



Hand-enter Your Transmittal Number

W 035530

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):

BRP WM 08A

Name of Permit Category:

NPDES General Permit NOI for Discharges from Small MS4

Type of Project or Activity:

Surface Water Discharges

B. Applicant Information (Firm or Individual)

Name of Firm:

Town of Georgetown, MA

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

Individual's Last Name:

First Name

MI

Street Address

Town Hall, 1 Library Street

City/Town

Georgetown

State

MA

Zip Code

01833

Telephone Number

978 352-5755 ext.

Contact:

John Moultrie, Hwy Dept, 978-352-5704

e-mail address (optional)

hiwayman22@netzero.net

C. Facility, Site or Individual Requiring Approval

Name of Facility, Site or Individual

Town of Georgetown, MA

DEP Facility Number (if Known)

Street Address

Town Hall, 1 Library Street

e-mail address:

hiwayman22@netzero.net (optional)

City/Town

Georgetown

State

MA

Zip Code

01833

Telephone Number

978 352-5755 ext.

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

Name of Individual or Firm:

Merrimack Valley Planning Commission

Address

160 Main Street

City/Town

Haverhill

State

MA

Zip Code

01830

Telephone Number

978 374-0519 ext. 16

Contact:

Alan Macintosh, Asst. Director

LSP Number (21E only)

E. Permit - Project Coordination

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

If yes, indicate the project's EOE 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		

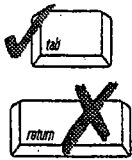


Massachusetts Department of Environmental Protection
Bureau of Resource Protection - Watershed Management
BRP WM 08A NPDES Stormwater General Permit
**Notice of Intent for Discharges from Small Municipal Separate
Storm Sewer Systems (MS4s)**

W 035530
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:

John Moultrie, Highway Surveyor

Name

Highway Department Garage, E. Main Street

Mailing Address

Georgetown

MA 01833

City/Town

State

978-352-5704 (Highway Dept.)

hiwayman22@netzero.net

Telephone Number

Email (if available)

2. Municipality Name

Georgetown

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:

MassHighway Dept. - Route I-95 and Rt.133 @ I-95 Interchange (1000 ft either side of Rt. I-95 centerline)

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

Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL: NOT APPLICABLE - TMDLs NOT ESTABLISHED

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.

Elizabeth Kostura, CHAIR, BOARD OF SELECTMEN

Printed Name

Signature

Elizabeth Kostura

9/25/03

Date



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

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BRP WM 08A NPDES Stormwater General Permit

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

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:

Town of Georgetown, MA
Name

Town Hall, 1 Library Street
Mailing Address

Georgetown

City/Town

978-352-5704 (Highway Dept.)

Telephone Number

MA

State

hiwayman22@netzero.net

Email (if available)

2. Municipality Name

Georgetown
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:

MassHighway Dept. - Route I-95 and Rt.133 @ I-95 Interchange (1000 ft either side of Rt. I-95 centerline)

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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Facility ID (if known)

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 - Designated Urbanized Area

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
<u>Parker River</u> Name	<u>TBD*</u> Number	☒ Yes ☐ No	<u>metals, flow alteration</u> Specify
<u>Rock Pond</u> Name	<u>TBD</u> Number	☒ Yes ☐ No	<u>fish consumption advisory</u> Specify
<u>Pentucket Pond</u> Name	<u>TBD</u> Number	☒ Yes ☐ No	<u>exotic species,</u> <u>fish advisory, pathogens</u> Specify
<u>Bulford Brook</u> Name	<u>TBD</u> Number	☐ Yes ☒ No	<u>Specify</u>
<u>Penn Brook</u> Name	<u>TBD</u> Number	☐ Yes ☒ No	<u>Specify</u>
<u>Lufkin Brook</u> Name	<u>TBD</u> Number	☐ Yes ☒ No	<u>Specify</u>
<u>Wheeler Brook</u> Name	<u>TBD</u> Number	☐ Yes ☒ No	<u>Specify</u>
<u>Jackman Brook</u> Name	<u>TBD</u> Number	☐ Yes ☒ No	<u>Specify</u>
<u>Muddy Brook</u> Name	<u>TBD</u> Number	☐ Yes ☒ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>
<u> </u> Name	<u> </u> Number	☐ Yes ☐ No	<u>Specify</u>

*To Be Determined



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BRP WM 08A NPDES Stormwater General Permit

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

Facility ID (if known)

