Remediation General Permit
Appendix V

Notice of Intent (NOI)
Suggested Forms & Instructions

I. Notice of Intent (NOI) Suggested Form and Instructions

In order to be covered by the remediation general permit (RGP), applicants must submit a completed Notice of Intent (NOI) to EPA Region I and the appropriate state agency. The owner or operator, as defined by 40 CFR § 122.2, means the owner or operator of any "facility or activity" subject to regulation under the NPDES program.

The following are three general "**operator"** scenarios (variations on any of these three are possible, especially as the number of owners and contractors increases):

▸ ***"****Owner" as "Operator" - sole permittee.* The property owner designs the structures and control systems for the site, develops and implements the BMPP, and serves as general contractor (or has an on-site representative with full authority to direct day-to-day operations). Under the definition of operator, in this case, the "Owner" would be considered the "operator" and therefore the only party that needs permit coverage. Everyone else working on the site may be considered subcontractors and do not need to apply for permit coverage.

▸ *"Contractor" as "Operator" - sole permittee.* The property owner hires a company (e.g., a contractor) to design the project and oversee all aspects, including preparation and implementation of the BMPP and compliance with the permit (e.g., a "turnkey" project). Here, the contractor would likely be the only party needing a permit. Similarly, EPA expects that property owners hiring a contractor or consultant to perform groundwater remediation work (e.g., due to a leaking fuel oil tank) would come under this type of scenario. EPA believes that the contractor, being a professional in the industry, should be the responsible entity rather than the individual. The contractor is better equipped to meet the requirements of both applying for permit coverage and developing and properly implementing the plans needed to comply with the permit. However, property owners would also meet the definition of "operator" and require permit coverage in instances where they perform any of the required tasks on their personal properties.

▸ *"Owner" and "Contractor" as "Operators" - co-permittees.* The owner retains control over any changes to site plans, BMPPs, or wastewater conveyance or control designs, but the contractor is responsible for conducting and overseeing the actual activities (e.g., excavation, installation and operation of treatment train, etc.) and daily implementation of BMPP and other permit conditions. In this case, both parties need to apply for coverage.

Generally, a person would not be considered an "operator," and subsequently would not need permit coverage, if: 1) that person is a subcontractor hired by, and under the supervision of, the owner or a general contractor (e.g., if the contractor directs the

subcontractor's activities on-site, it is probably not an operator); or 2) the person's activities would otherwise result in the need for coverage under the RGP but another operator has legally assumed responsibility for the impacts of project activities.

A. Instructions for the Suggested Notice of Intent (NOI) - At a minimum, the Notice of Intent must include the following for each individual facility or site. Additional information may be attached as needed.

1. General facility/site information.

a) Provide the facility/site name, mailing address, and telephone and fax numbers. Provide the facility Standard Industrial Classification (SIC) code(s), which can be found online at http://www.osha.gov/pls/imis/sic_manual.html. Provide the site location, including longitude and latitude.

b) Provide the facility/site owner's name, address, email address, telephone and fax numbers, if different from the site information. Indicate whether the owner is a Federal, State/Tribal, private, or other entity.

c) Provide the site operator's (e.g., contractor's) name, mailing address, telephone and fax numbers, and email address if different from the owner's information.

d) For the site for which the application is being submitted, indicate whether:

1) a prior NPDES permit exclusion has been granted for the discharge (if so, provide the tracking number of the exclusion letter);
2) a prior NPDES application (Form 1 & 2C – for reference, please visit http://www.epa.gov/region1/npdes/epa_attach.html) has ever been filed for the discharge (if so, provide the tracking number and date that the application was submitted to EPA);
3) the discharge is a "new discharge" as defined by 40 CFR 122.2; and
4) for sites in Massachusetts, is the discharge covered under the Massachusetts Contingency Plan (MCP) 310 CMR 40.0000 and exempt from state permitting.

e) Indicate whether there is any ongoing state permitting, licensing, or other action regarding the facility or site which is generating the discharge. If "yes," provide any site identification number assigned by the state of NH or MA, any permit or license number assigned, and the state agency contact information (e.g. name, location, telephone no.).

f) Indicate whether or not the facility is covered by other EPA permits including:

1) the Multi-Sector General Permit (MSGP) http://cfpub.epa.gov/npdes/stormwater/msgp.cfm;
2) the Final NPDES General Permit for Dewatering Activity Discharges in Massachusetts and New Hampshire http://www.epa.gov/region1/npdes/dewatering.html;
3) the EPA Construction General Permit http://cfpub.epa.gov/npdes/stormwater/cgp.cfm;
4) an individual NPDES permit; or
5) any other water quality-related individual or general permit.

If so, provide permit tracking number(s).

g) Indicate if the site/facility discharge(s) to an Area of Critical Environmental Concern (ACEC), as shown on the tables and maps in Appendix I.

h) Based on the nature of the facility/site and any historical sampling data, the applicant must indicate which of the sub-categories within which the potential discharge falls.

