MAR041113 SP

Hand-enter Your Transmittal Number → W 040761 (Transmittal Number)

Your unique Transmittal Number can be accessed online: http://www.state.ma.us/scripts/dep/trasmfrm.stm or call DEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection

Transmittal Form for Permit Application and Payment

1. Please type or print. A separate Transmittal Form must be completed for each permit application.
2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.
3. Three 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. Permit Information

BRPWM08A — Permit Code: 7 or 8 character code from permit instructions
Stormwater — Name of Permit Category
NPDES Stormwater General Permit — Type of Project or Activity

B. Applicant Information – Firm or Individual

City of Fall River — Name of Firm - Or, if party needing this approval is an individual enter name below:

Last Name of Individual | First Name of Individual | MI

One Government Center - 3rd Floor — Street Address

City/Town	State	Zip Code	Telephone # and extension
Fall River	MA	02722	508-324-2320

Mr. Charles Boulay ✓ — Contact Person
e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

City of Fall River Storm Drainage System — Name of Facility, Site or Individual
DEP Facility Number (if Known) | Federal I.D. Number (if Known)
same as above — Street Address
e-mail address (optional)

City/Town	State	Zip Code	Telephone # and extension

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

Camp Dresser & McKee Inc. — Name of Firm Or Individual
50 Hampshire Street — Address

City/Town	State	Zip Code	Telephone # and extension
Cambridge	MA	02139	617452-6000

Brent McCarthy — Contact Person
LSP Number (21E only)

E. Permit - Project Coordination

Is this project subject to MEPA review? ☐ yes ☒ no If yes, enter the project's EOEA file number - assigned when an Environmental Notification Form is submitted to the MEPA unit: EOEA file number _____
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 # if application already submitted

MUNICIPAL ASSISTANCE UNIT
AUG 04 2003

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 Number | 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

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

BRP WM 08A NPDES Stormwater General Permit

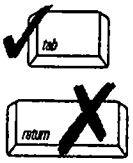
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W040761
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:

City of Fall River
Name

One Government Center – 3rd Floor
Mailing Address

Fall River
City/Town

MA
State

508-324-2320
Telephone Number

Email (if available)

2. Municipality Name

City of Fall River
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:

NA

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

MUNICIPAL ASSISTANCE UNIT
AUG 04 2003

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
Mount Hope Bay	Unknown	☒ Yes ☐ No	Toxicity, nutrients, organic enrichment/low DO, pathogens, thermal modifications
Taunton River	Unknown	☒ Yes ☐ No	organic enrichment, low DO, pathogens
Copicut River (outside of MS4 area)	Unknown	☒ Yes ☐ No	Priority organics, metals
North Watuppa Pond	Unknown	☐ Yes ☒ No	
South Watuppa Pond	Unknown	☐ Yes ☒ No	
Quequechan River	Unknown	☐ Yes ☒ No	
Sucker Brook	Unknown	☐ Yes ☒ No	
Bush Pond	Unknown	☐ Yes ☒ No	
Steep Brook	Unknown	☐ Yes ☒ No	
Unnamed streams tributary to Taunton River, North Watuppa Pond, and South Watuppa Pond	Unknown	☐ Yes ☒ No	
Unnamed streams, ponds, and wetlands	Unknown	☐ 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	Article/brochure about stormwater mailed to residents and businesses	Conservation Commission	Article/brochure distributed annually
1-2	Update City website to include stormwater management information	Conservation Commission	City website updated
1-3	Continue to sponsor annual Coastal Cleanup	Conservation Commission	Hold annual City-sponsored Coastal Cleanup Days
1-4	Stormwater education program for organizations and/or schools	Conservation Commission/Sewer Commission	Presentation given to at least one group or school annually
1-5	Educate dog owners about picking up dog waste	Sewer Commission/City Clerk	Pet waste fact sheets provided to dog owners with annual dog registration beginning in second permit year
1-6	Install and maintain signs for stormwater management and pet waste clean-up at schools and parks	Parks Dept/School Dept	Signs installed at schools and parks by end of second permit year. Inspect signs during spring of each permit year.
1-7	Staff table at annual Earth Day event	Conservation Commission/Sewer Commission	Table staffed annually starting in second permit year, number of brochures handed out

D. Stormwater Management Program Summary (Cont.)

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	City Clerk	Notices posted in designated locations
2-2	Stencil catch basins with don't dump message	Conservation Commission/Sewer Commission	25 catch basins stenciled per year for years 2 through 5 of first permit term.

3. Illicit Discharge Detection and Elimination:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
3-1	Conduct dry weather outfall screening	Sewer Commission	Number of outfalls screened
3-2	Continue to update GIS mapping of the stormwater collection system	Sewer Commission/Planning Department	Annual update of GIS stormwater mapping layers with any new or revised information.
3-3	Develop and implement plan to identify and remove non-stormwater discharges to the MS4.	Sewer Commission	Number of illicit connections investigated, found and removed
3-4	Investigate whether any twin invert manholes are in the separate storm drain system.	Sewer Commission	Review of plans and field investigation of separated areas to determine if twin-invert manholes are present. Develop plan to address twin-invert manholes if they exist. Implement solution.