D. Stormwater Management Program Summary

1. Public Education:

<u>1.1</u> BMP ID # <u>Public Stormwater Workshop</u> Specify Best Management Practice	<u>Hwy Dept/John Moultrie</u> <u>MVPC/Alan Macintosh</u> Responsible Dept./Person Name	<u>News article, PowerPoint</u> <u>slide presentation, handouts</u> Specify Measurable Goal
<u>1.2</u> BMP ID # <u>Stormwater Mgt. Website</u> Specify Best Management Practice	<u>Hwy Dept/John Moultrie</u> <u>MVPC/Alan Macintosh</u> Responsible Dept./Person Name	<u>Downloadable fact sheets on</u> <u>residential BMPs-fertilizer,</u> <u>yd waste, pet waste, used oil</u> Specify Measurable Goal
<u>1.3</u> BMP ID # <u>Septic System Mgt.</u> Specify Best Management Practice	<u>Health Bd/Deb Rogers</u> <u>MVPC/Alan Macintosh</u> Responsible Dept./Person Name	<u>Septic system maintenance</u> <u>flyer distributed to all</u> <u>Georgetown households</u> Specify Measurable Goal
<u>1.4</u> BMP ID # <u>Hazardous Waste Mgt.</u> Specify Best Management Practice	<u>Health Bd/Deb Rogers</u> Responsible Dept./Person Name	<u>News article, educational</u> <u>flyer, Household Hazardous</u> <u>Waste Collection Day</u> Specify Measurable Goal
<u>1.5</u> BMP ID # <u>Storm Drain Stenciling</u> Specify Best Management Practice	<u>Hwy Dept/John Moultrie</u> <u>MVPC/Alan Macintosh</u> <u>Georgetown School Dept.</u> Responsible Dept./Person Name	<u>Classroom instruction,</u> <u>stenciling kit, storm drain</u> <u>stenciling, news/photo story</u> Specify Measurable Goal

2. Public Participation:

<u>2.1</u> BMP ID # <u>Inter-Dept Stormwater Cmte</u> Specify Best Management Practice	<u>Bd Selectmen/Paul Thompson</u> <u>Hwy Dept/John Moultrie</u> Responsible Dept./Person Name	<u>Establish multi-board cmte</u> <u>to develop and oversee</u> <u>town Stormwater Mgt Program</u> Specify Measurable Goal
<u>2.2</u> BMP ID # <u>Municipal Board Meetings</u> Specify Best Management Practice	<u>Hwy Dept/John Moultrie</u> <u>MVPC/Alan Macintosh</u> Responsible Dept./Person Name	<u>Present draft Stormwater Mgt</u> <u>Plan for review/comment by</u> <u>Selectmen, Planning, Con Com,</u> Specify Measurable Goal Health Bd
<u>2.3</u> BMP ID # <u>Stormwater Mgt. Website</u> Specify Best Management Practice	<u>Hwy Dept/John Moultrie</u> <u>MVPC/Alan Macintosh</u> Responsible Dept./Person Name	<u>Draft Stormwater Mgt. Plan</u> <u>for public review/comment</u> Specify Measurable Goal
<u>2.4</u> BMP ID # <u>"Traveling" Stormwater Kiosk</u> Specify Best Management Practice	<u>Hwy Dept/J. Moultrie</u> <u>MVPC/A. Macintosh</u> Responsible Dept./Person Name	<u>Create traveling exhibit for</u> <u>public display on stormwater</u> <u>problems and BMP solutions</u> Specify Measurable Goal
<u> </u> BMP ID # <u>Specify Best Management Practice</u>	<u>Responsible Dept./Person Name</u>	<u>Specify Measurable Goal</u>



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

Facility ID (if known)

D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

<u>3.1</u> BMP ID # <u>Locate/map outfall pipes</u> Specify Best Management Practice	Hwy Dept/John Moultrie MVPC/Alan Macintosh Responsible Dept./Person Name	GIS (Arcview) inventory & map of municipal outfall pipes Specify Measurable Goal
<u>3.2</u> BMP ID # <u>Map catch basins & manholes</u> Specify Best Management Practice	Hwy Dept/ J. Moultrie MVPC/Alan Macintosh Responsible Dept./Person Name	GIS inventory & map of town catch basins and drain manholes Specify Measurable Goal
<u>3.3</u> BMP ID # <u>Adopt illicit discharge bylaw</u> Specify Best Management Practice	Planning Bd Hwy Dept/J.Moultrie MVPC/A. Macintosh Responsible Dept./Person Name	Press release,public hearing, Town Meeting adoption of Illicit Discharge Bylaw Specify Measurable Goal
<u>3.4</u> BMP ID # <u>Track illicit connections</u> Specify Best Management Practice	Hwy Dept/John Moultrie MVPC/Alan Macintosh Responsible Dept./Person Name	Inspection protocol/training; dry weather flow detection; source tracking/documentation Specify Measurable Goal
<u>3.5</u> BMP ID # <u>Remove illicit connections</u> Specify Best Management Practice	Hwy Dept/John Moultrie MVPC/Alan Macintosh Health Bd/Deb Rogers Responsible Dept./Person Name	Elimination of all non-munic. non-storm discharges to MS4s Specify Measurable Goal