2. Discharge information.

a) Describe the discharge activities to be covered by the permit. Attach additional sheets as needed.

b) Provide the following information about each discharge:

1) the number of discharge points;
2) the maximum and average flow rate of the discharge in cubic feet per second. For the average flow magnitude, include the units and appropriate notation if this value is a calculated design value or estimate if technical/design information is not available;
3) the latitude and longitude of each discharge with an accuracy of 100 feet (see EPA's siting tool at: http://www.epa.gov/tri/report/siting_tool);
4) the total volume of potential discharge (gal), only if hydrostatic testing;
5) whether the discharge(s) is intermittent or seasonal and if ongoing.

c) Provide the expected start and end dates of discharge (month/day/year).

d) 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 the NOI, the applicant will need to take a minimum of one sample of the untreated water and have it analyzed for the parameters applicable to the sub-category into which the discharge falls, as listed in Appendix III of the permit and selected in Part 1 of the NOI form, except as noted below.

Permittees shall provide additional sampling results with the NOI if such sampling already exists, or if the permittee has reason to believe the site contains additional contaminants not listed in Appendix III for that sub-category or contains additional contaminants not included in Appendix III.

The applicant may use historical data as a substitute for the new sample if the data was collected no more than 2 years prior to the "Submittal of the NOI" and if collected pursuant to:

i. for sites in Massachusetts, 310 CMR 40.0000, the Massachusetts Contingency Plan ("Chapter 21E");

ii. for sites in New Hampshire, New Hampshire's Title 50 RSA 485-A: Water Pollution and Waste Disposal or Title 50 RSA 485-C: Groundwater Protection Act;

a) 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.

Based on the required sampling and analysis, the applicant must fill in the table, or provide a narrative description, with the following additional information for each chemical that is believed present (chemical that violate EPA's criteria limitations):

1) the number of samples taken (minimum of one sample for applicable parameters per Appendix III);
2) the type of sample (e.g. grab, composite, etc.);
3) the analytical method used, including the method number;
4) the minimum level (ML) of the method used (based on Appendix VI);
5) the maximum daily amount (concentration (ug/l) and mass (kg)) of each pollutant, based on the sampling data

lb/day (pounds per day) equals flow (in million gallons per day, MGD) times concentration in milligrams per liter (mg/l) times 8.34.
Example: 2.5 MGD x 30 mg/l TSS x 8.34 = 625.5 lb TSS/day
MGD = gallons per minute (gpm) x 0.00144
1 kg = 2.2 lbs

And;
6) the average daily amount (concentration and mass) of each pollutant, based on the sampling data.

If the results of any sampling indicate that pollutants exist in addition to those listed in Appendix III of the RGP of the permit, the applicant must also describe those contaminants on the NOI in boxes in section I.3.c.)on the line marked "Other," or use additional sheets as needed. Subsequently, EPA may require monitoring for such parameters or will decide if an individual permit is necessary.

c) Determination of Reasonable Potential and Allowable Dilution for Discharges of Metals:

If any *metals* are believed present in the potential discharge to freshwater[1], the applicant must follow the procedures below to determine the dilution factor for each metal.

Step 1: Initial Evaluation

1) The applicant must evaluate all metals believed present in the discharge subject to this permit, including "naturally occurring" metals such as dissolved and/or total Iron. Applicants must enter the highest detected concentration of the metal at zero dilution in the "Maximum value" column of the NOI.

2) Based on the maximum concentration of each metal, the applicant must perform an initial evaluation assuming zero dilution in the receiving water. The applicant must compare the metals concentrations in the untreated (intake) waters to the effluent limits contained in Appendix III.

[1]Dilution factors may be available for discharges to saline waters but only with approval of the flow modeling information from the State prior to the submission of the NOI.

i. If potential discharges (untreated influent) with metals contain concentrations above the concentration limits listed in Appendix III, applicant must proceed to step 2.
ii. If potential discharges (untreated influent) with metals contain concentrations below the concentrations listed in Appendix III, the applicant may skip step 2 and those metals will **not** be subject to permit limitations or monitoring requirements.

Step 2: Calculation of Dilution Factor

1) **For applicants in NH**: If a metal concentration in a potential discharge (untreated influent) to **freshwater** exceeds the limits in Appendix III with zero dilution, the applicant shall evaluate the potential concentration considering a dilution factor (DF) using the formula below. **<u>For sites in New Hampshire, the applicant must contact NH DES to determine the 7Q10 and dilution factor.</u>**

DF = [(Qd + Qs)/Qd] x 0.9

Where:	**DF**	**= Dilution Factor**
	Qd	**= Maximum flow rate of the discharge in cubic feet per second (cfs) (1.0 gpm = .00223 cfs)**
	Qs	**= Receiving water 7Q10 flow, in cfs, where 7Q10 is the annual minimum flow for 7 consecutive days with a recurrence interval of 10 years**
	0.9	= **Allowance for reserving 10% of the assets in the receiving stream as per Chapter ENV-Wq 1700, Surface Water Quality Regulations**

i. Using the DF calculated from the formula above, the applicant must refer to the corresponding dilution range column in Appendix IV. The applicant then compares the maximum concentration of the metal entered on the NOI to the corresponding total recoverable metals limits listed in Appendix IV. Please note that for this reissuance the applicant will be permitted to determine a limit using any fraction within the 1-5 dilution factor range times the metal limit (for all regulated metals). For example: if the DF is 1.5, the Iron limit is 1,500 ug/L; if the DF is 1.5, the antimony limit is 8.4, etc. All limits above a dilution factor of 5 are maintained.

