### A. Permit Information

- **BRPWM08A**
- **Stormwater**
- **NPDES Stormwater General Permit**
- **Type of Project or Activity**

### B. Applicant Information - Firm or Individual

- **Town of Winchester**
- Name of Firm - Or, if party needing this approval is an individual enter name below:
  - **Last Name of Individual**
  - **First Name of Individual**
  - **Town Hall, 71 Mt. Vernon Street**
  - **Winchester**
  - **Mr. Robert Conway, Town Engineer**
  - **e-mail address (optional)**
  - **MA 01890 781-721-7120**
  - **State Zip Code Telephone # and extension**

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

- **Town of Winchester Storm Drainage**
- **System same as above**
- **e-mail address (optional)**
- **City/Town**
- **State Zip Code Telephone # and extension**

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

- **Camp Dresser & McKee Inc.**
- **Name of Firm Or Individual**
- **50 Hampshire Street**
- **City/Town**
- **State Zip Code Telephone # and extension**
- **LSP Number (21E only)**

### E. Permit - Project Coordination

- **Is this project subject to MEPA review?**
  - **Yes**
  - **No**
  - If yes, enter the project's EOEA file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:
  - **EOEA file number**
- **Is an Environmental Impact Report Required?**
  - **Yes**
  - **No**
  - If this application part of a larger project for which two or more DEP permits are being or will be sought:
  - **Yes**
  - **No**

### 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)

- **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

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tr-formw • rev. 5/03
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)

A. Instructions

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:
   Mr. Robert Conway, Town Engineer
   Name
   Town Hall, 71 Mt. Vernon Street
   Mailing Address
   Winchester
   City/Town
   781-271-7120
   Telephone Number
   MA
   State
   
2. Municipality Name
   Town of Winchester
   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 currently known.

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
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

C. Names of (Presently Known) Receiving Waters

Receiving Water:  No. of Outfalls  Listed as Impaired?  Impairment

Aberjona River  Unknown Number  ☑ Yes  ☐ No  Unionized ammonia, organic enrichment/low DO, pathogens, other habitat alterations
Name

Wedge Pond  Unknown Number  ☑ Yes  ☐ No  Nutrients, noxious aquatic plants
Name

Winter Pond  Unknown Number  ☑ Yes  ☐ No  Nutrients, noxious aquatic plants, turbidity
Name

Judkins Pond  Unknown Number  ☑ Yes  ☐ No  Nutrients, organic enrichment/low DO, pathogens
Name

Mill Pond  Unknown Number  ☑ Yes  ☐ No  Organic enrichment/low DO, pathogens
Name

Upper Mystic Lake  Unknown Number  ☐ Yes  ☐ No  Specify
Name

Horn Pond Brook  Unknown Number  ☐ Yes  ☐ No  Specify
Name

Wetland tributary to Sucker Brook  Unknown Number  ☐ Yes  ☐ No  Specify
Name

Unnamed tributary to Upper Mystic Lake, near Arlington St.  Unknown Number  ☐ Yes  ☐ No  Specify
Name

Unnamed wetland and pond, by High St., Johnson Rd., Ridge St.  Unknown Number  ☐ Yes  ☐ No  Specify
Name

Mill Pond  Unknown Number  ☐ Yes  ☐ No  Specify
Name
D. Stormwater Management Program Summary

1. Public Education:

1-1
BMP ID #
Article/brochure about stormwater in the annual
Community Confidence Report.
Dept. of Public Works
Responsible Dept./Person Name
Specify Measurable Goal

1-2
BMP ID #
Send information about proper disposal of lawn waste to
landscape contractors in Winchester.
Dept. of Public Works
Responsible Dept./Person Name
Specify Measurable Goal

1-3
BMP ID #
Staff a table with information about stormwater at Town Day
each year.
Dept. of Public Works
Responsible Dept./Person Name
Specify Measurable Goal

1-4
BMP ID #
Offer to give a stormwater education presentation to all
classes of a middle school grade.
Dept. of Public Works
Responsible Dept./Person Name
Specify Measurable Goal

