

Notice of Intent (NOI) for coverage under Small MS4 General Permit

Part I: General Conditions

General Information

Name of Municipality or Organization: State

EPA NPDES Permit Number:

Primary MS4 Program Manager Contact Information

Name: Title:

Street Address Line 1

Street Address Line 2

City State Zip Code

Email: Phone Number:

Fax Number:

Other Information

Check the box if your municipality or organization was covered under the 2003 MS4 General Permit

Stormwater Management Program (SWMP) Location (web address or physical location):

Eligibility Determination

Endangered Species Act (ESA) Determination Complete? Eligibility Criteria (check all that apply): A B C D E F

National Historic Preservation Act (NHPA) Determination Complete? Eligibility Criteria (check all that apply): A B C D

MS4 Infrastructure (if covered under the 2003 permit)

Estimated Percent of Outfall Map Complete? If 100% of 2003 requirements not met, enter an estimated date of completion (MM/DD/YY):

Web address where MS4 map is published:

If outfall map is unavailable on the internet an electronic or paper copy of the outfall map must be included with NOI submission (see section V for submission options)

Regulatory Authorities (if covered under the 2003 permit)

Illicit Discharge Detection and Elimination (IDDE) Authority Adopted?: Effective Date or Estimated Date of Adoption (MM/DD/YY):

Construction/Erosion and Sediment Control (ESC) Authority Adopted?: Effective Date or Estimated Date of Adoption (MM/DD/YY):

Post- Construction Stormwater Management Adopted?: Effective Date or Estimated Date of Adoption (MM/DD/YY):

Notice of Intent (NOI) for coverage under Small MS4 General Permit (continued)

Part II: Summary of Receiving Waters

Please list the waterbody segments to which your MS4 discharges. For each waterbody segment, please report the number of outfalls discharging into it and, if applicable, any impairments.

For Massachusetts list of impaired waters click here: [Massachusetts 2010 List of Impaired Waters](http://www.mass.gov/dep/water/resources/10list6.pdf) <http://www.mass.gov/dep/water/resources/10list6.pdf>

For New Hampshire list of impaired waters click here: [New Hampshire Final 303\(d\) Materials](http://des.nh.gov/organization/divisions/water/wmb/swqa/2010/index.htm): <http://des.nh.gov/organization/divisions/water/wmb/swqa/2010/index.htm>

Source of pollutants column should be completed with a preliminary source evaluation of pollutants for discharges to impaired waterbodies (see above 303(d) lists) without an approved TMDL in accordance with Section 2.2.2a of the permit

Waterbody segment that receives flow from the MS4	Number of outfalls into receiving water segment	Pollutant list (select one at a time to add)	Click impairment at left to add, or at right to remove	Pollutant(s) causing impairment, if applicable (select one at a time to remove)
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	

		<p>Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved</p>	Add/Remove	
		<p>Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved</p>	Add/Remove	
		<p>Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved</p>	Add/Remove	
		<p>Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved</p>	Add/Remove	
		<p>Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved</p>	Add/Remove	
		<p>Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total)</p>	Add/Remove	

		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	
		Chlorophyll-a Dissolved oxygen saturation Escherichia coli Mercury Nitrogen (Total) Oxygen, Dissolved	Add/Remove	

Click to lengthen table

Notice of Intent (NOI) for coverage under Small MS4 General Permit (continued)

Part III: Stormwater Management Program Summary

MCM 2: Public Involvement and Participation

BMP Categorization	Brief BMP Description (enter your own text to override the drop down menu)	Responsible Department/ Parties	Additional Description/ Measurable Goal	Beginning Year of BMP implemen tation
Public Review	SWMP Review			
Public Participation				

Notice of Intent (NOI) for coverage under Small MS4 General Permit (continued)

Part III: Stormwater Management Program Summary

MCM 3: Illicit Discharge Detection and Elimination (IDDE)

