### Hand-enter Your Transmittal Number

Your unique Transmittal Number can be accessed online: [http://www.state.ma.us/scripts/dep/trasmfrm.htm](http://www.state.ma.us/scripts/dep/trasmfrm.htm) or call DEP's InfoLine at 617-338-2255 or 800-482-0444 (from 508, 781, and 978 area codes).

**Massachusetts Department of Environmental Protection**

**Transmittal Form for Permit Application and Payment**

**A. Permit Information**

<table>
<thead>
<tr>
<th>BRP WM 08A</th>
<th>Stormwater</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permit Code: 7 or 8 character code from permit instructions</td>
<td>Name of Permit Category</td>
</tr>
<tr>
<td>Discharges from MS4</td>
<td>Type of Project or Activity</td>
</tr>
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**B. Applicant Information – Firm or Individual**

<table>
<thead>
<tr>
<th>City of Chelsea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Firm - Or, if party needing this approval is an individual, enter name below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Last Name of Individual</th>
<th>First Name of Individual</th>
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</thead>
<tbody>
<tr>
<td>Andrew B. DeSantis</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City/Town</th>
<th>State</th>
<th>Zip Code</th>
<th>Telephone # and extension</th>
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<tbody>
<tr>
<td>500 Broadway</td>
<td>Chelsea</td>
<td>MA</td>
<td>02150</td>
<td>617-889-8376</td>
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</tbody>
</table>

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<tr>
<th><a href="mailto:adesantis@ci.chelsea.ma.us">adesantis@ci.chelsea.ma.us</a></th>
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<tr>
<td>e-mail address (optional)</td>
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**C. Facility, Site or Individual Requiring Approval**

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**D. Application Prepared by (if different from Section B)**

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<th>Zip Code</th>
<th>Telephone # and extension</th>
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<td>Permit No.</td>
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<td>Rec'd Date</td>
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<tr>
<td>Reviewer</td>
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**E. Permit - Project Coordination**

Is this project subject to MEPA review? **☐ yes ☒ no**

If yes, enter the project's EOA file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOA file number

Is an Environmental Impact Report Required? **☐ yes ☒ no**

Is this application part of a larger project for which two or more DEP permits are being or will be sought? **☐ yes ☒ no**

List any other DEP permits that apply to this project:

<table>
<thead>
<tr>
<th>Permit Category</th>
<th>Date of Submission (tentative or actual)</th>
<th>Transmittal # if application already submitted</th>
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**F. Amount Due**

**Special Provisions:**

- ☒ Fee Exempt* (city, town or municipal housing authority ) (state agency if fee is $100 or less)
- ☐ Hardship Request - payment extensions according to 310 CMR 4.04(3)(c)
- ☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10)

*There are no fee exemptions for 21E, regardless of applicant status

Check Number: [ ]

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<th>Check Number</th>
<th>Dollar Amount</th>
<th>Date</th>
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<td>SEP 11 2003</td>
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Please make check payable to the Commonwealth of Massachusetts and mail check and one copy of this form to:

DEP, P.O. Box 4062, Boston, MA 02211

**tr-formw • rev. 5/03**
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)

A. Instructions

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:

   Andrew B. DeSantis, Assistant Director DPW
   Name
   500 Broadway, Room 310
   Mailing Address
   Chelsea
   City/Town
   617-889-8376
   Telephone Number
   adsantis@ci.chelsea.ma.us
   Email (if available)

2. Municipality Name

   City of Chelsea
   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:

   Tobin Bridge – Massport, Route1 & Eastern Avenue – Massachusetts Highway Department, Route 16, Revere Beach Parkway – Massachusetts Department of Conservation and Recreation

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
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

---

C. Names of (Presently Known) Receiving Waters

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<th>Receiving Water:</th>
<th>No. of Outfalls</th>
<th>Listed as Impaired?</th>
<th>Impairment</th>
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<td>Chelsea River</td>
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<td>Mystic River</td>
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<td>0600, 1200, 1700, 1900, 2000 &amp; 2500</td>
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</table>
D. Stormwater Management Program Summary

1. Public Education:

   PE-1
   BMP ID #
   Partnership Program w/Chelsea Greenspace & Mystic River Watershed Org.
   Specify Best Management Practice
   DPW/Andrew DeSantis
   Responsible Dept./Person Name
   Conduct Public Forums on a yearly basis
   Specify Measurable Goal

   PE-2
   BMP ID #
   Educational Material Distribution
   DPW/Andrew DeSantis
   Responsible Dept./Person Name
   Distribute materials 2x per year at community events
   Specify Measurable Goal

   PE-3
   BMP ID #
   Outreach to Latino Community
   Specify Best Management Practice
   DPW/Andrew DeSantis
   Responsible Dept./Person Name
   Develop Spanish Language Brochure within 1 year
   Specify Measurable Goal