1. If a metal concentration in the potential discharge (untreated influent) is less than the corresponding limit in Appendix IV, the metal will **not** be subject to permit limitations or monitoring requirements.
2. If a metal concentration in the potential discharge (untreated influent) is equal to or exceeds the corresponding limit in Appendix IV, the applicant must reduce it in the effluent to a concentration below the applicable total recoverable metals limit in Appendix IV prior to discharge.

ii. In either case, the applicant must submit the results of this calculation as part of the NOI. EPA and NH DES will review the proposed effluent limitations for each metal and approve or disapprove the limits in the notification of coverage letter to the applicant.

2) **For applicants in MA**: If a metal concentration in a potential discharge (untreated influent) to **freshwater** exceeds the limits in Appendix III with zero dilution, the applicant must evaluate the potential concentration considering a dilution factor (DF) using the formula below.

DF = (Qd + Qs)/Qd

Where: **DF** **= Dilution Factor**
Qd **= Maximum flow rate of the discharge in cubic feet per second (cfs) (1.0 gpm = .00223 cfs)**
Qs **= Receiving water 7Q10 flow (cfs) where 7Q10 is the minimum flow (cfs) for 7 consecutive days with a recurrence interval of 10 years**

i. The applicant may estimate the 7Q10 for receiving water by using available information such as nearby USGS stream gauging stations directly or by application of certain "flow factors," using historic streamflow publication information, calculations based on drainage area, information from state water quality offices, or other means. In many cases Massachusetts has calculated 7Q10 information using "flow factors" for a number of streams in the state. The source of the low flow value(s) used by the applicant must be included on NOI application form. Flow data can also be obtained from web applications such as the one located at: http://ma.water.usgs.gov/streamstats/.

ii. Using the DF calculated from the formula above, the applicant must refer to the corresponding dilution range column in Appendix IV. The applicant then shall compare the maximum concentration of each metal entered on the NOI to the corresponding total recoverable metals limit listed in Appendix IV. Please note that for this reissuance the applicant will be permitted to determine a limit using any fraction of the 0-5 of DF times the metal limit (for all regulated metals). For example: if the DF is 1.5, the Iron limit is 1,500 ug/L; if the DF is 1.5, the antimony limit is 8.4, etc. Not to exceed DF of 5.

1. If a metal concentration in the potential discharge (untreated influent) is less than the corresponding limit in Appendix IV, the metal will **not** be subject to permit limitations or monitoring requirements.
2. If a metal concentration in a potential discharge (untreated influent) is equal to or exceeds the corresponding limit in Appendix IV, the applicant must reduce it in the effluent to a concentration below the applicable total recoverable metals limit in Appendix IV prior to discharge.

iii. The applicant must submit the results of this calculation as part of the NOI. EPA (and MassDEP where the discharge is not covered by 310 CMR 40.0000) will review the proposed effluent limitations for each metal and approve or disapprove the limits in the notification of coverage letter to the applicant.

4. Treatment system information.

a) Provide a written description of the treatment train and how the system will be set up for each discharge and attach a schematic of the proposed or existing treatment system(s).
b) Identify each major treatment unit (e.g. frac tanks, filters, air stripper, liquid phase/vapor phase activated carbon, oil/water separators, etc.) by checking all that apply and describing any additional equipment not listed. Attach additional sheets as needed.
c) Provide the proposed average and maximum flow rates (in gallons per minute, gpm) for the discharge and the design flow rates (in gpm) of the treatment system. Clearly identify the component of the treatment with the most limited flow, i.e., the part of the treatment train that establishes the design flow.
d) Describe any chemical additives being used, or planned to be used, and attach MSDS sheets for each. EPA may request further information regarding the chemical composition of the additive, potential toxic effects, or other information to insure that approval of the use of the additive will not cause or contribute to a violation of State water quality standards. Approval of coverage under the RGP will constitute approval of the use of the chemical additive(s). If coverage of the discharge under the RGP has already been granted and the use of a chemical additive becomes necessary, the permittee must submit a Notice of Change (NOC).

5. Receiving surface water(s) information.

a) Identify the discharge pathway by checking whether it is discharged: directly to the receiving water (river, stream, or brook), within the facility (e.g., through a sewer drain), to a storm drain, to a wetland, or other receiving body.
b) Provide a narrative description of the discharge pathway, including the name(s) of the receiving waters into which discharge will occur.
c) Provide a detailed map(s) indicating the location of the site and outfall(s) to the receiving water(s):

