

MAR041128



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

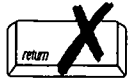
W035393
Transmittal Number

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

Facility ID (if known)

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

*Ronald M. LaFreniere
Commissioner
DPW JUL 24 2003*

1. Small MS4 Operator/Owner Information:

City of Marlborough DPW

Name

135 Neil Street

Mailing Address

Marlborough

City/Town

508-624-6910 ext. 7200

Telephone Number

MUNICIPAL ASSISTANCE UNIT

MA

01752

State

mjosephson@ci.marlborough.ma.us

Email (if available)

2. Municipality Name

City of Marlborough

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

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
<u>Assabet River</u> Name	<u>to be deter.</u> Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Nutrients/pathogens/metals</u> Specify
<u>Wachusett Aqueduct</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Sudbury Reservoir</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Fort Meadow Reservoir</u> Name	<u>to be deter.</u> Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Nutrients</u> Specify
<u>Hop Brook</u> Name	<u>to be deter.</u> Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Nutrients/pathogens/plants</u> Specify
<u>Hager Pond</u> Name	<u>to be deter.</u> Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Nutrients/pathogens/plants</u> Specify
<u>Unnamed trib - Hager outlet</u> Name	<u>to be deter.</u> Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>Nutrients/orgs./solids/plants</u> Specify
<u>Millham Reservoir</u> Name	<u>to de deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Lake Williams</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Flagg Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Sheep Fall Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>North Branch Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Millham Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Mowry Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Broad Meadow Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Muddy Pond</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Howe Pond</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>
<u>Unnamed trib. to Wachusett</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Specify</u>

D. Stormwater Management Program Summary



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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
<u>Pond w of Broad Meadow Br</u> Name	<u>to be deter,</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Pond s of Boston Post Rd</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Pond n of Hemenway St</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Pond n of East WWTF</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Pond w of Sudbury St</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Muddy Pond trib. to Assabet</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Trib. to Assabet</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Angelica Brook trib.</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Trib. to North Branch Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Trib. to South Branch Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Trib. to Broad Meadow Brook</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Trib. to Cranberry Bog</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Trib. to Stearns Millpond</u> Name	<u>to be deter.</u> Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify _____
<u>Trib. to Carding Millpond</u> Name	<u>to be deter.</u> 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 _____

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Facility ID (if known)

1. Public Education:

<u>1-1</u> BMP ID #	<u>Informational Brochures</u> Specify Best Management Practice	<u>Conservation / Priscilla Ryder</u> Responsible Dept./Person Name	<u>Distribute City-wide annually</u> Specify Measurable Goal
<u>1-2</u> BMP ID #	<u>Storm Drain Stenciling</u> Specify Best Management Practice	<u>Conservation / Priscilla Ryder</u> Responsible Dept./Person Name	<u>Stencil 1/4 of drains per year</u> Specify Measurable Goal
<u>1-3</u> BMP ID #	<u>Cable TV Program</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Tape / air once annually</u> Specify Measurable Goal
<u>1-4</u> BMP ID #	<u>Student Education</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Speak to Middle School class</u> Specify Measurable Goal
<u>1-5</u> BMP ID #	<u>Web Site Posting</u> Specify Best Management Practice	<u>IS / Jeanne Bunting</u> Responsible Dept./Person Name	<u>Post storm water information on City web site</u>

2. Public Participation:

<u>2-1</u> BMP ID #	<u>Volunteers for stenciling</u> Specify Best Management Practice	<u>Conservation / Priscilla Ryder</u> Responsible Dept./Person Name	<u>Volunteers to install stencils</u> Specify Measurable Goal
<u>2-2</u> BMP ID #	<u>Household haz. waste coll. day</u> Specify Best Management Practice	<u>Emerg. Mgmt. / Don Cusson</u> Responsible Dept./Person Name	<u>Hold HHWCD annually</u> Specify Measurable Goal
<u>2-3</u> BMP ID #	<u>Storm Water Management Advisory Committee</u>	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Form SWMAC</u> Specify Measurable Goal
<u>2-4</u> BMP ID #	<u>Public Hearings</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Hold public hearing on SWP</u> Specify Measurable Goal
<u>2-5</u> BMP ID #	<u>Stream Team</u> Specify Best Management Practice	<u>Conservation / Priscilla Ryder</u> Responsible Dept./Person Name	<u>Form Stream Team</u> Specify Measurable Goal

