



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)**

1195
W 035834

Transmittal Number

Facility ID (if known)

A. Instructions

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 Groveland – Board of Selectmen

Name

183 Main Street

Mailing Address

Groveland

City/Town

978-374-0470

Telephone Number

MA

State

Email (if available)

2. Municipality Name

Town of Groveland

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:

Route 113 (state highway)

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.)

Facility ID (if known)

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

[illegible]

D. Stormwater Management Program Summary



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1. Public Education:

1A

BMP ID #

Public Education Seminars

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

Number per year

Specify Measurable Goal

1B

BMP ID #

Storm water education flyers

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

Number of flyers dist. per year

Specify Measurable Goal

1C

BMP ID #

Storm water web page

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

Number of web page visits

Specify Measurable Goal

1D

BMP ID #

Local cable station campaign

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

Number of times shown

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

2. Public Participation:

2A

BMP ID #

Comment & Q&A at seminars

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

Document concerns & respond

Specify Measurable Goal

2B

BMP ID #

Volunteer cleanup & monitoring

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

of volunteers & accomplishments

Specify Measurable Goal

2C

BMP ID #

Local business partnerships

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

per year & accomplishments

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

D. Stormwater Management Program Summary (Cont.)



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3. Illicit Discharge Detection and Elimination:

3A

BMP ID #

Storm Drain System Map

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

Identify & remove illicit discharges

Specify Measurable Goal

3B

BMP ID #

Ordinance prohibiting illicit discharges

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

Adoption of ordinance

Specify Measurable Goal

3C

BMP ID #

Plan to detect illicit discharges

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

of illicit discharges identified

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

4. Construction Site Runoff Control:

4A

BMP ID #

Ordinance for erosion & sediment
control at construction sites

Specify Best Management Practice

Board of Selectmen

Responsible Dept./Person Name

Adoption of ordinance

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

D. Stormwater Management Program Summary (Cont.)



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5. Post Construction Runoff Control:

5A BMP ID # Enforce MA DEP WPA Storm water management policy on sites >1ac. Specify Best Management Practice	Board of Selectmen Responsible Dept./Person Name	Adoption of Site Plan review Zoning By-Law 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

6. Municipal Good Housekeeping:

6A BMP ID # Develop municipal O&M plan Specify Best Management Practice	Office of the Road Commissioner Responsible Dept./Person Name	# of structures/streets cleaned, amount of employee training Specify Measurable Goal
6B BMP ID # Upgrade inadequate drainage systems Specify Best Management Practice	Office of the Road Commissioner Responsible Dept./Person Name	Number of upgrades per year 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

D. Stormwater Management Program Summary (cont.)



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7. BMPs for Meeting TMDL:

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.

William H. Darke

Printed Name

Signature

10-8-03
Date