1) For multiple discharges, the discharges should be numbered sequentially.
2) In the case of indirect dischargers (to municipal storm sewer, etc) the map(s) must be sufficient to indicate the location of the discharge to the indirect conveyance and the discharge to the state classified 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 and the basin (for Massachusetts, the Surface Water Quality Standards (314 CMR 4.00) are available at http://www.mass.gov/dep/water/laws/regulati.htm#wqual) (for New Hampshire, contact the NH DES at (603) 271-2984).
e) Specify the reported seven day-ten year low flow (7Q10) of the receiving water (see Section I.A.3) c. above). In New Hampshire, the 7Q10 must be provided by to the applicant by the New Hampshire Department of Environmental Services**.**

f) Indicate whether the receiving water is a listed 303(d) water quality impaired or limited water and if so, for which pollutants (see Section IX of the Fact Sheet for additional information).
For MA, the most updated integrated list of waters (CWA 303(d) and 305(b)) is available at http://www.mass.gov/dep/water/resources/tmdls.htm#info.
For NH, the most updated integrated list of waters (CWA 303(d) and 305(b)) is available at http://des.nh.gov/organization/divisions/water/wmb/swqa/index.htm.
Also, indicate if there is a final TMDL for any of the listed pollutants. For MA, final TMDLs can be found at: http://www.mass.gov/dep/water/resources/tmdls.htm and for NH, final TMDLs can be found at http://des.nh.gov/organization/divisions/water/wmb/tmdl/index.htm. For more information, contact the states at: New Hampshire Department of Environmental Services, Watershed Management Bureau at 603-271-3503 or the Massachusetts Department of Environmental Protection at 508-767-2796 or 508-767-2873.

6. ESA and NHPA Eligibility.
As required in Parts I.A.4 and Appendix VII the operator of a site/facility must ensure that the potential discharge will not adversely affect endangered species, designated critical habitat, or national historic places that are in proximity to the potential discharge. If the potential discharge is to certain water bodies, the applicant must also submit a formal certification with the NOI that indicates the consultation, with the U.S. Fish and Wildlife Service and National Marine Fisheries Service (the Services), resulted in either a no jeopardy opinion or a written concurrence on a finding that the discharge is not likely to adversely affect any endangered species or critical habitat. Facilities should begin the consultation as early in the process as possible.
a) Using the instructions in Appendix VII and information in Appendix II, indicate under which criterion listed you are eligible for coverage under this general permit.
b) If you selected criterion D or F, indicate if consultation with the federal services has been completed or if it is underway.
c) If consultation with the U.S. Fish and Wildlife Service and/or NOAA Fisheries Service was completed, indicate if a written concurrence finding that the discharge is "not likely to adversely affect" listed species or critical habitat was received.
d) Attach documentation of ESA eligibility as described below and required in Appendix VII, Part I.C, Step 4.

Criterion A - No federally-listed threatened or endangered species or federally-designated critical habitat are present: A copy of the most current county species list pages for the county(ies) where your site or facility and discharges are located. You must also include a statement on how you determined that no listed species or critical habitat are in proximity to your site or facility or discharge locations.

Criterion B – Section 7 consultation completed with the Service(s) on a prior project: A copy of the USFWS and/or NOAA Fisheries, as appropriate, biological opinion or concurrence on a finding of "unlikely to adversely effect" regarding the ESA Section 7 consultation.

Criterion C – Activities are covered by a Section 10 Permit: A copy of the USFWS and/or the NOAA Fisheries, as appropriate, letter transmitting the ESA Section 10 authorization.

Criterion D - Concurrence from the Service(s) that the discharge is "not likely to adversely affect" federally-listed species or federally-designated critical habitat (not including the four species of concern identified in Section I of Appendix I): A copy of the USFWS and/or the NOAA Fisheries, as appropriate, letter or memorandum concluding that the discharge is consistent with the general permit's "not likely to adversely affect" determination.

Criterion E – Activities are covered by certification of eligibility: A copy of the documents originally used by the other operator of your site or facility (or area including your site) to satisfy the documentation requirement of Criteria A, B, C or D.

Criterion F - Concurrence from the Service(s) that the discharge is "not likely to adversely affect" species of concern, as identified in Section I of Appendix I: A copy of the USFWS and/or the NOAA Fisheries, as appropriate, concurrence with the applicant's determination that the discharge is "not likely to adversely affect" listed species.

e) Using the instructions in Appendix VII, identify which criterion listed in Part C makes you eligible for coverage under this general permit.

f) If Criterion 3 was selected, attach all written correspondence with the State or Tribal historic preservation officers, including any terms and conditions that outline measures the applicant must follow to mitigate or prevent adverse effects due to activities regulated by the RGP.

7. Supplemental information. Applicants should provide any supplemental information needed to meet the requirements of the permit, including any analytical data used to support the application, and any certification(s) required.

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.