   Specify Best Management Practice
   Responsible Dept./Person Name
   Specify Measurable Goal

2. Public Participation:

   PP-1
   BMP ID #
   Hold Co-ordination Meetings
   Specify Best Management Practice
   DPW/Andrew B. DeSantis
   Responsible Dept./Person Name
   Hold Coordination Meetings with Chelsea Greenspace and Mystic River Watershed Organization on a semi-annual basis
   Specify Measurable Goal

   PP-2
   BMP ID #
   Storm Drain Stenciling
   Specify Best Management Practice
   DPW/Andrew B. DeSantis
   Responsible Dept./Person Name
   Stencil All catch basin structures within 3 years
   Specify Measurable Goal

   PP-3
   BMP ID #
   Volunteer Monitoring
   Specify Best Management Practice
   DPW/Andrew B. DeSantis
   Responsible Dept./Person Name
   Continue Volunteer Monitoring of outfalls on an annual basis.
   Specify Measurable Goal

   PP-4
   BMP ID #
   Stakeholder Meetings
   Specify Best Management Practice
   DPW/Andrew B. DeSantis
   Responsible Dept./Person Name
   Hold annual stakeholder meeting
   Specify Measurable Goal
D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

**IDDE-1**
BMP ID #
Storm Drain Map
Specify Best Management Practice

**IDDE-2**
BMP ID #
Non-stormwater discharge Ordinance
Specify Best Management Practice

**IDDE-3**
BMP ID #
Industrial/Business Connections
Specify Best Management Practice

**IDDE-4**
BMP ID #
Illicit Discharge Detection and Elimination
Specify Best Management Practice

BMP ID #
Specify Best Management Practice

**IDDE-5**
BMP ID #

**IDDE-6**
BMP ID #

4. Construction Site Runoff Control:

**CSRC-1**
BMP ID #
Develop Storm Water Discharge Permitting Standards
Specify Best Management Practice

**CSRC-2**
BMP ID #
Erosion Sediment Control Ordinance
Specify Best Management Practice

**CSRC-3**
BMP ID #
Inspection Program Guideline
Specify Best Management Practice

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Update Storm/Sanitary Sewer Map Yearly (ongoing)

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Adopt Non-stormwater discharge Ordinance within 2 years
Specify Measurable Goal

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Establish Monitoring Program within 2 years
Specify Measurable Goal

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Establish Program within 1 year.
Specify Measurable Goal

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Establish Permitting Standards within 1 year.
Specify Measurable Goal

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Develop Ordinance with 1 year
Specify Measurable Goal

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Establish within 1 year
Specify Measurable Goal
D. Stormwater Management Program Summary (Cont.)

5. Post Construction Runoff Control:

PCRC-1

BMP ID #

Post Construction Ordinance
Specify Best Management Practice

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Develop within 1 year.
Specify Measurable Goal

PCRC-2

BMP ID #

Operation and Maintenance Agreement
Specify Best Management Practice

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Develop within 1 year
Specify Measurable Goal

PCRC-3

BMP ID #

Inspection program guidelines
Specify Best Management Practice

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Set up inspection program for post construction runoff controls within 2 years.
Specify Measurable Goal

6. Municipal Good Housekeeping:

MGH-1

BMP ID #

Street Cleaning Program
Specify Best Management Practice

DPW/Andrew B. DeSantis
Responsible Dept./Person Name

Continue ongoing program of sweeping every street twice a month from April 1 to November 30
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)

Programmed Catch Basin Cleaning
Specify Best Management Practice

Continue ongoing contracted catch basin cleaning at the rate of 33% of all catch basins per year
Specify Measurable Goal

MGH-3
BMP ID #

Spill Response & Prevention
Specify Best Management Practice

Review existing response plan and update within 1 year
Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Specify Measurable Goal

D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

TMDL-1
BMP ID #

Street Sweeping
Specify Best Management Practice

Continue contracted program of cleaning every street 2x/month April 1 to November 30
Specify Measurable Goal

TMDL-2
BMP ID #

Catch Basin Cleaning
Specify Best Management Practice

Continue contracted program of cleaning 33% of catch basin per year
Specify Measurable Goal

TMDL-3
BMP ID #

Deep Sump Catch Basins
Specify Best Management Practice

Require new and replacement catch basins to have deep sumps as part of CSRC-1
Specify Measurable Goal

TMDL-4
BMP ID #

Oil and gas separators
Specify Best Management Practice

Institute requirement in conjunction with CSRC-1
Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Specify Measurable Goal

wm08aapp 07282003 • rev. 12/02
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.

Jay Ash
Printed Name

Signature

City Manager

Date

9/5/03
<table>
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<tr>
<th>BMP ID #</th>
<th>PERMIT YEAR ONE</th>
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