

MAR 04 1061



Hand-enter Your Transmittal Number →

W 040625

Your unique Transmittal Number can be accessed online: <http://www.state.ma.us/scripts/dep/trasmfrm.stm> or call DEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

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

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

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three 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. Permit Information

MS4 General Permit

NPDES MS4 Stormwater General Permit

Name of Permit Category

JUL 24 2003

B. Applicant Information - Firm or Individual

Town of Sharon, Massachusetts

Name of Firm - Or, if party needing this approval is an individual enter name below:

Hooper

Eric

R

Last Name of Individual

First Name of Individual

MI

217 Rear South Main Street

Street Address

Sharon

MA

02067

(781)784-1525

City/Town

State

Zip Code

Telephone # and extension

Peter M. O'Cain

sharondpw@yahoo.com

Contact Person

e-mail address (optional)

MUNICIPAL ASSISTANCE UNIT

C. Facility, Site or Individual Requiring Approval

Town of Sharon

Name of Facility, Site or Individual

217 Rear South Main Street

Street Address

Sharon

City/Town

DEP Facility Number (if Known)

sharondpw@yahoo.com

e-mail address (optional)

MA

02067

State

Zip Code

Federal I.D. Number (if Known)

(781)784-1525, ext 16

Telephone # and extension

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

Name of Firm Or Individual

Address

City/Town

State

Zip Code

Telephone # and extension

Contact Person

LSP Number (21E only)

E. Permit - Project Coordination

Is this project subject to MEPA review? yes no If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit: EOE 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:

Permit Category	Date of Submission (tentative or actual)	Transmittal # if application already submitted
MS4 General Permit	July 9, 2003	W040625

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

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



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:

Eric R. Hooper, Superintendent, Town of Sharon Department of Public Works
Name
217 Rear South Main Street
Mailing Address
Sharon MA
City/Town State
(781) 784-1525 sharondpw@yahoo.com
Telephone Number Email (if available)

2. Municipality Name

Town of Sharon
City/Town

3. Legal Status:

Federal City/Town State Tribal Private
 Other public entity: Town
Specify Public Entity

4. Other regulated MS4(s) within municipal boundaries:

N/A

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.)



BRP WM 08A NPDES Stormwater General Permit
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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
Mann's Pond Name	3 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Turbidity Specify
Beaver Brook Name	3 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Organic enrichment/Low DO Specify
Massapoag Brook Name	5 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Nutrients Specify
Devil's Brook Name	1 Number	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Sucker Brook Name	2 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Billings Brook Name	2 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Carworks Brook Name	3 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Sawmill Brook Name	2 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Name	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
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Name	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

W040625
 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)

1. Public Education:

<u>1</u> BMP ID #	<u>Design & distribute S/W educational brochures</u>	<u>S/W Manager: Peter O'Cain Water Dept: Dave Masciarelli</u>	<u>Mailing list of all households contacted</u>
<u>2</u> BMP ID #	<u>Recruit volunteers from educational mailing</u>	<u>Conservation Commission: Greg Meister</u>	<u>List of volunteers Specify Measurable Goal</u>
<u>3</u> BMP ID #	<u>Create Stormwater Hotline, include in mailing</u>	<u>Conservation Comm: Greg Meister</u>	<u>Have hotline number in brochure included in water bill</u>
<u>4</u> BMP ID #	<u>Educate students Specify Best Management Practice</u>	<u>Teachers, Conservation Comm, Stormwater Manager</u>	<u>Introduce in science Classrooms</u>
<u>5</u> BMP ID #	<u>Create tributary signage Specify Best Management Practice</u>	<u>Highway Department: Bill Petipas</u>	<u>Completion of signs within 3 years.</u>

2. Public Participation:

<u>6</u> BMP ID #	<u>Encourage public participation through adverts and brochures</u>	<u>Stormwater Manager: Peter O'Cain/Water Dept: Masciarelli</u>	<u>Make Public notices as required</u>
<u>7</u> BMP ID #	<u>Stencil storm drains</u>	<u>Volunteers/Highway Dept., Bill Petipas</u>	<u>Stencil all Ms4 catch basins and monitor stencils</u>
<u>8</u> BMP ID #	<u>Organize Community clean-ups of tributaries.</u>	<u>Conservation Commission: Greg Meister</u>	<u>At least one clean-up per year</u>
<u>9</u> BMP ID #	<u>Residents assist with by-law enforcement</u>	<u>Volunteers, Stormwater Manager: Peter O'Cain</u>	<u>Residents report violations Specify Measurable Goal</u>
<u>10</u> BMP ID #	<u>Initiate "Adopt A Drain" programs/stream monitoring</u>	<u>Volunteers identified from mailings</u>	<u>Record number of drains adopted</u>

