



Hand-enter Your Transmittal Number →

W 041003  
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

BRP WM 08A

Permit Code: 7 or 8 character code from permit instructions

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

Type of Project or Activity

NPDES Stormwater General Permit

Name of Permit Category

### B. Applicant Information - Firm or Individual

Town of Hingham

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

Last Name of Individual

210 Central Street

Street Address

Hingham

City/Town

Charles Cristello

Contact Person

First Name of Individual

MI

MA

State

02043

Zip Code

781-741-1400

Telephone # and extension

e-mail address (optional)

### C. Facility, Site or Individual Requiring Approval

Town of Hingham

Name of Facility, Site or Individual

N/A

Street Address

Hingham

City/Town

DEP Facility Number (if Known)

Federal I.D. Number (if Known)

e-mail address (optional)

MA

State

02043

Zip Code

781-741-1400

Telephone # and extension

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

Comprehensive Environmental Incorporated

Name of Firm Or Individual

64 Dilla Street

Address

Milford

City/Town

Rebecca Balke

Contact Person

MA

State

01757

Zip Code

800-725-2550

Telephone # and extension

LSP Number (21E only)

### E. Permit - Project Coordination

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

### 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

JUL 30 2003



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)**

W041003  
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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 Hingham

Name

*Charles Cristello ; per 9/17/03 T.C.*

210 Central Street

Mailing Address

Hingham

City/Town

MA

State

781-741-1400

Telephone Number

Email (if available)

2. Municipality Name

Town of Hingham

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:

None

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

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

**JUL 3 1 2003**

**MUNICIPAL ASSISTANCE UNIT**



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

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**BRP WM 08A** NPDES Stormwater General Permit  
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Note:  
Section C may  
be duplicated to  
accommodate a  
larger list of  
receiving waters

**C. Names of (Presently Known) Receiving Waters**

| Receiving Water:                                                 | No. of Outfalls | Listed as Impaired?                                                 | Impairment           |
|------------------------------------------------------------------|-----------------|---------------------------------------------------------------------|----------------------|
| Confluence of Black River and Hingham Bay Tidal Flats<br>Name    | 2<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Tributary to Broad Cove east of Crow Point Lane<br>Name          | 1<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Mill Pond west of Rockwood Road<br>Name                          | 2<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Seal Cove Tidal Flats west of Button Cove Road<br>Name           | 1<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Weir River Tidal Flats west of George Washington Blvd.<br>Name   | 1<br>Number     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Pathogens<br>Specify |
| Weir River Tidal Flats west of Cherry Street.<br>Name            | 1<br>Number     | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Pathogens<br>Specify |
| Unnamed wetland east of Evergreen Lane<br>Name                   | 1<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Bouve Pond east of French Street<br>Name                         | 1<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Large unnamed wetland North of High Street<br>Name               | 6<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Unnamed pond west of Carleton Street<br>Name                     | 1<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Tower Brook east and west of Main Street<br>Name                 | 3<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Tower Brook Wetland east of Leonard Street<br>Name               | 1<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Weir River east of Eastgate Ln. and North of Studley Rd.<br>Name | 2<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Plymouth River Wetland south of Camelot Drive<br>Name            | 1<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |
| Cushing Pond south of Grist Mill Lane<br>Name                    | 1<br>Number     | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify              |



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**C. Names of (Presently Known) Receiving Waters (continued)**

|                                                                    |                    |                                                                     |                                                                     |
|--------------------------------------------------------------------|--------------------|---------------------------------------------------------------------|---------------------------------------------------------------------|
| Crooked Meadow River east<br>and west of Main Street<br>Name       | <u>2</u><br>Number | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Nutrients, noxious aquatic<br>plants, organic enrichment<br>Specify |
| Crooked Meadow River<br>Tributary east of Tower Rd.<br>Name        | <u>2</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |
| Eel River south of Cushing<br>St & north of Old Country Rd<br>Name | <u>7</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |
| Eel River wetland south of<br>Independence Lane<br>Name            | <u>1</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |
| Fulling Pond south of South<br>Pleasant Street<br>Name             | <u>1</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |
| Accord Brook north and<br>south of Prospect Street<br>Name         | <u>3</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |
| Unnamed wetland west of<br>Upland Road<br>Name                     | <u>1</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |
| Unnamed pond south of<br>Industrial Park Road<br>Name              | <u>2</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |
| Old Swamp River Tributary<br>south of Commerce Road<br>Name        | <u>1</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |
| Unnamed wetland west of<br>Winfield Road<br>Name                   | <u>1</u><br>Number | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Specify                                                             |