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1. Public Education:

1-6

 BMP ID #

Annual Compliance Report

Specify Best Management Practice

DPW / Patrick Clancy

Responsible Dept./Person Name

Prepare annual report

Specify Measurable Goal

1-7

 BMP ID #

Annual Reporting Reminder

Specify Best Management Practice

Conservation / Priscilla Ryder

Responsible Dept./Person Name

Notices to non-res. properties

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:

2-6

 BMP ID #

Clean-up Day

Specify Best Management Practice

DPW / Patrick Clancy

Responsible Dept./Person Name

Sponsor Clean-Up Day

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

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3. Illicit Discharge Detection and Elimination:

<u>3-1</u> BMP ID #		
<u>GIS Mapping</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Map City drainage system</u> Specify Measurable Goal
<u>3-2</u> BMP ID #		
<u>Ordinance Review</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Review applicable ordinances</u> Specify Measurable Goal
<u>3-3</u> BMP ID #		
<u>Protocol Development</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Develop protocol for IDDE</u> Specify Measurable Goal
<u>3-4</u> BMP ID #		
<u>Ordinance modifications</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Consolidated ordinance</u> Specify Measurable Goal
<u>3-5</u> BMP ID #		
<u>StreamTeam Inspections</u> Specify Best Management Practice	<u>Conservation / Priscilla Ryder</u> Responsible Dept./Person Name	<u>Inspect City's streams/outfalls</u> Specify Measurable Goal

4. Construction Site Runoff Control:

<u>4-1</u> BMP ID #		
<u>Regulation reviews</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Review applicable regulations</u> Specify Measurable Goal
<u>4-2</u> BMP ID #		
<u>Sampling / testing</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Sample/test to est. baseline</u> Specify Measurable Goal
<u>4-3</u> BMP ID #		
<u>Storm Water Mgmt. Policy</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Adopt DEP policy</u> Specify Measurable Goal
<u>4-4</u> BMP ID #		
<u>Resampling / retesting</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Resample/retest discharges</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

D. Stormwater Management Program Summary (Cont.)



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3. Illicit Discharge Detection and Elimination:

3-6

 BMP ID #

 Ill. Dis. Notice/Enforcement
 Specify Best Management Practice

 DPW / Patrick Clancy
 Responsible Dept./Person Name

 Disconnect w/in 6 mos.
 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 #

 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

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5. Post Construction Runoff Control:

5-1 BMP ID #		
<u>Regulation reviews</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Review applicable regulations</u> Specify Measurable Goal
5-2 BMP ID #		
<u>Sampling / testing</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Sample/test to est. baseline</u> Specify Measurable Goal
5-3 BMP ID #		
<u>Storm Water Mgmt. Policy</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Adopt DEP policy</u> Specify Measurable Goal
5-4 BMP ID #		
<u>Resampling / retesting</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Resample/retest discharges</u> Specify Measurable Goal
5-5 BMP ID #		
<u>Annual Reporting</u> Specify Best Management Practice	<u>Conservation / Priscilla Ryder</u> Responsible Dept./Person Name	<u>Achieve reporting compliance</u> Specify Measurable Goal

6. Municipal Good Housekeeping:

6-1 BMP ID #		
<u>Street Sweeping</u> Specify Best Management Practice	<u>DPW / Sandra Waterman</u> Responsible Dept./Person Name	<u>Sweep all streets annually</u> Specify Measurable Goal
6-2 BMP ID #		
<u>Catch Basin Cleaning</u> Specify Best Management Practice	<u>DPW / Sandra Waterman</u> Responsible Dept./Person Name	<u>Clean 1/2 CBs annually</u> Specify Measurable Goal
6-3 BMP ID #		
<u>Employee Training</u> Specify Best Management Practice	<u>DPW / Patrick Clancy</u> Responsible Dept./Person Name	<u>Train DPW employees</u> 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

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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 _____

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.

Mayor William J. Mauro, Jr.

Printed Name

William J. Mauro, Jr.

Signature

7-22-03
Date