

NAH04031

NOTICE OF INTENT



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

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 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:

<u>Town of Salem (c/o Rodney A. Bartlett, DPW)</u>	
Name	
<u>21 Cross Street</u>	
Mailing Address	
<u>Salem</u>	<u>NH 03079</u>
City/Town	State
<u>(603) 890-2150</u>	<u>RBartlett@ci.salem.nh.us</u>
Telephone Number	Email (if available)

2. Municipality Name

Town of Salem

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

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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
<u>Spickett River</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Hawkins Pond</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Widow Harris Brook</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Millville Lake</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Canobie Lake</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Wilson's Pond</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Shadow Lake</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Hittytity Brook</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Arlington Mill Reservoir</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Taylor's Reservoir</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Providence Hill Brook</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Captain Pond</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Captain Pond Brook</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>World End Pond</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>World End Brook</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify
<u>Policy Brook</u> Name	_____ Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify

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

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
<u>Stillwater Pond</u> Name	_____ Number _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify _____
<u>Townsend Pond</u> Name	_____ Number _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify _____
<u>Porcupine Brook</u> Name	_____ Number _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify _____
<u>Un-named stream East of The Lancaster Memorial School</u> Name	_____ Number _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify _____
<u>Bodwell Pond</u> Name	_____ Number _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Specify _____

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D. Storm Water Management Program Summary

1. Public Education:

1-1

BMP ID #

Maintain existing "Entering
Public Water Supply" sign at
Canobie Lake

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Maintain sign throughout
permit term

Specify Measurable Goal

1-2

BMP ID #

Broadcast informational
stormwater video on local
television

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Broadcast video years 2 – 5
of permit term

Specify Measurable Goal

1-3

BMP ID #

Develop and distribute
stormwater brochure

Specify Best Management Practice

1-4

BMP ID #

Dept. of Public Works

Responsible Dept./Person Name

Brochure developed during
permit year 2. Available at
DPW & Town Hall remainder
of permit term, and distributed
to students during years 3-5

Specify Measurable Goal

Add stormwater information to
DPWs website

Specify Best Management Practice

1-5

BMP ID #

Dept. of Public Works

Responsible Dept./Person Name

Prepare information and add to
website during year 2 and
updated annually

Specify Measurable Goal

Install 3 informational kiosks
with stormwater bulletins at
boat ramps and beaches

Specify Best Management Practice

1-6

BMP ID #

Dept. of Public Works

Responsible Dept./Person Name

Designate locations during
year 1, design kiosks during
year 2, install during year 3
and update annually

Specify Measurable Goal

Approach private beaches and
the Mall at Rockingham Park
about installing kiosks

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Private beaches/mall
contacted during permit year 3

Specify Measurable Goal

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D. Storm Water Management Program Summary (cont.)

2. Public Participation:

2-1

BMP ID #

Comply with State Public Notification Guidelines ✓

Specify Best Management Practice

All Town Departments and Boards

Responsible Dept./Person Name

Post notices on all applicable meetings

Specify Measurable Goal

2-2

BMP ID #

Publicize and maintain public complaint hotline on website

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Maintain hotline and respond to complaints from the public throughout permit term

Specify Measurable Goal

2-3

BMP ID #

Annual household Hazardous Waste Collection Day

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Collection held in September of each permit year

Specify Measurable Goal

2-4

BMP ID #

Continue mandatory recycling program including waste oil, batteries, tires, etc.

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Continue existing recycling program

Specify Measurable Goal

2-5

BMP ID #

Schedule annual Town Roadside Litter Clean-up Day

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Event scheduled in spring of each year during permit term

Specify Measurable Goal

3. Illicit Discharge Detection and Elimination:

3-1

BMP ID #

Continue inspection of new construction for correct connection to the sanitary sewer

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Continue inspection of new construction throughout permit period

Specify Measurable Goal

3-2

BMP ID #

Identify priority resource areas

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Priority resource areas identified during permit year 1

Specify Measurable Goal

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D. Storm Water Management Program Summary (cont.)

3-3

BMP ID #

Complete map of outfalls and receiving waters

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Map completed by end of permit year 4

Specify Measurable Goal

3-4

BMP ID #

Complete dry weather screening of outfalls

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

All outfalls screened during permit period

Specify Measurable Goal

3-5

BMP ID #

Stormwater Ordinance to prohibit illicit connections and illegal dumping

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Review current ordinances in year 2. If necessary, draft/amend ordinance by the end of year 4. Attempt to gain approval in year 5 and implement upon approval.

