

04-124



# BATG

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## Environmental

October 24, 2005

Mr. Mike O'Brien  
U.S. Environmental Protection Agency  
RGP-NOC Processing  
Municipal Assistance (CMU)  
1 Congress Street  
Suite 1100 (OEP-CPE)  
Boston, MA 02114-2033  
*Sent via facsimile (617) 918-0505*

Re: Notice of Intent of Remediation General Permit (RGP)  
Massachusetts Highway Department Project No. 600904-04  
Route 146/I-290 Interchange (Brosnihan Square)  
NPDES Exclusion MA#051-032

Dear Mr. O'Brien:

BATG Environmental, Inc. is pleased to present this Notice of Intent of Remediation General Permit (RGP) for NPDES Exclusion Permit Number 051-032. This permit is being requested to support construction-dewatering activities to be conducted on the site for treatment and discharge to the Blackstone River. The Project is being conducted for the Massachusetts Highway Department for roadway reconstruction and related work at the Route 146/I-290 Interchange in Worcester, Massachusetts.

### Project Contacts

BATG is the Environmental Consultant/Subcontractor to J.F. White Contracting, the General Contractor. The Massachusetts Highway Department (MHD) is considered the owner of the project. Below is the contact information for each of the entities listed above. All correspondence related to this submittal should be forwarded to the parties below.

BATG Environmental  
448 Broadway  
Taunton, MA 02780  
Phone: 508-824-7412  
Fax: 508-880-7565  
Contact: Lewis Conley

J.F. White Contracting Co.  
10 Burr Street  
Framingham, MA 01701  
Phone (508) 879-4700  
Fax: (617) 558-0460  
Contact: John Felteau

Mass Highway Department  
10 Park Plaza  
Boston, MA 02110  
Phone: (617) 973-7500  
Fax: (617) 973-8038  
Contact: Pat Trombly

**B. Suggested Form for Notice of Intent (NOI) for the Remediation General Permit**

1. General site information. Please provide the following information about the site:

a) Name of facility/site: Route 146 / I-290 Interchange (Brosnihan Square)		Facility/site address: Route 146 / I-290 Interchange		
Location of facility/site: Longitude: 71.79 latitude: 42.23	Facility SIC code(s):	Street: Route 146 / I-290 Interchange		
b) Name of facility/site owner: Massachusetts Highway Department		Town: Worcester		
Email address of owner: Patricia.Trombly@MHD.state.ma.us		State: MA	Zip: 01604	County: Worcester
Telephone no. of facility/site owner: (617) 973-7309		Owner is (check one): 1. Federal ___ 2. State/Tribal <input checked="" type="checkbox"/> 3. Private ___ 4. other, if so, describe:		
Fax no. of facility/site owner: (617) 973-8038				
Address of owner (if different from site): Street: 10 Park Plaza				
Town: Boston	State: MA	Zip: 02116	County: Suffolk	
c) Legal name of operator: BATG Environmental, Inc.		Operator telephone no: (508) 824-7412		
		Operator fax no.: (508) 880-7565	Operator email: lconley@batgenvironmental.com	
Operator contact name and title: Lewis Conley, Vice President				

4) If hydrostatic testing, total volume of the discharge (gals):	5) Is the discharge intermittent <input checked="" type="checkbox"/> or seasonal _____? Is discharge ongoing Yes _____ No <input checked="" type="checkbox"/> ?
c) Expected dates of discharge (mm/dd/yy): start <u>10/10/05</u> end <u>12/31/08</u>	
d) Please attach a line drawing or flow schematic showing water flow through the facility including: 1. sources of intake water, 2. contributing flow from the operation, 3. treatment units, and 4. discharge points and receiving waters(s).	

3. Contaminant information. In order to complete this section, the applicant will need to take a minimum of one sample of the untreated water and have it analyzed for all of the parameters listed in Appendix III. Historical data, (i.e., data taken no more than 2 years prior to the effective date of the permit) may be used if obtained pursuant to: i. Massachusetts' regulations 310 CMR 40.0000, the Massachusetts Contingency Plan ("Chapter 21E"); ii. New Hampshire's Title 50 RSA 485-A: Water Pollution and Waste Disposal or Title 50 RSA 485-C: Groundwater Protection Act; or iii. an EPA permit exclusion letter issued pursuant to 40 CFR 122.3, provided the data was analyzed with test methods that meet the requirements of this permit. Otherwise, a new sample shall be taken and analyzed.

a) Based on the analysis of the sample(s) of the untreated influent, the applicant must check the box of the sub-categories that the potential discharge falls within.

