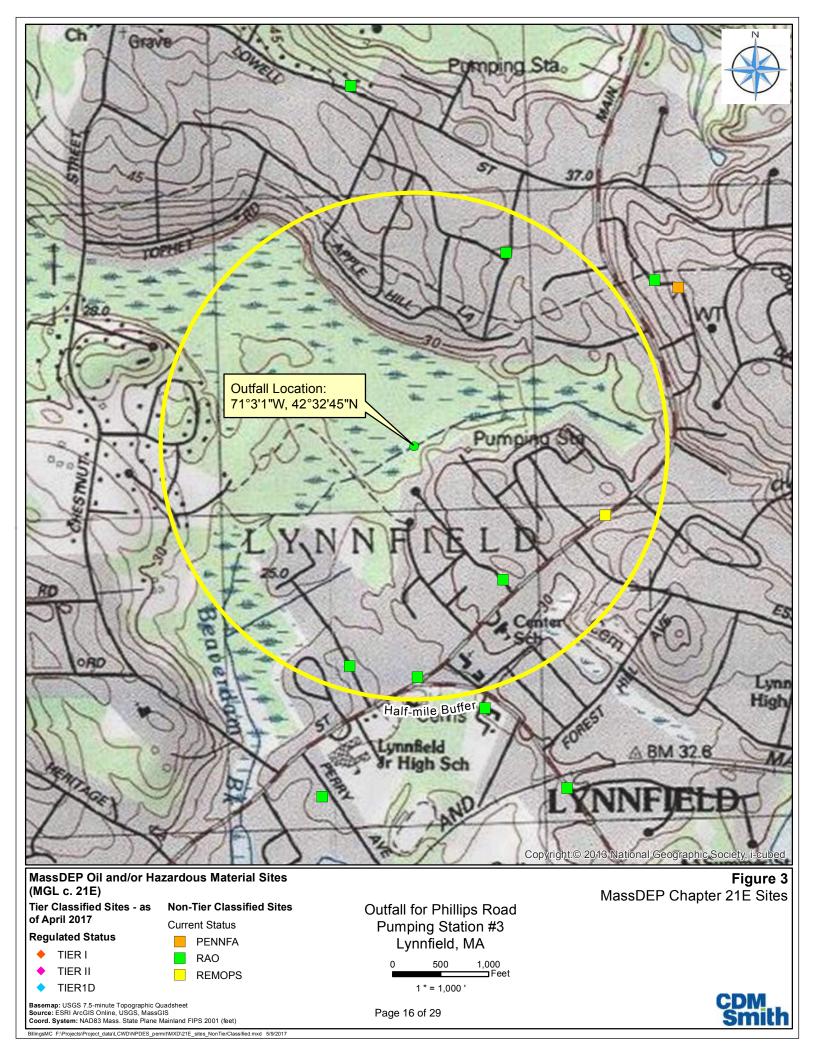
Water Treatment Plant





Lynnfield Center Water District NPDES GP NOI Figure 2 Source Water Supply and Treatment Schematic

Figure 3 MassDEP Chapter 21E Sites



Attachment 1 Phillips Road Pumping Station No. 3: Treatment Processes

Phillips Road Pumping Station No. 3: Treatment Processes

The Phillips Road Pumping Station No. 3 (Phillips Road Well Water Treatment Plant) treatment system consists of conventional water treatment processes including: chemical addition, filtration, and disinfection.

Discharge of Flow from Greensand Filter Backwash Sludge Drying Lagoon

The Phillips Road Pumping Station No. 3 contains two 10' diameter greensand filters; both filters are used for water treatment. The greensand filters require backwashing based on the following conditions:

- 1. Pressure differential
- 2. Iron breakthrough
- 3. Filter run hours

One filter is backwashed at a time. The greensand filters treat water from Well Nos. 6, 7, 9A, 9B and 10.

The backwashing operations produce a waste stream, which is directed to the District's two sludge drying beds (lagoons); discharge water is split between the two lagoons. Each lagoon is approximately 50,000 gallons in volume. The bottom is constructed of bituminous concrete with 12-inch deep layers each of gravel and sand along the entire bottom. Underdrain flow is collected in two 6-inch perforated underdrain pipes running along the bottom. The perforated pipes discharge into a collector box, where they are combined in a 12-inch diameter reinforced concrete pipe, which then discharges across a 10'x5' rip rap apron and into Beaverdam Brook. The invert elevation of the discharge pipe at Beaverdam Brook is 81.17; the upstream pipe elevation at the collection box is 81.40 (USGS Mean Sea Level Datum). The average volume of water per backwash cycle is 7,000 gallons, and the estimated backwash duration is approximately 5.5 minutes long per filter. The time of travel from the entry point of the discharge into the lagoon to the entry point to the receiving waters is approximately 4 hours. The discharges for which this permit is sought, consist solely of effluent discharges from the Phillips Road Pumping Station #3.