D. Stormwater Management Program Summary (Cont.)



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3. Illicit Discharge Detection and Elimination:

<u>11</u> BMP ID #	Storm water management and illicit discharge by-law	Board of Selectmen, Town Engineer: Peter O'Cain	Town adopts by-law with prohibiting non-SW discharges
<u>12</u> BMP ID #	Develop storm sewer map with outfalls	GIS Coord: April Forsman Town Engineer: Peter O'Cain	Map of MS4 outfalls
<u>13</u> BMP ID #	Develop Plan to detect and address non S/W discharge	Conservation Commission: Greg Meister	Plan developed Specify Measurable Goal
<u>14</u> BMP ID #	Identify and doc suspected illicit discharges	ConComm,ission, volunteers, DEP	Keep record of suspected sites and contact DEP
<u>15</u> BMP ID #	Monitor accomplishment of goals of reducing illicit dis	Town Engineer: Peter O'Cain Responsible Dept./Person Name	Create spreadsheet with goals and percentage completed

4. Construction Site Runoff Control:

<u>16</u> BMP ID #	Include E&S BMP's/req's in all applicable Town regs.	Planning, Zoning, BOH, Con-Com/Town Engineer	Regs modified and accepted by all applicable Boards.
<u>17</u> BMP ID #	Include construction E&S plan as part of plan review	Planning/Zoning/BOH Responsible Dept./Person Name	approval of modified regulations
<u>18</u> BMP ID #	Inspect site for E&S Problems and	Conservation Commission: Greg Meister	Record inspections and Enforcement issues
<u>19</u> BMP ID #	Create sanctions to ensure compliance with E&S req's	ConComm, Board of Selectmen, Town Engineer	List of sanctions adopted by the Town.
<u>20</u> BMP ID #	Include construction site runoff on stromwater hot-line	Residents/volunteers Responsible Dept./Person Name	Established hotline with phone records.

D. Stormwater Management Program Summary (Cont.)



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5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
21	P Board/Con-Com regs, BMP for Runoff Control + 1 acre	Planning Board, Con Comm: Greg Meister	Update regs, if needed, currently meeting DEP req's
22	Require operation and maint plans for ret/det basins	Planning Board/Town Engineer: Peter O'Cain	Include plan requirement in Planning regs and maint fee
23	In addition to BMP's develop community BMP's	Town Engineer: Peter O'Cain, Con Comm: Greg Meister	Make a list of community BMP's, if any
24	If community BMP's desired, add to appropriate regulations	Planning, Zoning, Con-Com Boards/Town Engineer	Additions to appropriate regulations
BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

6. Municipal Good Housekeeping:

25	Develop Municipal operation and maintenance plan	Superintendent of DPW: Eric Hooper	Completion of Plan Specify Measurable Goal
26	Implement operation and maintenance plan w/schedule.	Highway Dept/Bill Petipas Responsible Dept./Person Name	Maintain records of maintenance and compliance
27	Use E&S Controls for road repairs	Highway Dept: Bill Petipas, Con Comm, Greg Meister	Record work and erosion controls taken.
28	Fill drains in areas of equipment or cleaning	Highway Dept: Bill Petipas Responsible Dept./Person Name	Drain covered/filled in Specify Measurable Goal
29	Clean catch basins on regular schedule	Highway Dept: Bill Petipas Responsible Dept./Person Name	Maintain record of cleaning Specify Measurable Goal
BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

D. Stormwater Management Program Summary (cont.)



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)
F. Example Storm Water Management Program TIME FRAMES

BMP ID #	PERMIT YEAR ONE				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 06	Summer 06	Fall 06	Winter 06-06	Spring 08	Summer 08	Fall 08	Winter 08-07	Spring 07	Summer 07	Fall 07	Winter 07-08	
1									X				X					X			
2																					
3																					
4				X				X									X				
5										X								X			
6			X																		
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Facility ID (if known)

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