1-5
BMP ID #
Install and maintain "Do not feed the waterfowl" signs at
popular feeding areas.
Dept. of Public Works
Responsible Dept./Person Name
Specify Measurable Goal
1-8
BMP ID #
Annual update of the Stormwater Management Plan at a televised Selectmen's meeting.
Specify Best Management Practice
Dept. of Public Works
Responsible Dept./Person Name
Annual update of the SWMP at a televised Selectmen's meeting.
Specify Measurable Goal

2. Public Participation:

2-1
BMP ID #
Comply with state public notification guidelines at MGL Chapter 39 Section 23B.
Specify Best Management Practice
Dept. of Public Works
Responsible Dept./Person Name
Continue to follow.
Specify Measurable Goal

2-2
BMP ID #
Give prize to a water- or environment-themed artwork in the Middle School Art Fair.
Specify Best Management Practice
Dept. of Public Works
Responsible Dept./Person Name
Prize awarded
Specify Measurable Goal

2-3
BMP ID #
Provide in-kind assistance to river and pond clean-ups.
Specify Best Management Practice
Dept. of Public Works
Responsible Dept./Person Name
Letters sent to local group(s) on availability of assistance.
Specify Measurable Goal

3. Illicit Discharge Detection and Elimination:

3-1
BMP ID #
Conduct dry weather outfall screening.
Specify Best Management Practice
Dept. of Public Works
Responsible Dept./Person Name
Percent of outfalls screened.
Specify Measurable Goal

3-2
BMP ID #
Map stormwater outfalls and receiving waters.
Specify Best Management Practice
Dept. of Public Works
Responsible Dept./Person Name
Map created.
Specify Measurable Goal

3-3
BMP ID #
Map the stormwater collection system in a GIS.
Specify Best Management Practice
Dept. of Public Works
Responsible Dept./Person Name
GIS of stormwater system created.
Specify Measurable Goal

3-4
BMP ID #
Develop and implement a plan to identify and remove non-stormwater discharges to the MS4.
Specify Best Management Practice
Dept. of Public Works
Responsible Dept./Person Name
Number of illicit connections found and removed.
Specify Measurable Goal
BRP WM 08A NPDES Stormwater General Permit
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

3-5
BMP ID #
Develop a Water and Sewer Regulation to allow Town inspectors into a building to check for illicit connections to the storm drain.
Specify Best Management Practice

Town Engineer and Town Attorney
Responsible Dept./Person Name
Draft regulation developed and presented to Board of Selectmen.
Specify Best Management Practice

3-6
BMP ID #
Develop a Water and Sewer Regulation to make it illegal to improperly connect a sanitary sewer to the storm drain system and to dump pollutants into the system.
Specify Best Management Practice

Town Attorney
Responsible Dept./Person Name
Draft regulation developed and presented to Board of Selectmen.
Specify Measurable Goal

3-7
BMP ID #
Develop a Water and Sewer Regulation to require inspection of new construction for correct connection to the sanitary sewer.
Specify Best Management Practice

Town Attorney
Responsible Dept./Person Name
Draft regulation developed and presented to Board of Selectmen.
Specify Measurable Goal

4. Construction Site Runoff Control:

4-1
BMP ID #
Require a Construction Site Erosion and Sediment Control Plan for construction sites greater than 1 acre in area.
Specify Best Management Practice

Town Engineer
Responsible Dept./Person Name
Requirement of an ESCP included in the Engineering Department Construction Standards.
Specify Measurable Goal

4-2
BMP ID #
Require a waste management plan at construction sites larger than one acre.
Specify Best Management Practice

Town Engineer
Responsible Dept./Person Name
Waste management plan for each construction site larger than one acre.
Specify Measurable Goal

4-3
BMP ID #
Continue to review site plans for stormwater impacts.
Specify Best Management Practice

Town Engineer
Responsible Dept./Person Name
Percent of site plans reviewed for erosion and sediment control.
Specify Measurable Goal
4-4

BMP ID 

Hold a public hearing for each new construction project that disturbs more than one acre of land.

Specify Best Management Practice 4-5

BMP ID 

Inspect and enforce erosion and sediment controls.

Specify Best Management Practice

Planning Board

Responsible Dept./Person Name

Public hearing held for each construction project.

Specify Measurable Goal

Town Inspector

Responsible Dept./Person Name

Number of inspections conducted.

