

Notice of Intent (NOI) for coverage under Small MS4 General Permit Page 1 of 18

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

Stormwater Management Program (SWMP) Location (web address or physical location, if already completed):

Eligibility Determination

Endangered Species Act (ESA) Determination Complete?

Eligibility Criteria (check all that apply): A B C

National Historic Preservation Act (NHPA) Determination Complete?

Eligibility Criteria (check all that apply): A B C

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

MS4 Infrastructure (if covered under the 2003 permit)

Estimated Percent of Outfall Map Complete? (Part II, III, IV or V, Subpart B.3.(a.) of 2003 permit) 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? <small>(Part II, III, IV or V, Subpart B.3.(b.) of 2003 permit)</small>	<input type="text"/>	Effective Date or Estimated Date of Adoption (MM/DD/YY):	<input type="text"/>
Construction/Erosion and Sediment Control (ESC) Authority Adopted? <small>(Part II, III, IV or V, Subpart B.4.(a.) of 2003 permit)</small>	<input type="text"/>	Effective Date or Estimated Date of Adoption (MM/DD/YY):	<input type="text"/>
Post-Construction Stormwater Management Adopted? <small>(Part II, III, IV or V, Subpart B.5.(a.) of 2003 permit)</small>	<input type="text"/>	Effective Date or Estimated Date of Adoption (MM/DD/YY):	<input type="text"/>

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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.

New Hampshire list of impaired waters: <http://des.nh.gov/organization/divisions/water/wmb/swqa/>

Check off relevant pollutants for discharges to impaired waterbodies (see above 303(d) lists) without an approved TMDL in accordance with part 2.2.2 of the permit. List any other pollutants in the last column, if applicable.

Waterbody segment that receives flow from the MS4	Number of outfalls into receiving water segment	Chloride	Chlorophyll-a	Dissolved Oxygen/DO Saturation	Nitrogen	Oil & Grease/ PAH	Phosphorus	Solids/ TSS/ Turbidity	E. coli	Enterococcus	Other pollutant(s) causing impairments
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Part III: Stormwater Management Program Summary (continued)

MCM 2: Public Involvement and Participation

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

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Part III: Stormwater Management Program Summary (continued)

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

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Part III: Stormwater Management Program Summary (continued)

MCM 4: Construction Site Stormwater Runoff Control

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)
Site inspection and enforcement of Erosion and Sediment Control (ESC) measures	Complete written procedures of site inspections and enforcement procedures		Complete by the end of Year 1
Site plan review	Complete written procedures of site plan review and begin implementation		Complete by the end of Year 1
Erosion and Sediment Control	Adoption of requirements for construction operators to implement a sediment and erosion control program		
Waste Control	Adoption of requirements to control wastes, including but not limited to, discarded building materials, concrete truck wash out, chemicals, litter, and sanitary wastes		

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Part III: Stormwater Management Program Summary (continued)

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)
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 within 2 years of project completion
Target properties to reduce impervious areas	Complete an inventory and priority ranking of permittee-owned property and existing infrastructure that could be retrofitted with BMPs designed to reduce the frequency, volume and pollutant loads of stormwater discharges to its MS4 through the mitigation of impervious area		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

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Part III: Stormwater Management Program Summary (continued)

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				

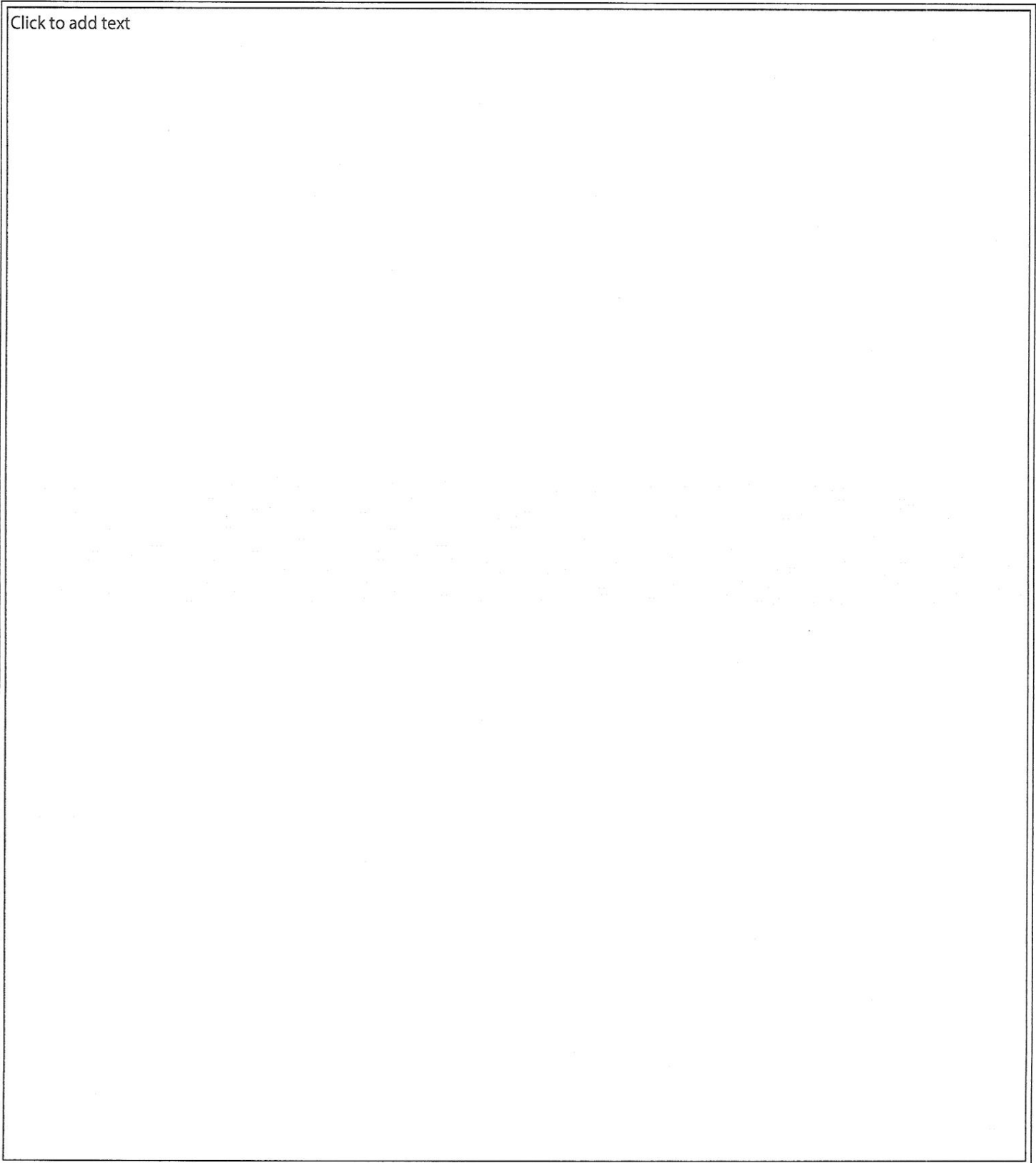
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Part IV: Notes and additional information

Use the space below to indicate the part(s) of 2.2.2 that you have identified as not applicable to your MS4 and provide all supporting documentation below or attach additional documents if necessary.

Provide any additional information about your MS4 program below.

Click to add text



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 gathered and evaluated 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, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I have no personal knowledge that the information submitted is other than 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:

Date:

[To be signed according to Appendix B, Subparagraph B.11, Standard Conditions]

Note: When prompted during signing, save the document under a new file name