D. Stormwater Management Program Summary (Cont.)

3-5
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Develop a bylaw that prohibits illicit connections, allows access to buildings, and requires redirection of illicit connections found	Law Department/Sewer Commission	Draft bylaw developed and presented to City Council

3-6
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Develop a bylaw to require inspection of new construction for correct connection to sanitary sewer	Law Department/Sewer Commission	Draft bylaw developed and presented to City Council

4. Construction Site Runoff Control:

4-1
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Develop construction site erosion and sediment control bylaw for sites greater than 1 acre	Law Department/Sewer Commission/Planning Dept.	Draft bylaw developed and presented to City Council

4-2
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Require construction site operator to submit monthly erosion and sediment control reports.	Planning Department	Inspection reports submitted to City

4-3
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Review site plans for stormwater impacts	Planning Department	Site plans for construction impacts greater than 1 acre reviewed for erosion and sediment control.

4-4
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Consideration of public input	Planning Department	Public review and comment periods held; signs posted at construction sites

D. Stormwater Management Program Summary (Cont.)

5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
5-1	Develop bylaw to apply Performance Standards 2,3,4,7,and 9 of the MA Stormwater Policy to developments disturbing more than 1 acre.	Law Department/Sewer Commission	Draft bylaw developed and presented to City Council
5-2	Specify a stormwater BMP manual to be used for consistent design and performance standards.	Planning/Engineering/ Conservation Commission	BMP manual selected.
5-3	Ensure long-term maintenance of structural BMPs.	Law Department/Sewer Commission	Draft bylaw developed and presented to City Council

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-1	Employee Training Program	DPW / Sewer Commission/ Parks Department / Water Department	Number/percent of employees who receive stormwater training each year.
6-2	Continue street and parking lot sweeping	DPW	All streets and municipal parking lots swept in spring; daily sweeping of streets in downtown area throughout year, weather permitting; tons of materials removed from roadways annually.
6-3	Storm drain maintenance	Sewer Commission	Percent of catch basins cleaned annually.

D. Stormwater Management Program Summary (Cont.)

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-4	Evaluate street sweeping and catch basin cleaning equipment.	DPW/Sewer Commission	Evaluation of existing equipment
6-5	Roadway deicing	DPW	Amount and type of deicers used.
6-6	Continue spill prevention and response measures at Municipal facilities	DPW / Sewer Commission / Water Department / Parks Department	Annual training of employees.
6-7	Continue to maintain hazardous materials inventory for materials used or generated by the City.	DPW / Sewer Commission / Water Department / Parks Department	Maintenance of hazardous materials inventory system.
6-8	Minimize impacts from vehicle maintenance.	DPW / Sewer Commission / Water Department / Parks Department	Training of DPW, Sewer Commission, Water Department, and Parks Department employees completed annually; hazardous material usage tracked.
6-9	Minimize impacts from vehicle washing.	DPW / Sewer Commission / Water Department / Parks Department	Decline in use of soap. Switch to biodegradable soap.
6-10	Park and landscape maintenance.	Parks Department	Amount of herbicides/fertilizers used.

D. Stormwater Management Program Summary (Cont.)

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-11	Continue tree planting and maintenance program.	Parks Department	Number of trees planted.
6-12	Hold Annual Household Hazardous Waste Collection Day.	DPW/Conservation Commission	Household Hazardous Waste Collection Day held annually.
6-13	Continue to accept waste motor oil, batteries, and other waste items through regular drop-off hours at the DPW.	DPW	Waste drop-off hours maintained for residents.
6-14	Continue enforcement of pet waste pick-up ordinance. Continue frequent trash barrels emptying to encourage proper disposal.	Health Department/Parks Department	Reduction in complaints, if any, of pet waste in public areas; frequency of trash barrel emptying.

7. BMPs for Meeting TMDL: NONE REQUIRED; NO TMDLs IN FALL RIVER.

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)

W040761
Transmittal Number

Facility ID (if known)

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.

Edward M. Lambert Jr., Mayor (City of Fall River, MA)
Mayor, Printed Name

Signature — Date: 7/28/03

Ned Almeida, President
Sewer Commission, Printed Name

Signature — Date: 7/23/03

James Cavanaugh, Member
Sewer Commission, Printed Name

Signature — Date: 7/23/03

Rene Howayeck, Member
Sewer Commission, Printed Name

Signature — Date: 7/23/03

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. Example Storm Water Management Program TIME FRAMES

Transmittal Number W040761

Facility ID (if known)

Page _____ of _____

	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
1-1										X				X				X			
1-2																					
1-3			X				X				X				X				X		
1-4								X				X				X				X	
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