Specify Measurable Goal

5. Post Construction Runoff Control:

5-1

BMP ID 

Develop a draft Water and Sewer Regulation to apply Standards 2, 3, 4, and 7 of the Massachusetts Stormwater Policy (MSP) to the entire Town. Present the regulation to the Board of Selectmen.

Specify Best Management Practice 5-2

BMP ID 

Specify a stormwater BMP manual to be used for consistent design and performance standards.

Specify Best Management Practice 5-3

BMP ID 

Develop a draft Water and Sewer Regulation that ensures long-term maintenance of structural BMPs.

Specify Best Management Practice 5-4

BMP ID 

Continue to allow conservation restrictions on private land.

Specify Best Management Practice

Planning Board; Conservation Commission

Responsible Dept./Person Name

Policy already developed; number of acres protected per year.

Specify Measurable Goal
6. Municipal Good Housekeeping:

<table>
<thead>
<tr>
<th>BMP ID #</th>
<th>Activity Description</th>
<th>Responsible Dept./Person Name</th>
<th>Number/percent of DPW employees who receive stormwater training each year.</th>
<th>Specify Measurable Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-1</td>
<td>Continue employee training program. Specify Best Management Practice</td>
<td>Dept. of Public Works</td>
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<tr>
<td>6-2</td>
<td>Identify sensitive receptors (such as wetlands, beaches, etc.) within the Town. Specify Best Management Practice</td>
<td>Dept. of Public Works</td>
<td>List of sensitive receptors developed, staff notified.</td>
<td>Specify Measurable Goal</td>
</tr>
<tr>
<td>6-3</td>
<td>Conduct street and parking lot sweeping. Specify Best Management Practice</td>
<td>Dept. of Public Works</td>
<td>All streets swept in spring; all streets swept at least one other time per year; municipally-owned parking lots swept in spring.</td>
<td>Specify Measurable Goal</td>
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<td>6-4</td>
<td>Calibrate salt spreaders and monitor industry &quot;smart salting&quot; standards. Specify Best Management Practice</td>
<td>Dept. of Public Works</td>
<td>Amount of deicers used.</td>
<td>Specify Measurable Goal</td>
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<tr>
<td>6-5</td>
<td>Clean all catch basins at least once every five years and clean drain pipes as necessary. Specify Best Management Practice</td>
<td>Dept. of Public Works</td>
<td>Number of catch basins cleaned annually.</td>
<td>Specify Measurable Goal</td>
</tr>
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<td>6-6</td>
<td>Train staff in the proper application of herbicides, pesticides, and fertilizers. Specify Best Management Practice</td>
<td>Dept. of Public Works</td>
<td>Training conducted; amount of herbicides/fertilizers used.</td>
<td>Specify Measurable Goal</td>
</tr>
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<td>6-7</td>
<td>Hold Annual Household Hazardous Waste Drop-off Day. Specify Best Management Practice</td>
<td>Board of Health</td>
<td>At least one household hazardous waste drop-off day held per year.</td>
<td>Specify Measurable Goal</td>
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</tbody>
</table>
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.

Brian F. Sullivan  
Town Manager  

Signature  

7-29-03  

Date
<table>
<thead>
<tr>
<th>BMP ID #</th>
<th>PERMIT YEAR ONE</th>
<th>PERMIT YEAR TWO</th>
<th>PERMIT YEAR THREE</th>
<th>PERMIT YEAR FOUR</th>
<th>PERMIT YEAR FIVE</th>
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<td>Spring 03</td>
<td>Summer 03</td>
<td>Fall 03</td>
<td>Winter 04-05</td>
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**Notes:**
- **Spring 03, Summer 03, Fall 03:**
  - X indicates activity required.
  - Done indicates activity completed.
- **Winter 04-05:**
  - X indicates activity required.
  - Done indicates activity completed.
- **Winter 05-06:**
  - X indicates activity required.
  - Done indicates activity completed.
- **Winter 06-07:**
  - X indicates activity required.
  - Done indicates activity completed.
- **Winter 07-08:**
  - X indicates activity required.
  - Done indicates activity completed.
- **Next Permit:**
  - As needed throughout permit term
  - Done if approved by Board of Selectmen

**Legend:**
- (Or once per year) indicates activity required annually or once.
- Done indicates activity completed.

**Facility ID (if known):** Town of Winchester