

MAR 04 1006  
→ W 036183

AH



### Hand-enter Your Transmittal Number

Your unique Transmittal Number can be accessed through DEP's web site or by calling the DEP InfoLine as listed on the last page of this document

## Massachusetts Department of Environmental Protection Transmittal Form for Permit Application and Payment

### Instructions

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Your check should be made payable to the Commonwealth of Massachusetts. Please mail your check along with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three (3) copies of this form will be needed.

Copy 1 (the original) must accompany your permit application.

Copy 2 must accompany your fee payment.

Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to DEP, P.O. Box 4062, Boston, MA 02211

#### For DEP Use Only

Permit No. \_\_\_\_\_  
Rec'd Date \_\_\_\_\_  
Reviewer \_\_\_\_\_

### A. Application Information

DEP Permit Code (the 7 or 8 character code from first page of permit application instructions): BRPWM08A
Name of Permit Category: NPDES Stormwater General Permit
Type of Project or Activity: NOI for Discharges from Small MS4

### B. Applicant Information (Firm or Individual)

Name of Firm: City of Easthampton
--------------------------------------

Or, if party needing this approval is clearly an individual:

Individual's Last Name:	First Name	MI
-------------------------	------------	----

Street Address 109 Hendrick Street			
City/Town Easthampton	State MA	Zip Code 01027	Telephone Number (413) 529-1423 ext.
Contact: James A. Gracia, City Engineer		e-mail address (optional) jgracia@crocker.com	

### C. Facility, Site or Individual Requiring Approval

Name of Facility, Site or Individual City of Easthampton MS4		DEP Facility Number (if Known)	
Street Address		e-mail address: (optional)	
City/Town	State	Zip Code	Telephone Number ( ) ext.

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

Name of Individual or Firm: James A. Gracia, City Engineer			
Address 109 Hendrick Street			
City/Town Easthampton	State MA	Zip Code 01027	Telephone Number (413) 529-1423 ext.
Contact:		LSP Number (21E only)	

### E. Permit - Project Coordination

Is this project subject to MEPA review?  yes  no

If yes, indicate the project's EOE A file number (assigned when an Environmental Notification Form is submitted to the MEPA unit)  
EOEA # \_\_\_\_\_ 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:

Permit Category	Date of Submission (tentative or actual)	Transmittal Number (if application already submitted)

JUL 30 2003

### 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 #:	Dollar Amount:	Date:
----------	----------------	-------

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

MUNICIPAL ASSISTANCE UNIT



**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:

James A. Gracia, City Engineer

Name

City of Easthampton, 109 Hendrick Street

Mailing Address

Easthampton

City/Town

(413) 529-1423

Telephone Number

MA

State

jgracia@crocker.com

Email (if available)

2. Municipality Name

City of Easthampton

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:

*None - AH. See Attached e-mail*

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

**JUL 30 2003**  
**MUNICIPAL ASSISTANCE UNIT**



# 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?

- yes     pending     no

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

### C. Names of (Presently Known) Receiving Waters

No current mapping. Unknown at present time. Will be identified during 5-year implementation of stormwater management program (See program summary).

Receiving Water: <b>SEE ATTACHED LIST</b>	No. of Outfalls	Listed as Impaired?	Impairment
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 _____
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 _____

**NPDES STORMWATER GENERAL PERMIT  
PART C: NAMES OF PRESENTLY KNOWN RECEIVING WATERS**

Name	Number of Outfalls	Listed as Impaired Y/N	Impairment	Outfall ID (from Easthampton Stormwater Base Map)
Bassett Brook	2	N		109, 110
Un-named tributary to Bassett Brook @ Evans Avenue	2	N		88, 89
Un-named tributary to Bassett Brook @ Park Hill Road	3	N		66, 67, 68
Brickyard Brook	7	N		11, 10, 9, 8, 130, 127, 34
Un-named tributary to Brickyard Brook at Clark Street	1	N		129
Un-named tributary to Brickyard Brook at East Street	2	N		6, 7
Broad Brook	10	N		103, 121, 13, 124, 125, 14, 15, 16, 101, 17
Hannum Brook	6	N		70, 69, 63, 58, 57, 57a
Lower Mill Pond	8	N		37, 38, 39, 87, 100, 115, 98, 99
Manhan River	7	N		120, 54, 113, 50, 114, 111, 112
Un-named tributary to Manhan River at Route 10	4	N		108, 46, 44, 45
Un-named tributary to Manhan River at Maxine Circle	1	N		107
Un-named tributary to Manhan River at Plymouth Avenue	1	N		49
Un-named tributary to Manhan River near WWTP	5	N		4, 36, 35, 35a, 117
Un-named tributary to Manhan River at East Street	1	N		3
Un-named tributary to Manhan River at East/River Street	1	N		2
Un-named tributary to Manhan River at Oxbow	1	N		1

