1194

Hand-enter Your Transmittal Number → **W 035262**

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

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

Type of Project or Activity:
NOI for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

B. Applicant Information (Firm or Individual)

Name of Firm:
Town on Dracut

Or, if party needing this approval is clearly an individual:

Individual's Last Name:	First Name	MI
NA	NA	

Street Address
Town Hall, 62 Arlington Street

City/Town	State	Zip Code	Telephone Number
Dracut	MA	01826	(978) 453-4557 ext.

Contact:	e-mail address (optional)
Mr. Glen Edwards	

C. Facility, Site or Individual Requiring Approval

Name of Facility, Site or Individual	DEP Facility Number (if Known)
Dracut Storm Sewer System (MS4)	
Street Address	e-mail address: (optional)

City/Town	State	Zip Code	Telephone Number
Dracut	MA		( ) ext.

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

Name of Individual or Firm:
Camp Dresser & McKee Inc.

Address
50 Hampshire Street

City/Town	State	Zip Code	Telephone Number
Cambridge	MA	02139	(617) 452-6638 ext.

Contact:	LSP Number (21E only)
Jennifer L. Rogers	

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

JUL 31 2003
MUNICIPAL ASSISTANCE UNIT

rev: 03/21/00

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

BRP WM 08A NPDES Stormwater General Permit

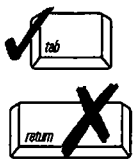
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W035262
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:

Mr. Glen Edwards, Town Planner + Assistant Town Mgr.
Name

Town Hall, 62 Arlington Street
Mailing Address

Dracut
City/Town

MA
State

(978) 453-4557
Telephone Number

Email (if available)

2. Municipality Name

Town of Dracut, Massachusetts
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:

Long Pond, Beaver Brook, Richardson Brook

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
Merrimack River	Unknown	☒ Yes ☐ No	Pathogens, metals, nutrients priority organics
Beaver Brook		☒ Yes ☐ No	Pathogens, oil and grease, trubidity, other
Long Pond		☒ Yes ☐ No	Noxious Aquatic Plants
Richardson Brook		☐ Yes ☒ No	
Double Brook		☐ Yes ☒ No	
Muscuppic Lake		☐ Yes ☒ No	
Peppermint Brook		☐ Yes ☒ No	
Bartlett Brook		☐ Yes ☒ No	
Peters Pond		☐ Yes ☒ No	
Trout Brook		☐ Yes ☒ No	
Nickel Mine Brook		☐ Yes ☒ No	
various unnamed streams, small ponds		☐ 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
1-1	Develop Brochures for distribution	Department of Public Works (DPW)	Develop brochures, years 1-2 Brochures available, years 3-5
1-2	Annual update of SWMP	DPW	Update in Annual Report and at Selectmen's meeting

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2-1	Comply with State Public Notification Guidelines at MGL Chapter 39 Section 23B	Town Clerk and relevant dept.	Notices posted in Town Hall and current locations.
2-2	Hold Annual Household Hazardous Waste Day	DPW/Town Clerk/Board of Health	One hazardous waste collection day held per year
2-3	Stencil catch basins with "don't dump" message	DPW	Number of catch basins stenciled

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
3-1	Map outfalls/ receiving waters	DPW	Create map 1st year
3-2	Enforce Existing Storm Sewer Bylaw	DPW/Board of Health	Bylaw maintained and enforced
3-3	Develop program to identify non-stormwater discharges	DPW/ Board of Health	Plan developed and implemented
3-4	Develop program to remove illicit discharges	DPW/ Board of Health	Number of illicit connections found and removed
3-5	Enforce existing Bylaw requiring inspection of correct connections to sanitary sewer	Board of Health	Bylaw maintained and enforced

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4-1	Continue to Apply Standard 8 of the Mass Stormwater Policy	Engineering Department, Bldg Permit Check-Off Form	Applied to all construction projects under conservation commission jurisdiction
4-2	Develop Bylaw Requiring Erosion & Sedimentation Control Plan, WMP, & Plan review of sites > 1 acre	Planning Board, Conservation Commission, Engineering Dep't, or DPW, as applicable	Review, develop, and present new draft bylaw for Town Meeting approval
4-3	Develop Procedure for Receipt & Consideration of Public Comment	Zoning, Conservation Commission, or Planning Board, as applicable	Procedure for public comment developed and maintained/implemented

D. Stormwater Management Program Summary (Cont.)

4. Construction Site Runoff Control (cont.):

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4-4	Check Erosion Control Measures & Construction Material Management on site	Engineering/ Conservation Commission	Checklist of erosion control, construction material mgt. BMP's developed

5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
5-1	Develop Bylaw Applying MSP Stds 2,3,4,7, & 9 to Town	DPW/Conservation Commission/Engineering	Draft bylaw and present to Town Meeting
5-2	Specify a Stormwater BMP Manual	DPW/Conservation Commission/Engineering	BMP manual selected
5-3	Develop Bylaw to maintain private structural BMP's	DPW/Conservation Commission/Engineering	Draft bylaw and present to Town Meeting
5-4	Develop procedures to maintain existing BMP's	DPW/Conservation Commission/Engineering	Create BMP inventory and maintenance plan