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

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

a) Name of **facility/site**: FMR BOSTON RUBBER SHOE COMPA		**Facility/site** mailing address:			
Location of **facility/site**: longitude: 71D 4 M 16 S latitude: 42 D 26 M 36 S	Facility SIC code(s): 1522	Street: 99R AND 101R WASHINGTON ST			
b) Name of **facility/site owner:** SP5 WOOD ALTA STONE PLACE, LLC		Town: MELROSE			
Email address of facility/site owner: mike.moise@woodpartners.com		State: MA	Zip: 02176-0000	County: MIDDLESEX	
Telephone no. of facility/site **owner**: 978-369-8111					
Fax no. of facility/site **owner**: 781-861-0729		**Owner** is (check one): 1. Federal ○ 2. State/Tribal ○ 3. Private ⊙ 4. Other ○ if so, describe:			
Address of **owner** (if different from site):					
Street: 80 Hayden Ave., Suite 120					
Town: Lexington	State: MA	Zip: 02421-0000	County: MIDDLESEX		
c) Legal name of **operator**: SP5 WOOD ALTA STONE PLACE, LLC	**Operator** telephone no: 978-369-8111				
	Operator fax no.: 781-861-0729	**Operator** email: mike.moise@woodpartners.co			
Operator contact name and title: MICHAEL MOISE, SENIOR PROJECT MANAGER (mike.moise@woodpartners.com)					
Address of **operator** (if different from owner):	Street:				
Town:	State:	Zip:	County:		

d) Check Y for "yes" or N for "no" for the following:
1. Has a prior NPDES permit exclusion been granted for the discharge? Y___ N___, if Y, number:
2. Has a prior NPDES application (Form 1 & 2C) ever been filed for the discharge?
Y___ N___, if Y, date and tracking #:
3. Is the discharge a "new discharge" as defined by 40 CFR 122.2? Y___ N___
4. For sites in Massachusetts, is the discharge covered under the Massachusetts Contingency Plan (MCP) and exempt from state permitting? Y___ N___

e) Is site/facility subject to any State permitting, license, or other action which is causing the generation of discharge? Y___ N___
If Y, please list:
1. site identification # assigned by the state of NH or MA:
2. permit or license # assigned:
3. state agency contact information: name, location, and telephone number:

f) Is the site/facility covered by any other EPA permit, including:
1. Multi-Sector General Permit? Y___ N___,
if Y, number:
2. Final Dewatering General Permit? Y___ N___,
if Y, number:
3. EPA Construction General Permit? Y___ N___,
if Y, number: MAR10DW03
4. Individual NPDES permit? Y___ N___,
if Y, number:
5. any other water quality related individual or general permit? Y___ N___, if Y, number:

g) Is the site/facility located within or does it discharge to an Area of Critical Environmental Concern (ACEC)? Y___ N___

h) Based on the facility/site information and any historical sampling data, identify the sub-category into which the potential discharge falls.

Activity Category	**Activity Sub-Category**
I - Petroleum Related Site Remediation	A. Gasoline Only Sites ___ B. Fuel Oils and Other Oil Sites (including Residential Non-Business Remediation Discharges) ___ C. Petroleum Sites with Additional Contamination ___
II - Non Petroleum Site Remediation	A. Volatile Organic Compound (VOC) Only Sites ___ B. VOC Sites with Additional Contamination ___ C. Primarily Heavy Metal Sites ___
III - Contaminated Construction Dewatering	A. General Urban Fill Sites ___ B. Known Contaminated Sites ___

IV - Miscellaneous Related Discharges	A. Aquifer Pump Testing to Evaluate Formerly Contaminated Sites ☐ B. Well Development/Rehabilitation at Contaminated/Formerly Contaminated Sites ☐ C. Hydrostatic Testing of Pipelines and Tanks ☐ D. Long-Term Remediation of Contaminated Sumps and Dikes ☐ E. Short-term Contaminated Dredging Drain Back Waters (if not covered by 401/404 permit) ☐

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

a) Describe the discharge activities for which the owner/applicant is seeking coverage:

APPLICANT IS SEEKING COVERAGE FOR THE DISCHARGE OF EXCAVATION DEWATERING ASSOCIATED WITH A KNOWN CONTAMINATED SITE, MASSACHUSETTS CONTINGENCY PLAN (MCP) SITE RELEASE TRACKING NUMBER RTN 3-0060)

b) Provide the following information about each discharge:

1) Number of discharge points: 1

2) What is the **maximum** and **average flow rate** of discharge (in cubic feet per second, ft^3/s)?
Max. flow 0.111 ft3/s @ 50 GPM Is maximum flow a **design value**? Y ◉ N ○
Average flow (include units) 0.055 ft3/s @ 25 G Is average flow a design value or estimate? DESIGN

3) Latitude and longitude of each discharge within 100 feet:

pt.1: lat 42deg 26' 28.95" N	long 71deg 04' 12.69" W	pt.2: lat.	long. ;
pt.3: lat	long	pt.4: lat.	long. ;
pt.5: lat	long	pt.6: lat.	long. ;
pt.7: lat	long	pt.8: lat.	long. ; etc.

4) If hydrostatic testing, total volume of the discharge (gals):

5) Is the discharge intermittent ◉ or seasonal ○ ?
Is discharge ongoing? Y ○ N ◉

c) Expected dates of discharge (mm/dd/yy): start 11/25/2011 end 6/25/2012

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.

a) Based on the sub-category selected (see Appendix III), indicate whether each listed chemical is **believed present** or **believed absent** in the potential discharge. Attach additional sheets as needed.

