



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

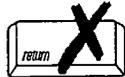
W041019
Transmittal Number

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

1. Small MS4 Operator/Owner Information:

Town of Needham - *Richard Mucci - Dir. DPW*
Name
1471 Highland Avenue
Mailing Address
Needham MA, 02492
City/Town State
(781) 455-7500
Telephone Number Email (if available)

2. Municipality Name

Needham
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:

Interstate Route 95, and Route 135

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

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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
Unnamed Tributary to Sabrina Lake Name	3 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Sabrina Lake Name	0 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Charles River (Southwest corner – Wellesley Town line to Oxbow Road) Name	7 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Priority Organics, Nutrients, Organic Enrichment/Low DO, Pathogens, Noxious Aquatic Plants, Turbidity Specify
Fuller Brook (Headwaters south of Route 135, Needham to confluence with Waban Brook, Wellesley) Name	23 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Organic Enrichment/LowDO; (Other Habitat Alterations); Pathogens; Oil and Grease; Taste, Odor, and Color Specify
Unnamed Tributary to the Charles River (Central Ave. to Stratford Road) Name	23 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Charles River (Central Ave. to Farley Pond near Chestnut Street) Name	17 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Priority Organics, Nutrients, Organic Enrichment/Low DO, Pathogens, Noxious Aquatic Plants, Turbidity Specify
Unnamed Tributary to Farley Pond Name	12 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Charles River (Chestnut Street to Dedham Avenue) Name	18 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Priority Organics, Nutrients, Organic Enrichment/Low DO, Pathogens, Noxious Aquatic Plants, Turbidity, Exotic Species Specify
Rosemary Lake Name	50 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify



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Note:
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C. Names of (Presently Known) Receiving Waters (cont.)

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
Rosemary Brook (Headwaters, outlet Rosemary Lake, Needham to confluence with Charles River, Wellesley Name	36 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Nutrients, Organic Enrichment/Low DO, Pathogens, Taste, Odor, and Color, Suspended Solids, Turbidity Specify
Alder Brook (Headwaters northwest of the Needham Reservoir south of Penn Central Railroad Tracks, to confluence with Charles River, Needham) Name	31 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Cause Unknown, Nutrients, Organic Enrichment/Low DO Specify
Needham Reservoir Name	16 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Cutler Lake (Kendrick Street Pond) Name	7 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Turbidity Specify
Hurd Brook Name	24 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify Priority Organics, Nutrients, Organic Enrichment/Low DO, Pathogens, Noxious Aquatic Plants, Turbidity, Exotic Species Specify
Charles River (Eastern Border of Needham) Name	28 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Specify

D. Stormwater Management Program Summary

1. Public Education:

1-1 BMP ID # Classroom Education on Storm Water Specify Best Management Practice	DPW Director Responsible Dept./Person Name	3 sets of educational materials, 3 grade levels, 2 teacher workshops Specify Measurable Goal
1-2 BMP ID # Flyer and Brochure Distribution and Web Site Link Specify Best Management Practice	DPW Director Responsible Dept./Person Name	Gather and make available one flyer & two fact sheets, provide web site link Specify Measurable Goal
1-3 BMP ID #		



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D. Stormwater Management Program Summary (Cont.)

Using the Media
Specify Best Management Practice

DPW Director
Responsible Dept./Person Name

One local cable public service announcement, one yearly press release, and one annual storm water article
Specify Measurable Goal

1-4
BMP ID #
Hazardous Waste Management
Specify Best Management Practice

DPW Director
Responsible Dept./Person Name

Track amount of hazardous waste collected, continue to distribute educational materials
Specify Measurable Goal

2. Public Participation:

2-1
BMP ID #
Adopt-A-Stream Programs
Specify Best Management Practice

DPW Director
Responsible Dept./Person Name

Adopt two streams and track quantity of trash removed
Specify Measurable Goal

2-2
BMP ID #
Stencil Storm Drains
Specify Best Management Practice

DPW Director
Responsible Dept./Person Name

Stencil 50 storm drains per year
Specify Measurable Goal

2-3
BMP ID #
Community Hotline
Specify Best Management Practice

DPW Director
Responsible Dept./Person Name

Establish a hotline, track # of calls and problems/incidents remedied
Specify Measurable Goal

