NOTICE OF INTENT

For Coverage Under the NPDES General Permit for Storm Water 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 NPDES General Permit issued by EPA for storm water 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 of the information required on this Notice of Intent form and the separate Storm Water Management Program (SWMP) Implementation Schedule form (Excel Spreadsheet), must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a storm water management program.

B. Applicant Information

1. Small MS4 Operator/Owner Information:

   Earl Rinker
   Name
   10 Central Road
   Mailing Address
   Rye, NH 03102
   City/Town
   (603) 964-5523
   Telephone Number
   earfr@town.rye.nh.us
   Email (if available)

2. Municipality Name

   Town of Rye
   City/Town

3. Legal Status:

   ☐ Federal
   ☒ City/Town
   ☐ State
   ☐ County
   ☐ Private

   ☐ Other public entity:
   Specify Public Entity

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

   NH Department of Transportation

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
NOTICE OF INTENT

For Coverage Under the NPDES General Permit for Storm Water Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

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

<table>
<thead>
<tr>
<th>Receiving Water</th>
<th>No. of Outfalls</th>
<th>Listed as Impaired?</th>
<th>Probable Sources of Impairment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Witch Creek</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics, Wet Weather Disch.</td>
</tr>
<tr>
<td>Little Harbor</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unknown River-Locke Pond, IMP</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unknown River-Burke Pond, IMP</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Eel Pond</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Berry’s Brook</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unnamed Brook to Marsh Road Pond</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unnamed Brooks-to Atlantic Ocean at Concord Point</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unnamed BB-Thru Awcomin March to Atl. Ocn. Rye Har.</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unnamed BK-Thru Awcomin Marsh to Atl. Ocn. Rye Har.</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Bailey Brook</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Name</td>
<td></td>
<td></td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Bailey Brook-from Locke Pond to Burke Road</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unnamed Brook-From Burke Pond to Eel Pond</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unnamed Brook-To Philbrook Pond</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
<tr>
<td>Unnamed Brook-from Eel Pond to Atl. Ocn. Rye Out.</td>
<td>Pending Number</td>
<td>Yes □ No</td>
<td>Atmospheric Deposition-Toxics</td>
</tr>
</tbody>
</table>
## D. Storm Water Management Program Summary

### 1. Public Education:

1. **BMP ID #**  
   **Articles in Town Newsletter & Website**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **Twice per year/Each year**  
   **Specify Measurable Goal**

2. **BMP ID #**  
   **Road stencils for drains**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **50 per year/Each year**  
   **Specify Measurable Goal**

3. **BMP ID #**  
   **Develop educational resources**  
   **Specify Best Management Practice**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **One per year**  
   **Specify Measurable Goal**

4. **BMP ID #**  
   **Pet Waste Management**  
   **Specify Best Management Practice**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **Dog licenses/Annual**  
   **Specify Measurable Goal**

5. **BMP ID #**  
   **Show UNH Video**  
   **Specify Best Management Practice**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **Once per year**  
   **Specify Measurable Goal**

6. **BMP ID #**  
   **Outreach in Rye School System**  
   **Specify Best Management Practice**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **Twice per year**  
   **Specify Measurable Goal**

7. **BMP ID #**  
   **Public info on treating mosquitoes/catch basins**  
   **Specify Best Management Practice**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **Twice per year**  
   **Specify Measurable Goal**

8. **BMP ID #**  
   **Door hangers for info on catch basins**  
   **Specify Best Management Practice**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **Once per year**  
   **Specify Measurable Goal**

### 2. Public Participation:

9. **BMP ID #**  
   **Community Cleanups**  
   **Specify Best Management Practice**  
   **Public Works/Bud Jordan**  
   **Responsible Dept./Person Name**  
   **Boy/Girl Scouts, once per year**  
   **Specify Measurable Goal**

10. **BMP ID #**  
    **Storm Drain Stenciling**  
    **Specify Best Management Practice**  
    **Public Works/Bud Jordan**  
    **Responsible Dept./Person Name**  
    **Once per year**  
    **Specify Measurable Goal**
NOTICE OF INTENT

For Coverage Under the NPDES General Permit for Storm Water Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

<table>
<thead>
<tr>
<th>Meet with the Seacoast Storm Water Coalition at least 2x/yr</th>
<th>Public Works/Bud Jordan</th>
<th>2+ Meetings per year</th>
<th>Specify Measurable Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>BMP ID #</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Specify Best Management Practice</th>
<th>Responsible Dept./Person Name</th>
<th>Specify Measurable Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specify Best Management Practice</td>
<td>Responsible Dept./Person Name</td>
<td>Specify Measurable Goal</td>
</tr>
</tbody>
</table>