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
1. Total Suspended Solids (TSS)		☐	☒	1	grab	97, 9014	5,000 ug/l	11,000 ug/l	3 kg	11,000 ug/l	3 kg
2. Total Residual Chlorine (TRC)		☒	☐								
3. Total Petroleum Hydrocarbons (TPH)		☐	☒	1	grab	MADEP 4217,	101 ug/l	283 ug/l	0.07 kg	283 ug/l	0.07 kg
4. Cyanide (CN)	57125	☒	☐	1	grab	97, 9014	5 ug/l	0 ug/l	0	0	0
5. Benzene (B)	71432	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
6. Toluene (T)	108883	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
7. Ethylbenzene (E)	100414	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
8. (m,p,o) Xylenes (X)	108883; 106423; 95476; 1330207	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
9. Total BTEX [2]	n/a	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
10. Ethylene Dibromide (EDB) (1,2-Dibromoethane) [3]	106934	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
11. Methyl-tert-Butyl Ether (MtBE)	1634044	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
12. tert-Butyl Alcohol (TBA) (Tertiary-Butanol)	75650	☒	☐	6	grab	8260B	20 ug/l	0	0	0	0

***** Numbering system is provided to allow cross-referencing to Effluent Limits and Monitoring Requirements by Sub-Category included in Appendix III, as well as the Test Methods and Minimum Levels associated with each parameter provided in Appendix VI.

[2] BTEX = Sum of Benzene, Toluene, Ethylbenzene, total Xylenes.

[3] EDB is a groundwater contaminant at fuel spill and pesticide application sites in New England.

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
13. tert-Amyl Methyl Ether (TAME)	9940508	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
14. Naphthalene	91203	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
15. Carbon Tetrachloride	56235	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
16. 1,2 Dichlorobenzene (o-DCB)	95501	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
17. 1,3 Dichlorobenzene (m-DCB)	541731	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
18. 1,4 Dichlorobenzene (p-DCB)	106467	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
18a. Total dichlorobenzene		☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
19. 1,1 Dichloroethane (DCA)	75343	☒	☐	6	grab	8260B	1 ug/l	1.2 ug/l	.0003 kg	0	0
20. 1,2 Dichloroethane (DCA)	107062	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
21. 1,1 Dichloroethene (DCE)	75354	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
22. cis-1,2 Dichloroethene (DCE)	156592	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
23. Methylene Chloride	75092	☒	☐	6	grab	8260B	5 ug/l	0	0	0	0
24. Tetrachloroethene (PCE)	127184	☐	☐	6	grab	8260B	1 ug/l	0	0	0	0
25. 1,1,1 Trichloro-ethane (TCA)	71556	☒	☐	6	grab	8260B	1 ug/l	3.5 ug/l	.0009 kg	0	0
26. 1,1,2 Trichloro-ethane (TCA)	79005	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0
27. Trichloroethene (TCE)	79016	☒	☐	6	grab	8260B	1 ug/l	0	0	0	0

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
28. Vinyl Chloride (Chloroethene)	75014	☐	☐	6	grab	8260B	1 ug/l	0	0	0	0
29. Acetone	67641	☐	☐	6	grab	8260B	10 ug/l	0	0	0	0
30. 1,4 Dioxane	123911	☐	☐	6	grab	8260B	30 ug/l	0	0	0	0
31. Total Phenols	108952	☒	☐	1	grab	8270D	5-10 ug/l	0	0	0	0
32. Pentachlorophenol (PCP)	87865	☒	☐	1	grab	8270D	10 ug/l	0	0	0	0
33. Total Phthalates (Phthalate esters) [4]		☒	☐	1	grab	8270D	2 ug/l	0	0	0	0
34. Bis (2-Ethylhexyl) Phthalate [Di-(ethylhexyl) Phthalate]	117817	☒	☐	1	grab	8270D	2 ug/l	0	0	0	0
35. Total Group I Polycyclic Aromatic Hydrocarbons (PAH)		☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
a. Benzo(a) Anthracene	56553	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
b. Benzo(a) Pyrene	50328	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
c. Benzo(b)Fluoranthene	205992	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
d. Benzo(k)Fluoranthene	207089	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
e. Chrysene	21801	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
f. Dibenzo(a,h)anthracene	53703	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
g. Indeno(1,2,3-cd) Pyrene	193395	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
36. Total Group II Polycyclic Aromatic Hydrocarbons (PAH)		☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0

[4] The sum of individual phthalate compounds.