2-4
BMP ID #
Storm Water Committee
Specify Best Management Practice

DPW Director
Responsible Dept./Person Name

Establish committee and hold annual meetings
Specify Measurable Goal

2-5
BMP ID #
Pet Waste By-Law
Specify Best Management Practice

DPW Director
Responsible Dept./Person Name

signs posted, # of educational materials, and # of dog licenses issued
Specify Measurable Goal



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D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

3-1

BMP ID #

Outfall Testing Program

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Follow-up testing for eight areas, Perform study to verify need for TV inspections

Specify Measurable Goal

3-2

BMP ID #

Illegal Dumping Education

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

of education tools distributed, # of illegal dumps reported, # of penalties given to dumpers, # of meritorious acknowledgements to citizens,

Specify Measurable Goal

3-3

BMP ID #

Septic System Controls (Board of Health)

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

of systems, # regularly maintained, # of educational flyers, # of trained people, # of failed systems

Specify Measurable Goal

4. Construction Site Runoff Control:

4-1

BMP ID #

Policy and Procedure Review and Updates

Specify Best Management Practice

Town Engineer

Responsible Dept./Person Name

Revise existing policies and procedures, develop Storm Drain Connection Permit requirement

Specify Measurable Goal

4-2

BMP ID #

Construction Reviews

Specify Best Management Practice

Town Engineer

Responsible Dept./Person Name

Develop requirement to inspect sites, # of inadequate sites/plans reported by inspectors, # of non-compliant permits

Specify Measurable Goal

5. Post Construction Runoff Control:

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D. Stormwater Management Program Summary (cont.)

5-1

BMP ID #

Policy for Post Construction
Runoff

Specify Best Management Practice

Town Engineer

Responsible Dept./Person Name

Develop Town-wide policy for
Post-Construction Runoff
control, a storm drain
connection permit requirement,
develop and implement
standard construction details
and policies

Specify Measurable Goal

5-2

BMP ID #

BMP Inspection and
Maintenance

Specify Best Management Practice

Town Engineer

Responsible Dept./Person Name

Inspect all Town maintained
BMPs annually, document # of
problems identified and
remedied & changes in effluent

Specify Measurable Goal

6. Municipal Good Housekeeping:

6-1

BMP ID #

Predictive Catch Basin
Program

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Develop, collect data, and
refine program

Specify Measurable Goal

6-2

BMP ID #

DPW Director

Responsible Dept./Person Name

Sweep all streets annually
years 1&2, sweep twice years
3-5, sweep all parking lots
annually, document pound of
debris collected

Specify Measurable Goal

6-3

BMP ID #

Pipe Inspections

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Analyze 10% of Drainage
System per Year

6-4

BMP ID #

Pipe Cleaning

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Clean 4,750' of drain pipe per
year, Jet Flush 19,000' of drain
pipe per year

Specify Measurable Goal



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D. Stormwater Management Program Summary (cont.)

<u>6-5</u> BMP ID #	<u>DPW Director</u> Responsible Dept./Person Name	<u>Replace 10 catch basins and 475' of drain pipe per year</u> Specify Measurable Goal
<u>New Pipe and Structure Installations</u> Specify Best Management Practice		
<u>6-6</u> BMP ID #	<u>DPW Director</u> Responsible Dept./Person Name	<u>Inspect 3 structural BMPs annually, implement two retrofit projects by year five</u> Specify Measurable Goal
<u>Investigate Town Owned BMPs for Retrofit Opportunities</u> Specify Best Management Practice		
<u>6-7</u> BMP ID #	<u>DPW Director</u> Responsible Dept./Person Name	<u>Continue established program in the future</u> Specify Measurable Goal
<u>Integrated Pest Management</u> Specify Best Management Practice		

7. BMPs for Meeting TMDL:

<u>N/A</u> BMP ID #	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>No TMDLs have been established thus far</u> Specify Best Management Practice		
<u>BMP ID #</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>Specify Best Management Practice</u>		
<u>BMP ID #</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>Specify Best Management Practice</u>		
<u>BMP ID #</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>
<u>Specify Best Management Practice</u>		



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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.

Richard Merson DPW Director

Printed Name

Richard P. Merson

Signature

Date

7/28/03

Daniel P. Matthews Chairman, Board of Selectmen

Printed Name

D. P. Matthews

Signature

10/14/03
Date

