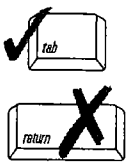
NOTICE OF INTENT

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

NEW HAMPSHIRE DEPARTMENT OF Environmental Services

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:

Town of Auburn
Name

PO Box 309
Mailing Address

Auburn
City/Town

NH 03032
State and Zip Code

603-483-5052
Telephone Number

Townofauburn@townofauburnnh.com
Email (if available)

2. Municipality Name

Town of Auburn
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:

NHDOT, Manchester Water Works

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: Name	No. of Outfalls: Number	Listed as Impaired?	Impairment: Specify
Neal Brook	Unknown	☐ Yes ☒ No	
Severance Brook	Unknown	☐ Yes ☒ No	
Unknown 1	Unknown	☐ Yes ☒ No	
Fan Merrill	Unknown	☐ Yes ☒ No	
Fan Merrill unnamed trib.	Unknown	☐ Yes ☒ No	
Unknown 2	Unknown	☐ Yes ☒ No	
Unknown 3	Unknown	☐ Yes ☒ No	
Unknown 4	Unknown	☐ Yes ☒ No	
Unknown trib. 5 - seasonal	Unknown	☐ Yes ☒ No	
Unknown trib. 6 - seasonal	Unknown	☐ Yes ☒ No	
Unknown trib. 7 - seasonal	Unknown	☐ Yes ☒ No	
Cohas Brook	Unknown	☐ Yes ☒ No	
Lake Massabesic	Unknown	☐ Yes ☒ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	

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D. Storm Water Management Program Summary

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1A	Lawn & Garden Activities	Board of Selectmen	Brochures & info posted on website by 2nd year
1B	Proper disposal of household hazardous waste	Board of Selectmen	Brochures & info posted on website by 2nd year
1C	Classroom education on storm water	Board of Selectmen	Educators trained, classroom material developed by year 3
1D	Road signs	Road Agent	Install by end of year 1
1E	Info page in annual town report	Board of Selectmen	First report in 2003 Annual Report

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2A	Storm drain stenciling	Board of Selectmen/Road Agent	Organize with local youth organizations and HSC
2B	Hazardous Waste Collection Day	Board of Selectmen	Annual event
2C	Create/Organize database of volunteers/admin	Town Hall Admin Staff	Ongoing
2D	Meet with Manchester Water Works	Selectmen and Conservation Commission	Annual meeting
2E	Meet with DOT	Selectmen/Conservation Commission	Annual meeting

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NEW HAMPSHIRE DEPARTMENT OF Environmental Services

D. Storm Water Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

3A BMP ID #		
Map existing drain systems and outfalls Specify Best Management Practice	Road Agent Responsible Dept./Person Name	Create Map Specify Measurable Goal
3B BMP ID #		
Develop IDDE Program Specify Best Management Practice	Board of Selectmen/Zoning Officer Responsible Dept./Person Name	Report progress to Selectmen two times annually Specify Measurable Goal
3C BMP ID #		
Develop ordinance to enforce IDDE Program Specify Best Management Practice	Zoning Officer Responsible Dept./Person Name	Progress Report to Selectmen by Town Meeting Specify Measurable Goal
3D BMP ID #		
Brochures informing of hazards of illicit dumping Specify Best Management Practice	Board of Selectmen Responsible Dept./Person Name	Created and distributed by year 3 Specify Measurable Goal
3E BMP ID #		
Stream Monitoring Specify Best Management Practice	Town engineer/Road Agent Responsible Dept./Person Name	Plan in place by year 3 Specify Measurable Goal

4. Construction Site Runoff Control:

4A BMP ID #		
Notify contractors of need to file Specify Best Management Practice	Building Inspector Responsible Dept./Person Name	In place Specify Measurable Goal
4B BMP ID #		
Erosion control procedures Specify Best Management Practice	Zoning Officer Responsible Dept./Person Name	In place (see Subdivision and Site Plan Regulations) Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

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D. Storm Water Management Program Summary (Cont.)

5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
5A	Erosion Control Procedures	Zoning Officer	In place (see Subdivision and Site Plan Regulations)
5B	Stream Monitoring	Town Engineer/Road Agent	Plan in place by year 3

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6A	Roadway & Bridge maintenance	Board of Selectmen/Road Agent	Report annually
6B	Storm drain and catch basin cleaning	Road Agent	Report annually
6C	Road salt application and storage	Road Agent	Report annually
6D	Used oil recycling	Solid Waste Commission	Procedure in place
6E	Employee Training	Zoning Officer/Road Agent	Participate in appropriate seminars and training

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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):

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

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.

Harland Eaton, Chairman, Board of Selectmen, Town of Auburn
Printed Name

Harland Eaton
Signature

August 7, 2003
Date

SWMP Implementation Schedule

Regulated MS4: _____

Town/City: Auburn, New Hampshire

	PERMIT YEAR ONE				PERMIT YEAR TWO				PERMIT YEAR THREE				PERMIT YEAR FOUR				PERMIT YEAR FIVE				
BMP ID #	**Spring 03**	**Summer 03**	**Fall 03**	**Winter 03-04**	**Spring 04**	**Summer 04**	**Fall 04**	**Winter 04-05**	**Spring 05**	**Summer 05**	**Fall 05**	**Winter 05-06**	**Spring 06**	**Summer 06**	**Fall 06**	**Winter 06-07**	**Spring 07**	**Summer 07**	**Fall 07**	**Winter 07-08**	**Next Permit**
1A						X															
1B						X															
1C																					
1D			X																		
1E	X				X				X				X				X				
2A					X																
2B	X				X				X				X				X				
2C	←																			→	
2D		X					X				X				X				X		
2E		X					X				X				X				X		
3A	←																			→	
3B	X		X		X		X		X				X		X		X		X		
3C	X				X				X				X				X				
3D										X											
3E										X											
4A	←																			→	
4B	←																			→	
5A	←																			→	
5B								X				X									
6A			X				X				X				X				X		
6B			X				X				X				X				X		
6C				X				X				X				X				X	
6D	←																			→	
6E	←																			→	

←→ On going

←⋯→ In place