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
h. Acenaphthene	83329	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
i. Acenaphthylene	208968	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
j. Anthracene	120127	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
k. Benzo(ghi) Perylene	191242	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
l. Fluoranthene	206440	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
m. Fluorene	86737	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
n. Naphthalene	91203	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
o. Phenanthrene	85018	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
p. Pyrene	129000	☒	☐	1	grab	8270C	0.1 ug/l	0	0	0	0
37. Total Polychlorinated Biphenyls (PCBs)	85687; 84742; 117840; 84662; 131113; 117817.	☒	☐	1	grab	8082	0.20-0.22 ug	0	0	0	0
38. Chloride	16887006	☒	☐	1	grab	1, 9251	1,000 ug/l	12,000 ug/l	3.274	12,000 ug/l	3.274
39. Antimony	7440360	☐	☒	6	grab	6010B/6020A	0.5-50 ug/l	11.2 ug/l	0.003	0	0
40. Arsenic	7440382	☐	☒	6		6010B/6020A	0.5-50 ug/l	2.7 ug/l	0.0007	0	0
41. Cadmium	7440439	☒	☐	6	grab	6010B/6020A	0.5 ug/l	0	0	0	0
42. Chromium III (trivalent)	16065831	☒	☐	6	grab	6010B/6020A	0.5-10 ug/l	0	0	0	0
43. Chromium VI (hexavalent)	18540299	☐	☒	6	grab	6010B/6020A	0.5-10 ug/l	2.6 ug/l	0.0007	0	0
44. Copper	7440508	☐	☒	1	grab	6020A	0.5 ug/l	10.5 ug/l	0.0028	10.5 ug/l	0.0028
45. Lead	7439921	☐	☒		grab	6010B/6020A	0.5-10 ug/l	173 ug/l	0.47	173 ug/l	0.47
46. Mercury	7439976	☐	☐	6	grab	7470A	0.2 ug/l	0	0	0	0
47. Nickel	7440020	☐	☒	6	grab	6010B/6020A	0.5 ug/l	2.8 ug/l	0.0007	0	0
48. Selenium	7782492	☒	☐	6	grab	6010B/6020A	1-10 ug/L	0	0	0	0
49. Silver	7440224	☒	☐	6	grab	6010B/6020A	0.5-7 ug/l	0	0	0	0
50. Zinc	7440666	☐	☒	6	grab	6010B/6020A	5-50 ug/l	146 ug/l	0.039	146 ug/l	0.039
51. Iron	7439896	☐	☐	1	grab	6010B	50 ug/l	1,600 ug/l	0.436	1,600 ug/l	0.436
Other (describe):		☐	☐								

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
TETRAHYDROFURAN *	109-99-9	☒	☐		grab	8260B	2 ug/l	11 ug/l	0.003	11 ug/l	0.003
PENTACHLOROPHENOL	87-86-5	☒	☐	1	grab	8151	0.5 ug/l	0	0	0	0

b) For discharges where **metals** are believed present, please fill out the following (attach results of any calculations):

Step 1: Do any of the metals in the influent exceed the effluent limits in Appendix III (i.e., the limits set at zero dilution)? Y_⊙_ N_○_	If yes, which metals? iron, copper and lead
Step 2: For any metals which exceed the **Appendix III** limits, calculate the **dilution factor (DF)** 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? Metal: copper DF: 1.9 Metal: iron DF: 1.9 Metal: lead DF: 1.9 Metal: DF: Etc.	Look up the limit calculated at the corresponding dilution factor in **Appendix IV.** Do any of the metals in the **influent** have the potential to exceed the corresponding **effluent** limits in Appendix IV (i.e., is the influent concentration above the limit set at the calculated dilution factor)? Y_⊙_ N_○_ If Y, list which metals: iron, copper and lead

4. Treatment system information. Please describe the treatment system using separate sheets as necessary, including:

a) A description of the treatment system, including a schematic of the proposed or existing treatment system:

FRACTIONATION (FRAC) TANKS ARE CURRENTLY IN USE TO HELP REDUCE TOTAL SUSPENDED SOLIDS (TSS) IN THE EFFLUENT. CURRENTLY, EXCESS EXCAVATION WATER IS BEING TRUCKED TO NEWSTREAMH20 FOR RECYCLING. ONCE PERMITTED, EFFLUENT WILL FLOW FROM ONE OF THREE FRAC TANKS ON SITE, THROUGH THE PUMP TO BAG FILTERS (100-MICRON FOLLOWED BY 50-MICRON), THEN THROUGH GAC CANNISTERS, TSS/CONTINUOUS FLOW/INSTANTANIOUS FLOW METERS/ DATA LOGGERS, TO THE STORMWATER CATCHBASIN, TO THE SPOT POND BROOK. LABORATORY DATA IS ATTACHED FOR SIX SAMPLES "FRAC-2" (THERE WAS NO "FRAC-1")THROUGH "FRAC-6" (INCL FRAC-5 AND FRAC 5 FILTERED [Dissolved Metals]) WITH A DESCRIPTION OF ANOMOLIES AND WHY THEY ARE "BELIEVED ABSENT".

b) Identify each applicable treatment unit (check all that apply):	Frac. tank ☒	Air stripper ☐	Oil/water separator ☐	Equalization tanks ☐	Bag filter ☒	GAC filter ☒
	Chlorination ☐	De-chlorination ☐	Other (please describe):			

c) Proposed **average** and **maximum flow rates** (gallons per minute) for the discharge and the **design flow rate**(s) (gallons per minute) of the treatment system:
Average flow rate of discharge 25 gpm Maximum flow rate of treatment system 50 gpm
Design flow rate of treatment system 25 gpm

d) A description of chemical additives being used or planned to be used (attach MSDS sheets):

NONE

5. Receiving surface water(s). Please provide information about the receiving water(s), using separate sheets as necessary:

a) Identify the discharge pathway:	Direct to receiving water_☐__	Within facility (sewer) _☐__	Storm drain_☒__ (Spot Pond Brook)	Wetlands _☐__	Other (describe):

b) Provide a narrative description of the discharge pathway, including the name(s) of the receiving waters:

Water pumped to Frac Tank then through 50 then 10 micron filter, GAC, and water qual. board, flow meters to drain into cased drainage swale, into Spot Pond Brook

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 Class B

e) Provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water 0.32 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? Y_○__ N_⊙__ If yes, for which pollutant(s)?