**NPDES STORMWATER GENERAL PERMIT  
PART C: NAMES OF PRESENTLY KNOWN RECEIVING WATERS (Continued)**

Un-named tributary to Manhan River at O'Neill Street	2	N		43, 86
Un-named tributary to Manhan River at Clapp Street	3	N		40, 41, 42
Nashawannuck Pond	7	Y	Nutrients, organic enrichment, low dissolved oxygen, noxious aquatic plants	105, 90, 94, 91, 92, 93, 95
North Branch - Manhan River	12	N		81, 82, 85, 79, 78, 77, 76, 75, 74, 80, 83, 84
Un-named tributary to North Branch of Manhan River at Torrey Street	1	N		71
Plum Brook	3	N		5, 33, 116
Rubber Thread Pond	4	Y	Noxious aquatic plants	97, 96, 118, 119
White Brook	9	N		23, 22, 21, 140, 51, 20, 19, 18, 123
Williston Pond	1	N		31
Wilton Brook	9	N		52, 25, 24, 26, 27, 28, 29, 30, 31
Outfalls without discharge to a receiving water	27	-	-	-

\* Impairment is defined as a 303(d) water listing for Massachusetts



**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)**

W036183  
 Transmittal Number

Facility ID (if known)

**D. Stormwater Management Program Summary**

1. Public Education:

1  
 BMP ID #

Promote a Stormwater Program  
 Specify Best Management Practice

Department of Public Works  
 Planning Board  
 Conservation Commission  
 Board of Health  
 Mayor  
 Responsible Dept./Person Name

Easthampton will present to the public at a public meeting Easthampton's draft Comprehensive Stormwater Management Program.  
 Specify Measurable Goal

2  
 BMP ID #

Identify Financial Support for a Stormwater Program  
 Specify Best Management Practice

Department of Public Works  
 Responsible Dept./Person Name

Easthampton will identify appropriate sources of funding assistance (SRF, 319 Grant Program, 604(b) Grant Program, Lakes & Ponds Grant Program, Source Water Protection Grant Program, Recycling Grant Program) and apply for assistance in implementing portions of Easthampton's Comprehensive Stormwater Management Program, including public education and outreach.  
 Specify Measurable Goal

3  
 BMP ID #

Target groups likely to impact storm water  
 Specify Best Management Practice

Department of Public Works  
 Responsible Dept./Person Name

Brochures targeting specific audiences and activities will be available. These target groups include homeowner and lawn maintenance activities, disposal of household waste, and pet maintenance.  
 Distribute EPA and other relevant educational brochures to targeted audiences. Distribution points include City Hall, Library, and Recycling Center.  
 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.)**

1. Public Education (Cont.):

4

BMP ID #

Identify alternative information  
sources  
Specify Best Management Practice

Department of Public Works  
MIS Department  
Responsible Dept./Person Name

Easthampton will also post links on its website to the Connecticut River Watershed Council @ [www.ctriver.org](http://www.ctriver.org)  
Easthampton will post links to stormwater BMPs and other water quality education resources, including EPA and DEP on its website.  
[www.easthamptonweb.com](http://www.easthamptonweb.com)  
Specify Measurable Goal

5

BMP ID #

Utilize local public access channel  
Specify Best Management Practice

Department of Public Works  
Responsible Dept./Person Name

Public meeting notice and the meeting reviewing Easthampton's Comprehensive Stormwater Management Program will be posted on Easthampton's local access channel.  
Specify Measurable Goal