**D. Stormwater Management Program Summary**

1. Public Education:

1A

BMP ID #

Distribute Brochures and Fact  
Sheets to Businesses and  
Residents

Specify Best Management Practice

1B

BMP ID #

Send Out Stormwater Press  
Releases

Specify Best Management Practice

Department of Public Works  
(DPW)

Responsible Dept./Person Name

Copies of Materials.

Specify Measurable Goal

DPW

Responsible Dept./Person Name

Copies of Articles.

Specify Measurable Goal



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**D. Stormwater Management Program Summary (continued)**

1C

BMP ID #

Develop Stormwater Section  
of Town Website  
Specify Best Management Practice

DPW and Town Website  
Manager(s)

Responsible Dept./Person Name

Measure number of hits  
annually.

Specify Measurable Goal

1D

BMP ID #

Create a Stormwater  
Educational Display  
Specify Best Management Practice

Conservation Commission

Responsible Dept./Person Name

Track quantity of take home  
materials taken quarterly.

Specify Measurable Goal

1E

BMP ID #

Develop and Broadcast  
Stormwater Presentation on  
Local Cable Network  
Specify Best Management Practice

DPW and Town Officials

Responsible Dept./Person Name

Cable TV tapes of  
presentations. Show annually  
during permit term.

Specify Measurable Goal

1F

BMP ID #

Establish a Program for Free  
Stormwater Video Rentals  
Specify Best Management Practice

DPW and Planning Board

Responsible Dept./Person Name

Track video rentals annually.

Specify Measurable Goal

2. Public Participation:

2A

BMP ID #

Establish a Stormwater  
Telephone Hotline  
Specify Best Management Practice

DPW and Town Website  
Manager(s)

Responsible Dept./Person Name

Record number of phone calls  
to hotline, copies of  
advertisements.

Specify Measurable Goal

2B

BMP ID #

Mark Storm Drains with  
Buttons or Stencils  
Specify Best Management Practice

DPW and Volunteers

Responsible Dept./Person Name

50% of storm drains marked  
by year 5 with door hangers  
placed in associated  
neighborhoods.

Specify Measurable Goal

2C

BMP ID #

Develop and Implement a  
Native Tree/Shrub Planting  
Program  
Specify Best Management Practice

DPW, Conservation  
Commission, and Volunteers

Responsible Dept./Person Name

Record the number, location,  
and kind of tree or shrub  
planted.

Specify Measurable Goal



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**D. Stormwater Management Program Summary (Cont.)**

3. Illicit Discharge Detection and Elimination:

|                                                                                                                                                               |                                                                                          |                                                                                                                                                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <u>3A</u><br>BMP ID #<br>Hold Annual Household<br>Hazardous Waste Collections<br>Specify Best Management Practice                                             | <u>DPW</u><br>Responsible Dept./Person Name                                              | <u>Document quantity of wastes<br/>collected annually.</u><br>Specify Measurable Goal                                                                              |
| <u>3B</u><br>BMP ID #<br>Develop Primary Town Storm<br>Drain System Map<br>Specify Best Management Practice                                                   | <u>DPW</u><br>Responsible Dept./Person Name                                              | <u>70% of system mapped on<br/>GIS.</u><br>Specify Measurable Goal                                                                                                 |
| <u>3C</u><br>BMP ID #<br>Complete Mapping of<br>Stormwater Outfalls<br>Specify Best Management Practice                                                       | <u>DPW</u><br>Responsible Dept./Person Name                                              | <u>All outfalls mapped by year 4.</u><br>Specify Measurable Goal                                                                                                   |
| <u>3D</u><br>BMP ID #<br>Evaluate Stormwater<br>Discharges to Historic Places<br>Specify Best Management Practice                                             | <u>DPW, Conservation<br/>Commission, and Contractor</u><br>Responsible Dept./Person Name | <u>Final list of historic places in<br/>Hingham. Results of<br/>evaluation.</u><br>Specify Measurable Goal                                                         |
| <u>3E</u><br>BMP ID #<br>Develop Illicit Discharge<br>Prohibition Bylaw<br>Specify Best Management Practice                                                   | <u>Board of Health</u><br>Responsible Dept./Person Name                                  | <u>Obtain authorization to control<br/>inputs to the municipal<br/>drainage system. Bylaw at<br/>Town meeting by end of year<br/>2.</u><br>Specify Measurable Goal |
| <u>3F</u><br>BMP ID #<br>Develop Illicit Discharge<br>Detection and Elimination Plan<br>and Implement Activities<br>Specify Best Management Practice          | <u>DPW and Board of Health</u><br>Responsible Dept./Person Name                          | <u>All outfalls examined by year<br/>4. Sources traced and results<br/>documented within one year of<br/>discovery.</u><br>Specify Measurable Goal                 |
| <u>3G</u><br>BMP ID #<br>Incorporate Information on<br>Illicit Discharges into Public<br>Education and Outreach<br>Topics<br>Specify Best Management Practice | <u>DPW and Board of Health</u><br>Responsible Dept./Person Name                          | <u>Copies of materials.</u><br>Specify Measurable Goal                                                                                                             |