Attachment 2 Letter from MassDEP to District / Reduced Sampling Frequency



Commonwealth of Massachusetts Executive Office of Energy & Environmental Affairs

Department of Environmental Protection

One Winter Street Boston, MA 02108 • 617-292-5500

DEVALL PATRICK Governor

RICHARD K. SULLIVAN JR. Secretary

TIMOTHY P MURRAY
Lieutenant Governor

KENNETH L KIMMELL Commissioner

April 25, 2013

Shauna Little US EPA – Region 1 5 Post Office Square, Suite 100 (OEP06-1) Boston, MA 02109-3912

Re:

NPDES General Permit Renewal - MAG640017
Phillips Road Pumping Station #3 in Lynnfield, MA

Dear Ms. Little:

The Department of Environmental Protection, Wastewater Management Program has reviewed the Notice of Intent for this facility to discharge wastewater from drinking water treatment processes. The Department concurs that this facility should be authorized to discharge to Beaverdam Brook, a Class B fresh waterbody in the Charles River Watershed (MA93-30). The Department understands that the EPA has modified the reporting frequency for the facility from once per week to once per month. This is because the facility has reported that the discharges occur with limited frequency and duration.

Number of outfalls:

1

Maximum daily flow:

0.012 million gallons per day

Toxicity test:

Not required at this time

Aluminum:

Not required at this time

Proposed total residual chlorine limits are:

	Discharge Volume gpd	Dilution Factor	TRC Criteria ug/l	TRC Limit ug/l
Max. Daily	12,000	3.5	19	66.5
Ave. Monthly	Report	3.5	11	38.5

Please contact me at 617-556-1029 or Marybeth.Chubb@state.ma.us if you have any questions.

II [1]

Marybeth Chubb

Environmental Analyst, Wastewater Management Program

Cc: Robin Murphy, DEP/CRO

This information is available in alternate format. Call Michelle Waters-Ekanem, Diversity Director, at 617-292-5751. TDD# 1-866-539-7622 or 1-617-574-6868

MassDEP Website: www.mass.gov/dep

Printed on Recycled Paper

Summary of specific numeric effluent limitations and monitoring requirements: NPDES General Permit for Potable Water Treatment Facility – No. MAG640017 for Phillips Road Pumping Station #3 in Lynnfield, MA

This summary is provided as a convenience based on the submitted NOI information and it does not replace the effluent limitations and monitoring requirements, and other conditions set forth in the PWTFGP.

During the period beginning on the effective date and lasting through expiration, the Permittee is authorized to discharge potable water treatment facility wastewater through Outfall 001. The discharge shall be limited and monitored as summarized below.

Effluent Characteristics		Discharge Limitations		Monitoring Requirements	
Parameter	Units	Avg. Monthly	Max Daily	Monitoring Frequency	Sample Type
Flow	MGD	Report	0.012	1/Month	Estimate or Totalizer
TSS	mg/l	30	50	1/Month	Composite
pH (Class A and B)	std units	6.5-8.3 range		1/Month	Grab
Total Residual Chlorine ¹	μg/l	38.5	66.5	1/Month	Grab
LC ₅₀ & NOEC	% .	See Part 1.2.4 of the PWTFGP			Composite

¹ The facility's dilution factor for Total Residual Chlorine is 3.5.

Attachment 3 Chemical Additives

Lynnfield Center Water District NPDES GP NOI Attachment 3

The following are water additives used at the facility:

Caustic (potassium hydroxide) addition to raise alkalinity and pH for corrosion control

Sodium hypochlorite injection into the raw water as an oxidizer and filter effluent for primary disinfection and residual chlorine

Fluoride addition into the filter effluent for dental health benefits

Attachment 4 7Q10 Calculation Discussion on Total Residual Chlorine and pH Results

7 Day 10 Year Low Flow (7Q10) Calculation for Phillips Road Pumping Station #3 (Greensand Filter Facility), Lynnfield, MA

The USGS StreamStats report was used to determine the 7Q10 at the discharge point of Phillips Road Pumping Station (Greensand Filter Facility) to the Beaver Dam Brook (https://streamstatsags.cr.usgs.gov/streamstats/). Using the interactive USGS map, the drainage area at the point of discharge was selected, as shown in the figure below.