6

BMP ID #

Develop, conduct and document educational programs  
Specify Best Management Practice

Department of Public Works  
CRW Liaison  
Responsible Dept./Person Name

The City of Easthampton will appoint a liaison to the Connecticut River Watershed Council to disseminate information to the City on programs and activities.  
Specify Measurable Goal

7

BMP ID #

Promote household waste recycling  
Specify Best Management Practice

Department of Public Works  
Board of Health  
Responsible Dept./Person Name

The City of Easthampton will work with the City's contracted waste hauler and the Board of Health to continue to sponsor Hazardous Waste Collection Days.  
Specify Measurable Goal



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

W036183  
Transmittal Number

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

Facility ID (if known)

**D. Stormwater Management Program Summary (Cont.)**

2. Public Participation:

8

BMP ID #

Storm drain stenciling  
Specify Best Management Practice

Department of Public Works  
Responsible Dept./Person Name

Easthampton will work with local youth groups to develop a stenciling program. Stenciling will target Easthampton's subwatersheds.  
Specify Measurable Goal

9

BMP ID #

Community Wetland Resource Area Clean-up Days  
Specify Best Management Practice

Department of Public Works  
Easthampton Conservation Commission  
Responsible Dept./Person Name

City of Easthampton will encourage local stream team cleanups with local residents and area youth groups. City will provide solicitation of sponsors and notice of events on local access channel and website.  
Specify Measurable Goal

10

BMP ID #

Community Clean-up Days  
Specify Best Management Practice

Department of Public Works  
Responsible Dept./Person Name

City will provide trucks and other material to support cleanup efforts and disposal of materials.  
Specify Measurable Goal

3. Illicit Discharge Detection and Elimination:

11

BMP ID #

Identify Financial Assistance for Inventory and mapping of storm drain system  
Specify Best Management Practice

Department of Public Works  
Responsible Dept./Person Name

Easthampton will identify appropriate sources of funding assistance (SRF, 319 Grant Program, 604(b) Grant Program, Lakes & Ponds Grant Program, Source Water Protection Grant Program, Recycling Grant Program) and apply for assistance in implementing portions of Easthampton's Comprehensive Stormwater Management Program, including public education and outreach.  
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 (Cont.):

12

BMP ID #

Mapping and identification of outfalls  
and receiving waters

Specify Best Management Practice

Department of Public Works

Responsible Dept./Person Name

Easthampton will continue to  
maintain and update maps of all  
outfalls and receiving bodies of water.

Specify Measurable Goal

13

BMP ID #

Identification/description of problem  
areas

Specify Best Management Practice

Department of Public Works

Responsible Dept./Person Name

Easthampton will continue to  
develop and implement an Illicit  
Discharge Detection and Elimination  
(IDDE) plan. Easthampton has  
already prioritized outfalls for  
additional inspection based on  
previously performed dry weather  
sampling.

Specify Measurable Goal

14

BMP ID #

Enforcement procedures addressing  
illicit discharges

Specify Best Management Practice

Planning Board

City Counsel

Board of Health

Responsible Dept./Person Name

Easthampton will review whether  
local authority is appropriate and able  
to respond to potential illicit  
discharges. New by-laws, if  
necessary, will be proposed.

Specify Measurable Goal

15

BMP ID #

Public information program regarding  
hazardous wastes and dumping

Specify Best Management Practice

Department of Public Works

Board of Health

Responsible Dept./Person Name

Easthampton will provide educational  
brochures to residents promoting  
proper disposal of household  
hazardous wastes.

Specify Measurable Goal

16

BMP ID #

Initiation of recycling programs

Specify Best Management Practice

Department of Public Works

Board of Health

Responsible Dept./Person Name

Easthampton will apply for funding  
assistance from DEP's Recycling  
Grant Program for assistance in  
public education and the purchase of  
recycling materials.