D. Storm Water Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

<table>
<thead>
<tr>
<th>12</th>
<th>BMP ID #</th>
<th>Public Information (brochures, etc.)</th>
<th>Public Works/Bud Jordan</th>
<th>Responsible Dept./Person Name</th>
<th>Event (Spec)</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>BMP ID #</td>
<td>Remove known illicit connections</td>
<td>Public Works/Bud Jordan</td>
<td>Responsible Dept./Person Name</td>
<td>Ongoing Spec</td>
</tr>
<tr>
<td>14</td>
<td>BMP ID #</td>
<td>Review town ordinances</td>
<td>Public Works/Bud Jordan</td>
<td>Responsible Dept./Person Name</td>
<td>Annually</td>
</tr>
<tr>
<td></td>
<td>Specify Best Management Practice</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 4. Construction Site Runoff Control: |

<table>
<thead>
<tr>
<th>15</th>
<th>BMP ID #</th>
<th>Enforce LDR Sec 604 &amp; 605 Surface Water Mgmt. Stds.</th>
<th>Public Works/Bud Jordan</th>
<th>Responsible Dept./Person Name</th>
<th>Ongoing Specify Measurable Goal</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Specify Best Management Practice</th>
<th>Responsible Dept./Person Name</th>
<th>Specify Measurable Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specify Best Management Practice</td>
<td>Responsible Dept./Person Name</td>
<td>Specify Measurable Goal</td>
</tr>
<tr>
<td>Specify Best Management Practice</td>
<td>Responsible Dept./Person Name</td>
<td>Specify Measurable Goal</td>
</tr>
</tbody>
</table>

Rev 1/27/03
NOTICE OF INTENT
For Coverage Under the NPDES General Permit
for Storm Water Discharges from
Small Municipal Separate Storm Sewer Systems (MS4s)

Specify Best Management Practice
BMP ID #
Specify Best Management Practice
BMP ID #
Specify Best Management Practice
BMP ID #

D. Storm Water Management Program Summary (Cont.)

5. Post Construction Runoff Control:

16
BMP ID #
Enforce LDR Sec. 708
Inspection of Construction
Planning Board/John Elsdon
Responsible Dept./Person Name
Ongoing/per application
Specify Measurable Goal

3. Storm Water Management Program Summary (Cont.)

5. Post Construction Runoff Control:

16
BMP ID #
Enforce LDR Sec. 708
Inspection of Construction
Planning Board/John Elsdon
Responsible Dept./Person Name
Ongoing/per application
Specify Measurable Goal

6. Municipal Good Housekeeping:

17
BMP ID #
Clean Catch Basins
Specify Best Management Practice
Public Works/Bud Jordan
Responsible Dept./Person Name
Rotate throughout town
Specify Measurable Goal

18
BMP ID #
Street Sweeping
Specify Best Management Practice
Public Works/Bud Jordan
Responsible Dept./Person Name
Spring/Fall
Specify Measurable Goal

19
BMP ID #
Specify Best Management Practice
 Specify Measurable Goal
NOTICE OF INTENT

For Coverage Under the NPDES General Permit
for Storm Water Discharges from
Small Municipal Separate Storm Sewer Systems (MS4s)

<table>
<thead>
<tr>
<th>Spill Response &amp; Prevention</th>
<th>Public Works/Bud Jordan</th>
<th>Ongoing training/annual</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specify Best Management Practice</td>
<td>Responsible Dept./Person Name</td>
<td>Specify Measurable Goal</td>
</tr>
</tbody>
</table>

BMP ID #

<table>
<thead>
<tr>
<th>Specify Best Management Practice</th>
<th>Responsible Dept./Person Name</th>
<th>Specify Measurable Goal</th>
</tr>
</thead>
</table>

BMP ID #

<table>
<thead>
<tr>
<th>Specify Best Management Practice</th>
<th>Responsible Dept./Person Name</th>
<th>Specify Measurable Goal</th>
</tr>
</thead>
</table>

BMP ID #

D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting Requirements of Part I.C. (Discharges to Water Quality Impaired Waters) and Part I.D. (Total Maximum Daily Load Allocations):

20

<table>
<thead>
<tr>
<th>BMP ID #</th>
<th>Continue with DES monitoring of stormwater events for TMDL</th>
<th>Responsible Dept./Person Name</th>
<th>Completion of report anticipated Summer 2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>21</td>
<td>Salt Marsh Restoration Projects</td>
<td>Responsible Dept./Person Name</td>
<td>Ongoing Annually Specify Measurable Goal</td>
</tr>
<tr>
<td>22</td>
<td>Develop nonpoint program</td>
<td>Responsible Dept./Person Name</td>
<td>3-5 years Specify Measurable Goal</td>
</tr>
<tr>
<td>23</td>
<td>Continue update of storm drainage system map</td>
<td>Responsible Dept./Person Name</td>
<td>Ongoing/every 2 yrs Specify Measurable Goal</td>
</tr>
</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.

Earl A. Rinker, III
Printed Name
Town Administrator
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.

Print Name: Everett Jordan D.P.W.
Signature: [Signature]
Date: 12/12/02