StreamStats Report

Region ID:

МΑ

Workspace ID:

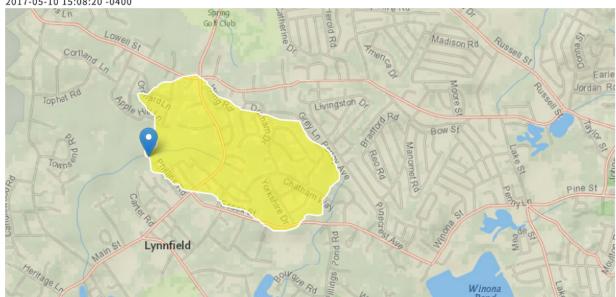
MA20170510130752240000

Clicked Point (Latitude, Longitude):

42.54633, -71.04918

Time:

2017-05-10 15:08:20 -0400



https://streamstatsags.cr.usgs.gov/streamstats/

USGS StreamStats defined the **7Q10** as **0.0566** ft³/second.

<u>Discussion on total residual chlorine results for Phillips Road Pumping Station #3 (Greensand Filter</u> Facility), Lynnfield, MA

Using the 7Q10 value of 0.0566 cfs, the acute value for daily maximum total chlorine residual and the chronic value for average monthly use is calculated as follows:

Daily Max Flow			Avg Mo	Avg Monthly Flow $^{(1)}$			
QR	0.0566	cfs	QR	0.0566	cfs		
QP	0.0120	mgd	QP	0.0027	mgd		
DF	4.01		DF	14.5			
Daily Max Chlorine			Avg Mon	Avg Monthly Chlorine			
Acute	19	ug/L	Chronic	11	ug/L		
w/DF	76.8	ug/L	w/DF	159.8	ug/L		

(1) The average monthly flow is based on the average flow used for backwashing per month. For example, in the month of March 2016, the District backwashed on 14 of the 31 days in the month. The total volume discharged in the month of March was 101,191 gal. Over 31 days, this averages to 3,264 gpd. Over the past ten months, the monthly average, calculated in this manner, is 2,700 gpd or 0.0027 mgd.

The Total Residual Chlorine maximum daily use value reported on the NOI (181 ug/l) was the highest result within the past 10 months, with the exception of an outlier value of 1,980 recorded in October 2016. Between July 2013 and June 2016, out of 35 months' worth of data, 26 months reported ND for total residual chlorine. Between June 2016 and October 2016, the District was running their treatment plant 24 hours a day to keep up with high water demands during the drought conditions. Filter run times were extremely high compared to normal operating conditions. Once the summer months tapered off, the District's total residual chlorine returned to 'normal' results, mostly ND and 20 ug/l. The recent drought caused the District to operate their system under stressed conditions and high filter run times. Moving forward, the District does not anticipate having to operate their system under these conditions.

The following table provides data from the past 10 months (July 2016 – April 2017), and excludes the outlier as described above:

Average Chlorine, Total (ug/l)	41
Max Chlorine, Total (ug/l)	181
Min Chlorine, Total (ug/l)	<20

Discussion on pH results for Phillips Road Pumping Station #3 (Greensand Filter Facility), Lynnfield, MA

The minimum value for pH reported on the NOI (6.5 s.u.) was the minimum result within the past 10 months, with the exception of an outlier value of 6.4 s.u. recorded in November 2016. Upon review of backwash water quality data from July 2013 through April 2017, it is evident that this value of 6.4 s.u. is an outlier. Since November 2016, the pH values have been within the required pH range of 6.5-8.3 (per General Permit Section 2.1.1).

The following table provides data from the past 10 months (July 2016 – April 2017), and excludes the outlier as described above:

 Average pH
 7.3

 Max pH
 7.7

 Min pH
 6.5

Attachment 5 Endangered Species Act Eligibility Information

Endangered Species Act Eligibility Information

The USFWS Information, Planning and Conservation (IPaC) online system was used to develop a preliminary determination of federally listed species within the discharge area. It was determined that the Northern Long-Eared Bat is a threatened species within the discharge area. Using the best scientific data and commercial data available, the effect of the discharge and related activities on listed species and critical habitat have been evaluated. Based on these evaluations, a determination has been made that the discharge and related activities will have no affect on the Northern Long-Eared Bat.

The proposed activities do not include:

- 1) tree removal (i.e. cutting down, harvesting, destroying, trimming, or manipulating in any other way the trees, saplings, snags, or any other form of woody vegetation likely to be used by northern long-eared bats), and
- 2) do not take place within Northern Long-Eared Bat (NLEB) hibernacula,

and are therefore not prohibited under the U.S. Fish & Wildlife's (USFWS) Northern Long-Eared Bat 4(d) Rule. The final 4(d) Rule was published in the Federal Register on January 14, 2016. The 4(d) Rule "tailors protections to areas affected by white-nose syndrome during the bat's most sensitive life stages. The rule is designed to protect the bat while minimizing regulatory requirements for landowners, land managers, government agencies and others within the species' range." A permit from the USFWS is not necessary. Per the 4 (d) rule, the applicant may proceed with the activity, and does not need to contact the USFWS.