Gasoline Only	VOC Only	Primarily Metals	Urban Fill Sites <input checked="" type="checkbox"/>	Contaminated Sumps	Mixed Contaminants	Aquifer Testing
Fuel Oils (and Other Oils) only	VOC with Other Contaminants	Petroleum with Other Contaminants	Listed Contaminated Sites	Contaminated Dredge Condensates	Hydrostatic Testing of Pipelines/Tanks	Well Development or Rehabilitation

b) Based on the analysis of the untreated influent, the applicant must indicate whether each listed chemical is believed present or believed absent in the potential discharge. Attach additional sheets as needed.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
1. Total Suspended Solids		<input checked="" type="checkbox"/>	7	grab		5	170			
2. Total Residual Chlorine	<input checked="" type="checkbox"/>									
3. Total Petroleum Hydrocarbons		<input checked="" type="checkbox"/>	7	Grab	8100	500	3200			
4. Cyanide	<input checked="" type="checkbox"/>									
5. Benzene		<input checked="" type="checkbox"/>	7	Grab	8260	1	2.1			
6. Toluene		<input checked="" type="checkbox"/>	7	Grab	8260	1	1.3			
7. Ethylbenzene		<input checked="" type="checkbox"/>	7	Grab	8260	1	ND			
8. (m,p,o) Xylenes		<input checked="" type="checkbox"/>	7	Grab	8260	1	ND			
9. Total BTEX <sup>4</sup>		<input checked="" type="checkbox"/>	7	Grab	8260	1	3.3			

<sup>4</sup>BTEX – Sum of Benzene, Toluene, Ethylbenzene, total Xylenes.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily Value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
25. 1,1,1 Trichloroethane	✓									
26. 1,1,2 Trichloroethane	✓									
27. Trichloroethylene	✓									
28. Vinyl Chloride	✓									
29. Acetone	✓									
30. 1,4 Dioxane	✓									
31. Total Phenols	✓									
32. Pentachlorophenol	✓									
33. Total Phthalates <sup>5</sup> (Phthalate esters)	✓									
34. Bis (2-Ethylhexyl) Phthalate [Di-(ethylhexyl) Phthalate]	✓									
35. Total Group I Polycyclic Aromatic Hydrocarbons (PAH)		✓	7	Grab	8270	10	nd			
a. Benzo(a) Anthracene		✓	7	Grab	8270	10	nd			
b. Benzo(a) Pyrene		✓	7	Grab	8270	10	nd			
c. Benzo(b)Fluoranthene		✓	7	Grab	8270	10	nd			
d. Benzo(k) Fluoranthene		✓	7	Grab	8270	10	nd			
e. Chrysene		✓	7	Grab	8270	10	nd			

<sup>5</sup>The sum of individual phthalate compounds.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Average daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
f. Dihenzo(a,h) anthracene		✓	7	Grab	8270	10	nd			
g. Indeno(1,2,3-cd) Pyrene		✓	7	Grab	8270	10	nd			
36. Total Group II Polycyclic Aromatic Hydrocarbons (PAH)		✓	7	Grab	8270	10	nd			
h. Acenaphthene		✓	7	Grab	8270	10	nd			
i. Acenaphthylene		✓	7	Grab	8270	10	nd			
j. Anthracene		✓	7	Grab	8270	10	nd			
k. Benzo(ghi) Perylene		✓	7	Grab	8270	10	nd			
l. Fluoranthene		✓	7	Grab	8270	10	nd			
m. Fluorene		✓	7	Grab	8270	10	nd			
n. Naphthalene-		✓	7	Grab	8270	10	nd			
o. Phenanthrene		✓	7	Grab	8270	10	nd			
p. Pyrene		✓	7	Grab	8270	10	nd			
37. Total Polychlorinated Biphenyls (PCBs)	✓									
38. Antimony	✓									
39. Arsenic	✓									
40. Cadmium	✓									
41. Chromium III	✓									
42. Chromium VI	✓									

