Hand-enter Your Transmittal Number → W 036290 (logged MS)

Your unique Transmittal Number can be accessed through DEP's web site or by calling the DEP InfoLine as listed on the last page of this document

Massachusetts Department of Environmental Protection

Transmittal Form for Permit Application and Payment

FAC 384777 RO 384778

Instructions

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Your check should be made payable to the Commonwealth of Massachusetts. Please mail your check along with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three (3) copies of this form will be needed.

Copy 1 (the original) must accompany your permit application. **Copy 2** must accompany your fee payment. **Copy 3** should be retained for your records.

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to DEP, P.O. Box 4062, Boston, MA 02211

For DEP Use Only
Permit No._____
Rec'd Date_____
Reviewer_____

A. Application Information

DEP Permit Code (the 7 or 8 character code from first page of permit application instructions): BRPWM08A
Name of Permit Category: NPDES Stormwater General Permit Notice of Intent
Type of Project or Activity: Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

AUG - 1 2003

DEP - CERO

B. Applicant Information (Firm or Individual)

Name of Firm: Town of Boxford			
Or, if party needing this approval is clearly an individual:			
Individual's Last Name:	First Name		MI
Street Address: 15 Spofford Road			
City/Town: Boxford	State: MA	Zip Code: 01921	Telephone Number: (978) 352-6555 ext.
Contact: David E. Durkee, DPW Superintendent	e-mail address (optional): ddurkee@town.boxford.ma.us		

C. Facility, Site or Individual Requiring Approval

Name of Facility, Site or Individual: Town of Boxford	DEP Facility Number (if Known)		
Street Address: 200 Washington Street	e-mail address: (optional)		
City/Town: Boxford	State: MA	Zip Code: 01921	Telephone Number: (978) 352-8148 ext.
Contact: Charlene E. Johnston	LSP Number (21E only)		

D. Application Prepared by (if different from Section B)

Name of Individual or Firm: Weston & Sampson Engineers, Inc.			
Address: 5 Centennial Drive			
City/Town: Peabody	State: MA	Zip Code: 01960	Telephone Number: (978) 532-1900 ext.2221

E. Permit - Project Coordination

Is this project subject to MEPA review? ☐ yes ☒ no

If yes, indicate the project's EOEA file number (assigned when an Environmental Notification Form is submitted to the MEPA unit)

EOEA # Is an Environmental Impact Report Required? ☐ yes ☒ no

Is this application part of a larger project for which two or more DEP permits are being or will be sought? ☐ yes ☒ no

List any other DEP permits that apply to this project:

Permit Category	Date of Submission (tentative or actual)	Transmittal Number (if application already submitted)

F. Amount Due

Special Provisions:

☒ Fee Exempt* (city, town or municipal housing authority)(state agency if fee is $100 or less)

☐ Hardship Request [payment extensions according to 310 CMR 4.04(3)(c)]

☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10)

*There are no fee exemptions for 21E, regardless of applicant status

Check #:	Dollar Amount:	Date:
Please make check payable to the Commonwealth of Massachusetts and mail check and one copy of this form to DEP, P.O. Box 4062, Boston, MA 02211		

rev: 03/21/00

Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Watershed Management

BRP WM 08A NPDES Stormwater General Permit

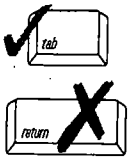
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W036290
Transmittal Number

Facility ID (if known)

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 DEP General Permit issued jointly with EPA for stormwater 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 information required on BRP WM 08A, including the Stormwater Management Program Summary and Time Frames form, must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a stormwater management program.**

B. Applicant Information

1. Small MS4 Operator/Owner Information:

David E. Durkee, DPW Superintendent
Name

15 Spofford Road
Mailing Address

Boxford
City/Town

MA
State

(978) 352-6555
Telephone Number

ddurkee@town.boxford.ma.us
Email (if available)

2. Municipality Name

Boxford
City/Town

3. Legal Status:

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

☐ Other public entity: _____
Specify Public Entity

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

Mass State Highways (Rte. 95, Rte. 133, and Rte. 97)

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

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
Lowe Pond	Unknown	☒ Yes ☐ No	Metals; Exotic Species
Unnamed Tributary to Sperrys Pond	Unknown	☐ Yes ☒ No	
Fish Brook	Unknown	☐ Yes ☒ No	
Howes Pond	Unknown	☐ Yes ☒ No	
Fourmile Pond	Unknown	☐ Yes ☒ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	