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-1	Identify sensitive receptors	Conservation Commission	List of sensitive receptors
6-2	Annual catch basin cleaning	DPW	Continue current program
6-3	Annual street sweeping	DPW	Continue current program

D. Stormwater Management Program Summary (cont.)

6. Municipal Good Housekeeping (cont.):

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-4	Maintain salt storage cover	DPW	Continue Program
6-5	Develop/Implement employee education program	DPW	Four hours annual training for select employees
6-6	Good housekeeping for storing hazardous materials	DPW	Relevant amount of hazardous materials used
6-7	Minimize chemicals: playing field, parks, landscape	DPW	Relevant amount of herbicides and fertilizers used

7. BMPs for Meeting TMDL: **NA**

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.

Glen Edwards, Town Planner
Printed Name

Glen Edwards
Signature

7/29/03
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 W035262

Facility ID (if known)

	PERMIT YEAR ONE				PERMIT YEAR TWO				PERMIT YEAR THREE				PERMIT YEAR FOUR				PERMIT YEAR FIVE				
BMP ID #	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	Spring 08	Next Permit
1-1																					
1-2				X				X				X				X				X	
2-1																					
2-2		X				X				X				X				X			
2-3				X				X				X				X				X	
3-1																					
3-2																					
3-3																					
3-4																					
3-5																					
4-1																					
4-2					Present new draft bylaw to Board of Selectmen annually thereafter, and enforce once passed.																
4-3																					
4-4																					
5-1																					
5-2																					
5-3					Present new draft bylaw to Board of Selectmen annually thereafter, and enforce once passed.																
5-4																					
6-1		X																			
6-2				X				X				X				X				X	
6-3				X				X				X				X				X	
6-4																					
6-5																					
6-6																					
6-7																					

Cookinham, Renee (Gable)

From: Swant, Julie
Sent: Monday, July 28, 2003 2:38 PM
To: Cookinham, Renee (Gable)
Subject: FW: Dracut NOI forms

Renee,

I am not sure what Jen R. wants me to do with this. I printed out letters for her this morning and gave them to Fred for signature.

But, it she expects me to print out a copy of each section, then make 4 copies and insert section dividers, I wish she would go through you.

I have on my plate now:

- ☐ PWD Cumberland
- ☐ PWD Cape Elizabeth
- ☐ New Britain for John Pate

Jeff said that he would like the PWD drafts to go out as quickly as possible and I wanted for finish Cumberland at least today.

What do you think?

Julie

-----Original Message-----
From: Rogers, Jennifer
Sent: Monday, July 28, 2003 12:40 PM
To: McNeill, Frederick; Swant, Julie
Cc: Peters, Krista
Subject: Dracut NOI forms

Fred, Julie,
Please find attached the following forms for Dracut.
Fred, as discussed, the town will need four original NOI packets for signature. the NOI packet to be submitted original signed to both DEP and EPA consists of the following:

tr-formwDracut.doc (simple transmittal form)
wm08aappDracut.doc (page 6 needs to be signed by town on all four originals)
wm08atimDracut.xls (table to attach to the end of wm08aappDracut.doc)

CDM to submit to both EPA and DEP with cover letter (which is set to go), fedex for receipt on Wednesday (Julie has labels set). one original signed each to town and cdm, as discussed.
Any changes to Exsummary.doc, section 1 - cm1.doc, etc. can be made later. but any changes to these documents should be reflected on wm08aappDracut.doc prior to submittal, if affected.

thank you,
I'm in meetings this afternoon. please call cell if questions 617-594-2492 or 617-921-4498 if unable to reach me on other cell line.

Krista,
Fred will likely be bringing the forms directly down to Dracut tomorrow (Tuesday) for them to sign. If they sign at that time, we may be all set. Fred will bring back up and put with cover letters for fedex'ing out. Julie Swant has prepared the labels. I assume Fred will let you know if we still need you to pick up the documents. Thank you so much for offering to help !!


Exsummary.doc


section 1 - cm1.doc


section 2 - cm2.doc


section 3 - cm3.doc


section 4 - cm4.doc


section 5 - cm5.doc


section 6 - cm6.doc


Section 7_eligibility.doc


Section 8_waters.doc


tr-formwDracut.doc


wm08aappDracut.doc


wm08atimDracut.xls

Jennifer L. Rogers, P.E.

CDM listen.think.deliver.
Camp Dresser & McKee, Inc.
One Cambridge Place
50 Hampshire Street
Cambridge, Massachusetts 02139
<http://www.cdm.com/> <<mailto:rogersjl@cdm.com>>
phone (direct): (617) 452-6638
fax (direct): (617) 452-8638

"Behold the turtle; he makes progress only when he sticks his head out" - James Bryant Conant