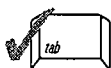




BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate
Storm Sewer Systems (MS4s)

A. Instructions

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Submission of this Notice of Intent constitutes notice that the entity named at item B1. of this form intends to be authorized by the DEP General Permit issued jointly with EPA for stormwater discharges from the small municipal separate storm sewer system (MS4), in the location identified at item B2. of this form. Submission of the Notice of Intent also constitutes notice that the party identified at item B1. has read, understands and meets the eligibility conditions of Part I.B. of the NPDES Small MS4 General Permit, agrees to comply with all applicable terms and conditions of the NPDES Small MS4 General Permit, and understands that continued authorization to discharge is contingent on maintaining eligibility for coverage. **In order to be granted coverage, all information required on BRP WM 08A, including the Stormwater Management Program Summary and Time Frames form, must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a stormwater management program.**

B. Applicant Information

1. Small MS4 Operator/Owner Information:

Wayne E. Bates, PhD, PE

Name

15 St. Paul Street

Mailing Address

Blackstone

City/Town

MA

State

508-883-9331

Telephone Number

Email (if available)

2. Municipality Name

Town of Blackstone

City/Town

3. Legal Status:

Federal

City/Town

State

Tribal

Private

Other public entity:

Specify Public Entity

4. Other regulated MS4(s) within municipal boundaries:

unknown

5. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for "listed species" and critical habitat been met?

yes

pending

no

OCT 28 2003

MUNICIPAL ASSISTANCE UNIT



BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

B. Applicant Information (cont.)

6. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for protection of historic properties been met?

- yes pending no

Note:
Section C may be duplicated to accommodate a larger list of receiving waters

C. Names of (Presently Known) Receiving Waters

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
Blackstone River Name	unknown Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	0300, 0900, 1000, 1500, 1700, 2100, 2500
Harris Pond Name	unknown Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2200 Specify
Lake Hiawatha Name	unknown Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Mill River Name	unknown Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	0300, 0500 Specify
Crane Pond Name	unknown Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2200 Specify
Briggs Pond Name	unknown Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Walsh Pond Name	unknown Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Fish Pond Name	unknown Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
_____ Name	_____ Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify



BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate
Storm Sewer Systems (MS4s)

D. Stormwater Management Program Summary

1. Public Education:

XXX BMP ID #		
<u>see Section 3 of attached plan</u> Specify Best Management Practice	_____	_____
BMP ID #		
_____	_____	_____
BMP ID #		
_____	_____	_____
BMP ID #		
_____	_____	_____
BMP ID #		
_____	_____	_____
BMP ID #		
_____	_____	_____

2. Public Participation:

XXX BMP ID #		
<u>see Section 3 of attached plan</u> Specify Best Management Practice	_____	_____
BMP ID #		
_____	_____	_____
BMP ID #		
_____	_____	_____
BMP ID #		
_____	_____	_____
BMP ID #		
_____	_____	_____
BMP ID #		
_____	_____	_____



BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate
Storm Sewer Systems (MS4s)

D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

BMP ID # <u>see Section 3 of attached plan</u> Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal

4. Construction Site Runoff Control:

BMP ID # <u>see Section 3 of attached plan</u> Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal
BMP ID # _____ Specify Best Management Practice	_____ Responsible Dept./Person Name	_____ Specify Measurable Goal



Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Watershed Management

BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W036393
Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary (Cont.)

5. Post Construction Runoff Control:

BMP ID #

see Section 3 of attached plan

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

6. Municipal Good Housekeeping:

BMP ID #

see Section 3 of attached plan

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal



BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate
Storm Sewer Systems (MS4s)

D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

BMP ID # see Section 3 of attached plan		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

E. 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 am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Michael Guzinski (Town Administrator)
Printed Name

Signature October 16, 2003
Date

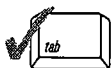


BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate
Storm Sewer Systems (MS4s)

Facility ID (if known)

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B. Applicant Information

1. Small MS4 Operator/Owner Information:

Wayne E. Bates, PhD, PE

Name

15 St. Paul Street

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Blackstone

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State

508-883-9331

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Email (if available)

2. Municipality Name

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City/Town

3. Legal Status:

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City/Town

State

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Other public entity:

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4. Other regulated MS4(s) within municipal boundaries:

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5. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for "listed species" and critical habitat been met?

yes

pending

no



BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

Facility ID (if known)

B. Applicant Information (cont.)

6. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for protection of historic properties been met?
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Note:
Section C may be duplicated to accommodate a larger list of receiving waters

C. Names of (Presently Known) Receiving Waters

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Lake Hiawatha Name	unknown Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Mill River Name	unknown Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	0300, 0500 Specify
Crane Pond Name	unknown Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2200 Specify
Briggs Pond Name	unknown Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Walsh Pond Name	unknown Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Fish Pond Name	unknown Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
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Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify
Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify



BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

D. Stormwater Management Program Summary

1. Public Education:

xxx BMP ID #		
see Section 3 of attached plan Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

2. Public Participation:

xxx BMP ID #		
see Section 3 of attached plan Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
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BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal



BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate
Storm Sewer Systems (MS4s)

D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

BMP ID # <u>see Section 3 of attached plan</u> Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID # Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
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BMP ID # Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID # Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

4. Construction Site Runoff Control:

BMP ID # <u>see Section 3 of attached plan</u> Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID # Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
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BMP ID # Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
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BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate
Storm Sewer Systems (MS4s)

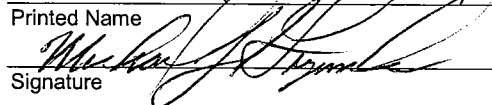
D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

BMP ID # see Section 3 of attached plan	Responsible Dept./Person Name	Specify Measurable Goal
Specify Best Management Practice		
BMP ID #	Responsible Dept./Person Name	Specify Measurable Goal
Specify Best Management Practice		
BMP ID #	Responsible Dept./Person Name	Specify Measurable Goal
Specify Best Management Practice		
BMP ID #	Responsible Dept./Person Name	Specify Measurable Goal
Specify Best Management Practice		
BMP ID #	Responsible Dept./Person Name	Specify Measurable Goal
Specify Best Management Practice		

E. 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 am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Michael Guzinski (Town Administrator)
 Printed Name _____
 Signature  _____
 Date October 16, 2003