



**BRP WM 08A NPDES Stormwater General Permit**

**Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)**

Facility ID (if known)

**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:

Town of Hadley  
Name  
100 Middle Street  
Mailing Address  
Hadley MA  
City/Town State  
413-586-2390 hadleydp@javanet.com  
Telephone Number Email (if available)

2. Municipality Name

Hadley  
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:

Massachusetts Highway Department (Route 9), University of Massachusetts(portion)

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.)**



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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
Coleman Brook to Connecticut River A-1 to A-5	5 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Connecticut River A-6 to A-9	4 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Seg.ID MA34-04_2002 Cat 5 Priority Organics, Pathogens
Unnamed Brook (1) to Connecticut River A-10,A-11	2 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Unnamed Brook (2) to Connecticut River A-12-A-14	3 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Unnamed Brook (3) to Connecticut River A-15-A-17	3 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Unnamed Brook (4) to Fort River B-1, B-2	2 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Unnamed Brook (5) to Fort River B-3 to B-6	4 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Unnamed Brook (6) to Mill River C-1 to C-3	3 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mill River flows into Lake Warner Category 4c TDML
Unnamed Brook (7) to Mill River C-4, C-5	2 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Seg. ID MA34098_2002
Name	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Turbidity, Nutrients, Organic Enrichment, Noxious Plants
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
All numbered outfalls shown on attached Map	Number	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify

**D. Stormwater Management Program Summary**



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

W039490  
 Transmittal Number

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1. Public Education:

<u>1-A</u> BMP ID #	<u>Partnership Lake Warner - Mill River Steering Committee</u>	<u>Highway Department/ Augustine (Gus) O'Grady</u>	<u>Specific goals set by Lake clean-up organization</u>
<u>1-B</u> BMP ID #	<u>Distributing Fact Sheets Brochures With Water Bills</u>	<u>Highway provide Brochure Water Dept.distribute</u>	<u>distribution to all Hadley households</u>
<u>1-C</u> BMP ID #	<u>Presentation of educational video on Public Access Cable</u>	<u>Highway Dept/Augustine (Gus) O'Grady</u>	<u>provide generic or regional video, by others for 2-4 airings</u>
<u>BMP ID #</u>	<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>	<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>

2. Public Participation:

<u>2-A</u> BMP ID #	<u>Partnership Lake Warner - Mill River Watershed Steering Co.</u>	<u>Highway Department/ Augustine (Gus) O'Grady</u>	<u>Specific goals set by Lake clean-up organization</u>
<u>2-B</u> BMP ID #	<u>Est. NPDES Steering Comm. oversee permit implementation</u>	<u>Board of Selectmen/ David S. Moskin</u>	<u>include members from all town boards and committes</u>
<u>2-C</u> BMP ID #	<u>Hold public mtgs for input on Stormwater Program</u>	<u>NPDES Steering Committee/ ?</u> Responsible Dept./Person Name	<u>Hold three public meetings on the Town's Prop SW program</u>
<u>BMP ID #</u>	<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>	<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>

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



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3. Illicit Discharge Detection and Elimination:

<u>3-A</u>		
BMP ID #		
<u>Partnership with MHD</u>	<u>Highway Dept/ Augustine</u>	<u>Mapping of drainage system</u>
<u>Specify Best Management Practice</u>	<u>(Gus) O'Grady</u>	<u>within Rt 9 corridor, year one</u>
<u>3-B</u>		
BMP ID #		
<u>Storm drain system map within</u>	<u>HighwayDept/Augustine (Gus)</u>	<u>Mapping of drainage system</u>
<u>Urban Area</u>	<u>O'Grady</u>	<u>w/in UA &amp; outwardly as poss.</u>
<u>3-C</u>		
BMP ID #		
<u>Dry weather screenig and</u>	<u>Highway Dept/ Augustine</u>	<u>screen 20% outfalls per year,</u>
<u>video inspection</u>	<u>(Gus) O'Grady</u>	<u>video suspicious pipelines yrly</u>
<u>3-D</u>		
BMP ID #		
<u>Est. Illicit discharge Hotline</u>	<u>Police/Fire</u>	<u>Hotline for citizens to report</u>
<u>news/advertise in waterbill</u>	<u>Responsible Dept./Person Name</u>	<u>illicit discharges established</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>

4. Construction Site Runoff Control:

<u>4-A</u>		
BMP ID #		
<u>Develop By-laws for land</u>	<u>NPDES Steering Committee/ ?</u>	<u>drafting, public meetings</u>
<u>disturbaces over 1 acre</u>	<u>Responsible Dept./Person Name</u>	<u>adoption within three years</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>

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



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5. Post Construction Runoff Control:

<u>5-A</u> BMP ID #	<u>NPDES Steering Committee/?</u> Responsible Dept./Person Name	<u>drafting, public meetings adoption within three years</u>
<u>Develop By-laws for post const. runoff control 1 ac +</u>		
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>

6. Municipal Good Housekeeping:

<u>6-A</u> BMP ID #	<u>Highway Department/ Augustine (Gus) O'Grady</u>	<u>Revise plan/conduct annual training</u>
<u>Existing spill prevention control plans for town facilities</u>		
<u>6-B</u> BMP ID #	<u>Highway Department/ Augustine (Gus) O'Grady</u>	<u>Develop pollution prevention workshop for munic. employee</u>
<u>Training program for maint. and landscaping crews</u>		
<u>6-C</u> BMP ID #	<u>Highway Department/ Augustine (Gus) O'Grady</u>	<u>During 1<sup>st</sup> year cont. reducing amt. of road salt used by 25%</u>
<u>Now incorporate the use of road salt alt. for deicing</u>		
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>		
<u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>BMP ID #</u>	<u>Specify Best Management Practice</u>	

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



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Storm Sewer Systems (MS4s)

7. BMPs for Meeting TMDL:

<u>1-A</u> BMP ID #	<u>Partnership Lake Warner - Mill River Steering Committee</u>	<u>Highway Department/ Augustine (Gus) O'Grady</u>	<u>Specific goals set by Lake clean-up organization</u>
<u>3-C</u> BMP ID #	<u>Dry weather screenig and video inspection</u>	<u>Highway Dept/ Augustine (Gus) O'Grady</u>	<u>screen 20% outfalls per year, video suspicious pipelines yrly</u>
<u>4-A</u> BMP ID #	<u>Develop By-laws const. site runoff control over 1 acre</u>	<u>NPDES Steering Committee/? Responsible Dept./Person Name</u>	<u>drafting, public meetings adoption within three years</u>
<u>6-A</u> BMP ID #	<u>Existing spill prevention control plans for town facilities</u>	<u>Highway Dept/ Augustine (Gus) O'Grady</u>	<u>Revise plan/conduct annual training</u>
<u>6-C</u> BMP ID #	<u>Now incorporate the use of road salt alt. for deicing</u>	<u>Highway Dept/ Augustine (Gus) O'Grady</u>	<u>During 1st year cont. reducing amt. of road salt used by 25%</u>

**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.

David S. Moskin, Chairman, Hadley Board of Selectmen

Printed Name

Signature

6.3.07  
Date