Is there a final TMDL? Y_○__ N_⊙__ If yes, for which pollutant(s)?

6. ESA and NHPA Eligibility.

Please provide the following information according to requirements of Permit Parts I.A.4 and I.A.5 Appendices II and VII.

a) Using the instructions in Appendix VII and information on Appendix II, under which criterion listed in Part I.C are you eligible for coverage under this general permit?

A ___ B ___ C ___ D ___ E ___ F ___

b) If you selected Criterion D or F, has consultation with the federal services been completed? Y___ N___ Underway___

c) If consultation with U.S. Fish and Wildlife Service and/or NOAA Fisheries Service was completed, was a written concurrence finding that the discharge is "not likely to adversely affect" listed species or critical habitat received? Y___ N___

d) Attach documentation of ESA eligibility as described in the NOI instructions and required by Appendix VII, Part I.C, Step 4.

e) Using the instructions in Appendix VII, under which criterion listed in Part II.C are you eligible for coverage under this general permit?

1 ___ 2 ___ 3 ___

f) If Criterion 3 was selected, attach all written correspondence with the State or Tribal historic preservation officers, including any terms and conditions that outline measures the applicant must follow to mitigate or prevent adverse effects due to activities regulated by the RGP.

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.

2. d).: Please see attached schematic of Fractionation Tank discharge water treatment (mechanical) to proposed discharge to Spot Pond Brook.
3.: Please see attached Discussion of Detected Analytes.
5. c) 2.: Please see attached maps of Development site and location of proposed discharge to Spot Pond Brook. Included is MassDEP Priority Resources (21-E) Map for nearby Sensitive Receptors.
5. e): Spot Pond Brook is an un-gauged stream so actual measurements of streamflow are unavailable. The M7D10Y flow is calculated to be 0.32 f3/sec. with a 71% prediction error. Source USGS StreamStats website.

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:	FMR BOSTON RUBBER SHOE COMPANY RTN 3-30060
Operator signature:	ATTACHED AS THIRD PAGE OF ATTACHMENT-AFTER COVER LETTER
Printed Name &Title:	Mark Theriault, Assistant Vice President
Date:	

B. Submission of NOI to EPA - All operators applying for coverage under this General Permit must submit a completed Notice of Intent (NOI) to EPA. Signed and completed NOI forms and attachments must be submitted to EPA-NE at:

U.S. Environmental Protection Agency
5 Post Office Square, Suite 100
Mail Code OEP06-4
Boston, MA 02109-3912
ATTN: Remediation General Permit NOI Processing

or electronically mailed to NPDES.Generalpermits@epa.gov

or faxed to the EPA Office at 617-918-0505

If filling out the suggested NOI form electronically on EPA's website, the signature page must be signed and faxed or mailed to EPA at the fax number and/or address listed above.

1. Filing with the states - A copy of any NOI form filed with EPA-NE must also be filed with state agencies. The state agency may elect to develop a state specific form or other information requirements.

a) Discharges in Massachusetts - In addition to the NOI, permit applicants must submit copies of the State Application Form BRPWM 12, Request for General Permit coverage for the RGP. The application form and the Transmittal Form for Permit Application and Payment may be obtained from the Massachusetts Department of Environmental Protection (MassDEP) website at www.state.ma.us/dep. Municipalities are fee-exempt, but should send a copy of the transmittal form to that address for project tracking purposes. All applicants should keep a copy of the transmittal form and a copy of the application package for their records.

1) A copy of the NOI, the transmittal form, a copy of the check, and Form BRPWM 12 should be sent to:

Massachusetts Department of Environmental Protection
Division of Watershed Management
627 Main Street, 2nd floor
Worcester, MA 01608

2) A copy of the transmittal form and the appropriate fee should be sent to:

Massachusetts Department of Environmental Protection
P.O. Box 4062
Boston, MA 02111

Please note: Applicants for discharges in Massachusetts should note that under 310 CMR 40.000, *as a matter of state law*, the general permit only applies to discharges that are **not** subject to the

Massachusetts Contingency Plan (MCP) and 310 CMR 40.000. Therefore, discharges subject to the MCP are **not** required to fill out and submit the State Application Form BRPWM 12 or pay the state fees. However, they must submit a NOI to EPA.

b) Discharges in New Hampshire - applicants must provide a copy of the Notice of Intent to:

New Hampshire Department of Environmental Services
Water Division
Wastewater Engineering Bureau
P.O. Box 95
Concord, New Hampshire 03302-0095.

2. Filing with Municipalities - A copy of the NOI must be submitted to the municipality in which the proposed discharge would be located.