D. Stormwater Management Program Summary

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1a	Distribute/Post Nonpoint Source Pollution Posters	DPW Superintendent	Post in all schools and town buildings
1b	Air Stormwater Message on Local Cable Access Channel	DPW Superintendent	Post one message every month
1c	Add Stormwater Information to Town's Website	Web Committee	Update information quarterly to address seasonal concerns

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2a	Form Stormwater Advisory Committee	DPW Superintendent	Hold meetings twice per year
2b	Hazardous Waste Collection	Recycling Committee	Hold waste collection annually
2c	Waste Oil Collection & Recycling	Recycling Committee	Collect waste oil from residents once per month
2d	Implement a Catch Basin Stenciling Program	DPW Superintendent	Stencil 25% of catch basins each year
2e	Hold a Stream Clean-up Day	Stormwater Advisory Committee	Hold clean-up day annually

D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
3a	Map Outfalls and Receiving Waters	DPW Superintendent/ Conservation Department	Map approx. 25% outfalls that drain urbanized areas each yr.
3b	Review Existing Bylaws and Regulations	Stormwater Advisory Committee	Determine if existing bylaws & regs fulfill EPA requirements
3c	Develop Illicit Discharge Detection & Elimination Plan	Stormwater Advisory Committee	Make recommendations for inclusion into proposed plan
3d	Develop/Modify General Illicit Discharge Bylaw	Stormwater Advisory Committee	Propose recommendations for modifying/developing bylaw
3e	Present Bylaw for Town Meeting Action	Stormwater Advisory Committee	Make Presentations for Town Meeting Action

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4a	Review Existing Site Inspection Practices	Planning Department/ Conservation Department	Determine if existing practices fulfill EPA requirements
4b	Develop/Modify Site Inspection Program	Planning Department/ Conservation Department	Make recommendations for modifying existing program
4c	Review Existing Bylaws and Regulations	Stormwater Advisory Committee	Determine if existing bylaws & regs fulfill EPA requirements
4d	Develop/Modify Bylaws for Construction Site Runoff	Stormwater Advisory Committee	Propose recommendations for modifying/developing bylaw
4e	Present Bylaw for Town Meeting Action	Stormwater Advisory Committee	Make Presentations for Town Meeting Action

D. Stormwater Management Program Summary (Cont.)

5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
5a	Review Existing Site Inspection Practices	Planning Department/ Conservation Department	Determine if existing practices fulfill EPA requirements
5b	Develop/Modify Inspection & Maintenance Practices	Planning Department/ Conservation Department	Make recommendations for modifying existing practices
5c	Review Existing Bylaws and Regulations	Stormwater Advisory Committee	Determine if existing bylaws & regs fulfill EPA requirements
5d	Develop/Modify Bylaws for Post-Construction Site Runoff	Stormwater Advisory Committee	Propose recommendations for modifying/developing bylaw
5e	Present Bylaw for Town Meeting Action	Stormwater Advisory Committee	Make Presentations for Town Meeting Action

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6a	Street Sweeping Program	DPW Superintendent	Sweep all streets once per year
6b	Catch Basin Cleaning Program	DPW Superintendent	Clean all catch basins once per year
6c	Perform site visits to examine existing practices at facilities	DPW Superintendent	Target all applicable municipal facilities
6d	Train municipal employees at each facility	DPW Superintendent	Target all applicable municipal facilities
6e	Perform follow-ups to ensure required practices are met	DPW Superintendent	Target all applicable municipal facilities

D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

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.

Alan J. Benson, Town Administrator
Printed Name

Signature

7-30-03
Date

Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Watershed Management

BRP WM 08A NPDES Stormwater General Permit Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

F. Storm Water Management Program TIME FRAMES

Transmittal Number W036290

Facility ID (if known)

BMP ID #	PERMIT YEAR ONE				PERMIT YEAR TWO				PERMIT YEAR THREE				PERMIT YEAR FOUR				PERMIT YEAR FIVE				
	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																					
1b																					
1c			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
	(FORM COMMITTEE)																				X
2a						X		X		X		X									
2b			X				X				X			X		X		X		X	
2c															X				X		X
2d																					X
2e					X				X				X				X				
																					X
3a																					
3b																					
3c																					
3d																					
3e																					
4a													(YEARS 4 & 5 ARE FOR TOWN MEETING ACTION IF REQUIRED)								
4b																					
4c																					
4d																					
4e													(YEARS 4 & 5 ARE FOR TOWN MEETING ACTION IF REQUIRED)								
5a																					
5b																					
5c																					
5d																					
5e													(YEARS 4 & 5 ARE FOR TOWN MEETING ACTION IF REQUIRED)								
6a	X				X				X				X				X				
6b			X				X				X										X
6c															X				X		X
6d																					
6e																					X
																					X