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None

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
43. Copper	✓									
44. Lead		✓	?	Grab	7421	1	100			
45. Mercury	✓									
46. Nickel	✓									
47. Selenium	✓									
48. Silver	✓									
49. Zinc	✓									
50. Iron	✓									
Other (describe):										

c) For discharges where metals are believed present, please fill out the following:

<p><i>Step 1:</i> Do any of the metals in the influent have a <b>reasonable potential</b> to exceed the effluent limits in Appendix III (i.e., the limits set at zero to five dilutions)? Y ___ N <input checked="" type="checkbox"/></p>	<p>If yes, which metals?</p>
<p><i>Step 2:</i> For any metals which have <b>reasonable potential</b> to exceed the <b>Appendix III</b> limits, calculate the <b>dilution factor (DF)</b> using the formula in Part I.A.3.c) (step 2) of the NOI instructions or as determined by the State prior to the submission of this NOI. What is the dilution factor for applicable metals? Metals: _____ DF: _____</p>	<p>Look up the limit calculated at the corresponding dilution factor in <b>Appendix IV</b>. Do any of the metals in the <b>influent</b> have the potential to exceed the corresponding <b>effluent</b> limits in Appendix IV (i.e., is the influent concentration above the limit set at the calculated dilution factor)? Y ___ N <input checked="" type="checkbox"/> If "Yes," list which metals:</p>

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c) Attach a detailed map(s) indicating the site location and location of the outfall to the receiving water:  
 1. For multiple discharges, number the discharges sequentially.  
 2. For indirect dischargers, indicate the location of the discharge to the indirect conveyance and the discharge to surface water  
 The map should also include the location and distance to the nearest sanitary sewer as well as the locus of nearby sensitive receptors (based on USGS topographical mapping), such as surface waters, drinking water supplies, and wetland areas.

d) Provide the state water quality classification of the receiving water SB,

e) Provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water \_\_\_\_\_ cfs  
 Please attach any calculation sheets used to support stream flow and dilution calculations.

f) Is the receiving water a listed 303(d) water quality impaired or limited water? Yes  No  If yes, for which pollutant(s)?  
 Noxious Aquatic Plants, Pathogens, Turbidity, Metals, Organic Enrichment, Priority Organics, Nutrients, pH, Lead, Suspended Solids, Taste, Odor & Color, etc.

Is there a TMDL? Yes  No  If yes, for which pollutant(s)?  
 Phosphorus and Total Phosphorus

6. Results of Consultation with Federal Services: Please provide the following information according to requirements of Part I.B.4 and Appendices II and VII.

a) Are any listed threatened or endangered species, or designated critical habitat, in proximity to the discharge? Yes  No   
 Has any consultation with the federal services been completed? No  or is consultation underway? No   
 What were the results of the consultation with the U.S. Fish and Wildlife Service and/or National Marine 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?

b) Are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility or site or in proximity to the discharge?  
 Yes  No  Have any state or tribal historic preservation officer been consulted in this determination (Massachusetts only)? Yes  No

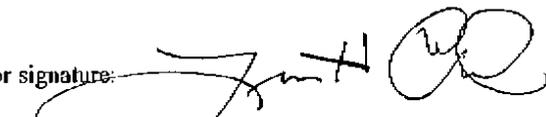
**7. Supplemental information. :**

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

See Attached.

**8. Signature Requirements:** The Notice of Intent must be signed by the operator in accordance with the signatory requirements of 40 CFR Section 122.22, including the following 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 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/Site Name: Route 146 / I-290 Interchange (Brosnihan Square)
Operator signature: 
Title: VICE PRESIDENT
Date: 10/24/05



**Interchange Construction – Interstate 290 and Route 146 (Brosnihan Square)  
Worcester, Massachusetts**

**Project file: 6000904-04  
Federal Aid Project No.: NH-001S(297)  
Contract No.: 36494**

**Longitude: 42° 14' 43"N    Latitude: 71° 48' 09"W**