Specify Measurable Goal

3-6

BMP ID #

Develop and Implement System for Detection and Elimination of Illicit Discharges

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Illicit discharge detection program developed during year 2 and implemented during the remainder of the permit term. Maintain records on the findings of the program.

Specify Measurable Goal

4. Construction Site Runoff Control:

4-1

BMP ID #

Continue to implement Land Use Control regulations which require erosion and sediment control measures at construction sites

Specify Best Management Practice

Dept. of Public Works, Engineering Dept. and Planning Board

Responsible Dept./Person Name

Enforce regulations, including sanctions if necessary, throughout permit term

Specify Measurable Goal

4-2

BMP ID #

Maintain procedures for site and subdivision plan review which addresses water quality impacts

Specify Best Management Practice

Dept. of Public Works, Engineering Dept. and Planning Board

Responsible Dept./Person Name

Maintain review procedures throughout permit term

Specify Measurable Goal

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D. Storm Water Management Program Summary (cont.)

4-3

BMP ID #

Maintain procedure for collecting and responding to public comments and complaints

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Maintain hotline and respond to complaints from the public throughout permit term

Specify Measurable Goal

4-4

BMP ID #

Maintain construction site inspections for erosion control

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Continue site inspections throughout permit term

Specify Measurable Goal

4-5

BMP ID #

Amend Land Use Control regulations to include construction material management

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Draft amendment to regulations by end of year 2. Attempt to gain approval in years 3- 5. Implement upon approval.

Specify Measurable Goal

5. Post Construction Runoff Control:

5-1

BMP ID #

Continue to implement Land Use Control regulations which require post construction runoff control for developments

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Enforce regulations throughout permit term

Specify Measurable Goal

5-2

BMP ID #

Amend Land Use Control regulations to require developers to submit long-term O&M Plans for private structural BMPs

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Draft amendment to regulations by end of year 2. Attempt to gain approval in years 3- 5. Implement upon approval.

Specify Measurable Goal

5-3

BMP ID #

Land Use Control regulations refer to a structural BMP Manual for use by developers

Specify Best Management Practice

Dept. of Public Works

Responsible Dept./Person Name

Maintain reference to BMP Manuals throughout permit term

Specify Measurable Goal

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D. Storm Water Management Program Summary (cont.)

6. Municipal Good Housekeeping:

6-1
BMP ID #

Continue street sweeping and residual disposal practices
Specify Best Management Practice

Dept. of Public Works
Responsible Dept./Person Name

Sweep all streets once annually and dispose residuals properly
Specify Measurable Goal

6-2
BMP ID #

Continue catch basin cleaning and residual disposal practices
Specify Best Management Practice

Dept. of Public Works
Responsible Dept./Person Name

Clean all catch basins on a three year cycle and dispose residuals properly
Specify Measurable Goal

6-3
BMP ID #

Continue salting and snow removal practices
Specify Best Management Practice

Dept. of Public Works
Responsible Dept./Person Name

Continue existing practices
Specify Measurable Goal

6-4
BMP ID #

Maintain vehicle maintenance practices
Specify Best Management Practice

Dept. of Public Works
Responsible Dept./Person Name

Continue existing practices
Specify Measurable Goal

6-5
BMP ID #

Continue vehicle washing practices
Specify Best Management Practice

Dept. of Public Works
Responsible Dept./Person Name

Continue existing practices
Specify Measurable Goal

6-6
BMP ID #

Continue maintenance activities at parks and open space areas
Specify Best Management Practice

Dept. of Public Works
Responsible Dept./Person Name

Continue existing practices
Specify Measurable Goal

6-7
BMP ID #

Maintain hazardous waste storage and employee training
Specify Best Management Practice

Dept. of Public Works
Responsible Dept./Person Name

Continue existing practices
Specify Measurable Goal

6-8
BMP ID #

Implement stormwater-related employee education program
Specify Best Management Practice

Dept. of Public Works
Responsible Dept./Person Name

4-Hours of training for appropriate DPW employees during permit term
Specify Measurable Goal

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D. Storm Water 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):

N/A – no TMDL in the Town of Salem

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.

MARCIA LEIGHNINGER, TOWN MANAGER
Printed Name

Marcia Leighninger
Signature

12/29/03
Date