4. Construction Site Runoff Control:

<u>4.1</u> BMP ID # <u>Constr. Site Runoff Bylaw</u> Specify Best Management Practice	Planning Board Hwy Dept/John Moultrie MVPC/Alan Macintosh Responsible Dept./Person Name	Press release,public hearing, Town Meeting adoption of Construction Runoff Bylaw Specify Measurable Goal
<u>4.2</u> BMP ID # <u>Slope Development Regulation</u> Specify Best Management Practice	Planning Board Hwy Dept/J.Moultrie MVPC/A.Macintosh Responsible Dept./Person Name	Press release,public hearing, Planning Bd adoption of steep slope regulation Specify Measurable Goal
<u>4.3</u> BMP ID # <u>Open Space Design Bylaw</u> Specify Best Management Practice	Planning Board Hwy Dept/John Moultrie MVPC/Alan Macintosh Responsible Dept./Person Name	Press release,public hearing, Town Meeting adoption of Open Space Residential Design Byla Specify Measurable Goal
<u>4.4</u> BMP ID # <u>Subdiv./site plan review</u> Specify Best Management Practice	Planning Bd/J.Moultrie Responsible Dept./Person Name	Ongoing administration of site plan review process Specify Measurable Goal
<u>4.5</u> BMP ID # <u>Local wetlands regulation</u> Specify Best Management Practice	Cons. Comm/D.Kostura Responsible Dept./Person Name	Ongoing issuance of Orders of Condition to protect wetlands and waterways Specify Measurable Goal



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D. Stormwater Management Program Summary (Cont.)

5. Post Construction Runoff Control:

5.1	Planning Bd	Press release, public hearing,
BMP ID #	Hwy Dept/J. Moultrie	Town Meeting adoption of bylaw
Post-const. Runoff Control Bylaw	MVPC/A. Macintosh	to minimize stormwater runoff
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
5.2		
BMP ID #	Hwy Dept/J. Moultrie	Procedures to ensure long-term
BMP Oper. & Maintenance Procedures	MVPC/A. Macintosh	operation & maintenance of
Specify Best Management Practice	Responsible Dept./Person Name	stormwater Best Mgt. Practices
		Specify Measurable Goal
5.3		
BMP ID #	Hwy Dept/J. Moultrie	Procedures to ensure storm-
BMP Evaluation Procedures	MVPC/A. Macintosh	water BMP effectiveness in
Specify Best Management Practice	Responsible Dept./Person Name	minimizing water quality
		Specify Measurable Goal impacts
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

6. Municipal Good Housekeeping:

6.1		Spring & Fall catch basin
BMP ID #		cleaning to maximize sump
Catch basin inspection/cleaning	Hwy Dept/J. Moultrie	capacity, minimize sediment
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6.2		
BMP ID #		Inspect outfall pipes yearly;
Outfall inspection/cleaning	Hwy Dept/J. Moultrie	remove sediment & brush as
Specify Best Management Practice	Responsible Dept./Person Name	needed; repair damaged pipes
		Specify Measurable Goal
6.3		
BMP ID #	Hwy Dept/J. Moultrie	Training session & materials
Public Works BMP Training	MVPC/A. Macintosh	on hwy and park BMPs: vehicle
Specify Best Management Practice	Responsible Dept./Person Name	maintenance, chem. storage/use
		Specify Measurable Goal
6.4		
BMP ID #	Hwy Dept/J. Moultrie	spill prevention & response
Community Cleanup Event	Cons. Comm/Lynn Grayton	News article; volunteer "Stream
Specify Best Management Practice	MVPC/A. Macintosh	Team" cleanup of stream banks
	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		and Rock & Pentucket Ponds
		shorelines.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6.5		
BMP ID #		Specify Best Management Practice
Annual Progress Reports to EPA,	Hwy Dept/J. Moultrie	Issue annual reports on
DEP, municipal boards	MVPC/A. Macintosh	progress of Stormwater Prog'n



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D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL: NOT APPLICABLE - TMDLs NOT ESTABLISHED

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

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Responsible Dept./Person Name

Specify Measurable Goal

E. Certification

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Elizabeth Kostura, Clerk

3/3/03

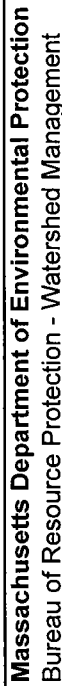
Printed Name

Elizabeth A. Kostura, Clerk

Signature

Date

and Acting Chair, Board of Selectmen



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

Transmital Number	W 035530
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BMP ID #	PERMIT YEAR ONE			PERMIT YEAR TWO			PERMIT YEAR THREE			PERMIT YEAR FOUR			PERMIT YEAR FIVE			Next Permit					
	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
1.1			X																		
1.2		X			X																
1.3					X									X							
1.4			X			X					X				X				X		
1.5					X				X					X			X				
2.1	X			X																	
2.2	X			X				X								X					X
2.3				X																	
2.4				X		X														X	
3.1	X			X																	
3.2	X			X																	
3.3					X				X												
3.4										X				X							
3.5														X							X
4.1					X					X											
4.2					X					X											
4.3	X				X																
4.4	X																				X
4.5	X																				X
5.1					X					X											
5.2										X											X
5.3										X											X
6.1	X		X		X		X			X		X		X		X	X			X	
6.2	X		X		X		X			X		X		X		X	X			X	
6.3			X				X				X				X			X			
6.4					X				X					X			X				
6.5					X				X					X			X				