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 (Cont.):

17

BMP ID #

Watershed assessments and studies  
Specify Best Management Practice

Department of Public Works  
Conservation Commission  
Board of Health  
Responsible Dept./Person Name

Easthampton will identify opportunities for funding assistance from DEP's 604(b) and 319 grant programs and the Department of environmental Management's Lakes and Ponds Grant Program to support watershed assessment and implementation activities. Tasks can include design and installation of stormwater BMPs and public outreach including storm drain stenciling. Emphasis will be on assessments and remediation of stormwater related problems impacting water quality in Nashawannuck Pond. This waterbody has been identified as impaired and on DEP's 303d list.  
Specify Measurable Goal

18

BMP ID #

Watershed assessments and studies  
Specify Best Management Practice

Department of Public Works  
Water Department  
Responsible Dept./Person Name

The City of Easthampton Water Department will apply for funding assistance from DEP's Source Water Protection Program for grant assistance to develop wellhead protection plans and stormwater management plans within Zones II.  
Specify Measurable Goal

4. Construction Site Runoff Control:

19

BMP ID #

Bylaw: Storm water management  
regulations for construction sites 1  
acre or larger  
Specify Best Management Practice

Planning Board  
Conservation Commission  
City Counsel  
Board of Health  
Zoning Board of Appeals  
Responsible Dept./Person Name

Easthampton will review model by-law developed by DEP in consultation with the Attorney General's Office.  
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.)**

5. Post Construction Runoff Control:

20

BMP ID #

Bylaw: Require post-construction runoff controls

Specify Best Management Practice

Planning Board  
Conservation Commission

City Counsel

Board of Health

Zoning Board of Appeals

Responsible Dept./Person Name

Easthampton will review model by-law developed by DEP in consultation with the Attorney General's Office.

Specify Measurable Goal

6. Municipal Good Housekeeping:

21

BMP ID #

Develop a municipal Operations and Maintenance Plan

Specify Best Management Practice

Department of Public Works

Responsible Dept./Person Name

Using regulations and recommendations from DEP and EPA, Easthampton will develop and update an operations and maintenance plan to include proper disposal of street sweepings, catchbasin cleanout, snow disposal, roadway de-icing procedures, vehicle washing, and outside storage of materials.

Specify Measurable Goal

22

BMP ID #

Develop a Storm Sewer System Inspection Program

Specify Best Management Practice

Department of Public Works

Responsible Dept./Person Name

Easthampton will implement a formal inspection program, including maintenance logs and scheduling, for catchbasin cleaning, repairs, and new installation.

Specify Measurable Goal

23

BMP ID #

Develop and implement training programs for municipal employees

Specify Best Management Practice

Department of Public Works

Responsible Dept./Person Name

Easthampton will send a minimum of 5 public works employees annually to training seminars sponsored by MassHighway, BayState Roads, and other relevant agencies or vendors.

Specify Measurable Goal

24

BMP ID #

Review storm drainage infrastructure needs

Specify Best Management Practice

Department of Public Works

Responsible Dept./Person Name

Easthampton will incorporate storm drain infrastructure review in Easthampton's Chapter 90 project utilizations.

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)

W036183  
 Transmittal Number

Facility ID (if known)

**D. Stormwater Management Program Summary (Cont.)**

7. BMPs for Meeting TMDL:

_____ 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 A. TAUTZLIK, Mayor  
 Printed Name  
 \_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 7-29-2003  
 Date

**STORM WATER MANAGEMENT PROGRAM**

Mass. Transmittal No. W036183

EPA No. \_\_\_\_\_

**SCHEDULE**

Name of MS4: Easthampton

BMP ID.	PERMIT YEAR				PERMIT YEAR TWO				PERMIT YEAR THREE				PERMIT YEAR FOUR				PERMIT YEAR FIVE				Next Permit	
	Spring 03	Summer 03	Fall 03	Winter 03-04	Spring 04	Summer 04	Fall 04	Winter 04-05	Spring 05	Summer 05	Fall 05	Winter 05-06	Spring 06	Summer 06	Fall 06	Winter 06-07	Spring 07	Summer 07	Fall 07	Winter 07-08		
1																						
2																						
3																						
4																						
5																						
6																						
7																						
8																						
9																						
10																						
11																						
12																						
13																						
14																						
15																						
16																						
17																						
18																						
19																						
20																						
21																						
22																						
23																						
24																						
25																						
26																						
27																						
28																						
29																						
30																						
31																						