BMP Categorization (enter your own text to override the drop down menu)	BMP Description	Responsible Department/Parties (enter your own text to override the drop down menu)	Measurable Goal (all text can be overwritten)
SSO inventory			Develop SSO inventory within 1 year of effective date of permit
Storm sewer system map			Update map within 2 years of effective date of permit and complete full system map 10 years after effective date of permit
Written IDDE program development			Complete within 1.5 years of the effective date of permit
Implement IDDE Program			Implement catchment investigations according to program and permit conditions
Employee Training			Train annually
Conduct dry weather screening			Conduct in accordance with outfall screening procedure and permit conditions
Conduct wet weather screening			Conduct in accordance with outfall screening procedure and permit conditions
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	

Notice of Intent (NOI) for coverage under Small MS4 General Permit (continued)

Part III: Stormwater Management Program Summary

MCM 5: Post-Construction Stormwater Management in New Development and Redevelopment

BMP Categorization (enter your own text to override the drop down menu or entered text)	BMP Description	Responsible Department/ Parties (enter your own text to override the drop down menu)	Measurable Goal (all text can be overwritten)	Beginning Year of BMP implementation
As-built plans for on-site stormwater control	The procedures to require submission of as-built drawings and ensure long term operation and maintenance will be a part of the SWMP.		Require submission of as-built plans for completed projects	
Inventory and priority ranking of MS4-owned properties that may be retrofitted with BMPs	Conduct detailed inventory of MS4 owned properties and rank for retrofit potential		Complete 4 years after permit effective date	
Allow green infrastructure	Develop a report assessing existing local regulations to determine the feasibility of making green infrastructure practices allowable when appropriate site conditions exist		Complete 4 years after permit effective date	
Street design and parking lot guidelines	Develop a report assessing requirements that affect the creation of impervious cover. The assessment will help determine if changes to design standards for streets and parking lots can be modified to support low impact design options.		Complete 4 years after permit effective date	
Ensure any stormwater controls or management practices for new development and redevelopment will prevent or minimize impacts to water quality.	Adoption, amendment or modification of a regulatory mechanism to meet permit requirements		Complete 2 years after permit effective date	

Notice of Intent (NOI) for coverage under Small MS4 General Permit (continued)

Part III: Stormwater Management Program Summary

MCM 6: Municipal Good Housekeeping and Pollution Prevention

BMP Categorization (enter your own text to override the drop down menu or entered text)	BMP Description	Responsible Department/ Parties (enter your own text to override the drop down menu)	Measurable Goal (all text can be overwritten)	Beginning Year of BMP implementation
Create written O&M procedures for parks and open spaces, buildings and facilities, and vehicles and equipment			Complete 2 years after permit effective date	
Inventory all permittee-owned parks and open spaces, buildings and facilities (including their storm drains), and vehicles and equipment			Complete 2 years after permit effective date	
Establish and implement program for repair and rehabilitation of MS4 infrastructure			Complete 2 years after permit effective date	
Stormwater Pollution Prevention Plan (SWPPP) for maintenance garages, transfer stations and other waste-handling facilities			Complete 2 years after permit effective date	
Catch Basin Cleaning				
Street Sweeping Program				
Road Salt use optimization program				

Notice of Intent (NOI) for coverage under Small MS4 General Permit (continued)

Part IV: Notes and additional information

Use the space below to provide any additional information about your MS4 program

Click to add text

Notice of Intent (NOI) for coverage under Small MS4 General Permit (continued)**Part V: 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.

Name:

Title:

Signature Field

Date:

NOI Submission

Please submit the form electronically via email using the "submit by Email" button below or send in a CD with your completed NOI. You may also print and submit via mail at the address below if you choose not to submit electronically. Outfall map required in Part I of the NOI (if applicable) can be submitted electronically as an email attachment OR as a paper copy.

Permittees that choose to submit their NOI electronically by email or by mailing a CD with the completed NOI form to EPA, will be able to download a partially filled Year 1 Annual Report at a later date from EPA.

Submit by Email

Submit by email using this button. Or, send an email with attachments to: stormwater.reports@epa.gov

Save

Save NOI for your records

EPA Submittal Address:

United States Environmental Protection Agency
5 Post Office Square - Suite 100
Mail Code - OEP06-1
Boston, Massachusetts 02109-3912
ATTN: Newton Tedder

State Submittal Address

Massachusetts Department of Environmental Protection
One Winter Street - 5th Floor
Boston, MA 02108
ATTN: Fred Civian