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**D. Stormwater Management Program Summary (Cont.)**

3H

BMP ID #

Setup and Advertise a Hotline  
for Illicit Discharges

Specify Best Management Practice

DPW, Fire Department, and  
Board of Health

Responsible Dept./Person Name

Log of complaints and actions  
taken.

Specify Measurable Goal

4. Construction Site Runoff Control:

4A

BMP ID #

Develop Erosion Control  
Bylaw

Specify Best Management Practice

Planning Board

Responsible Dept./Person Name

Bylaw at Town meeting by end  
of year 2.

Specify Measurable Goal

4B

BMP ID #

Establish a Procedure for the  
Receipt of Information  
Submitted by the Public

Specify Best Management Practice

Planning Board and DPW

Responsible Dept./Person Name

Record number of phone calls  
to hotline, copies of articles.

Specify Measurable Goal

4C

BMP ID #

Conduct Inspections for  
Erosion Controls

Specify Best Management Practice

Planning Board, DPW, and  
Consultant

Responsible Dept./Person Name

Inspection checklist and  
documented inspections.

Specify Measurable Goal

5. Post Construction Runoff Control:

5A

BMP ID #

Develop BMP Bylaw

Specify Best Management Practice

Planning Board

Responsible Dept./Person Name

Bylaw at Town meeting by end  
of year 2.

Specify Measurable Goal

5B

BMP ID #

Develop and Implement  
Inspection Program

Specify Best Management Practice

Planning Board, DPW,  
Building Inspector, and  
Consultant

Responsible Dept./Person Name

Copies of maintenance reports  
received annually, plus  
records of inspections  
completed and results.

Specify Measurable Goal

6. Municipal Good Housekeeping:

6A

BMP ID #

Clean Catch Basins

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Clean all catch basins.

Specify Measurable Goal



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**Storm Sewer Systems (MS4s)**

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**D. Stormwater Management Program Summary (Cont.)**

|                                                                                                                                                  |                                      |                                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| 6B<br>BMP ID #<br>Sweep Streets in Town<br>Specify Best Management Practice                                                                      | DPW<br>Responsible Dept./Person Name | Priority plan of sweepings based on water quality impact. Volume of sweepings collected.<br>Specify Measurable Goal |
| 6C<br>BMP ID #<br>Develop an Inspection and Maintenance Plan<br>Specify Best Management Practice                                                 | DPW<br>Responsible Dept./Person Name | Written schedule. Records of inspections and maintenance.<br>Specify Measurable Goal                                |
| 6D<br>BMP ID #<br>Continue Existing Pollution Prevention and Good Housekeeping Practices at the DPW Facility<br>Specify Best Management Practice | DPW<br>Responsible Dept./Person Name | Ensure existing practices are continued.<br>Specify Measurable Goal                                                 |
| 6E<br>BMP ID #<br>Ensure Proper Cleaning of Vehicle Leaks at the DPW Facility<br>Specify Best Management Practice                                | DPW<br>Responsible Dept./Person Name | No significant vehicle leak stains at the facility.<br>Specify Measurable Goal                                      |
| 6F<br>BMP ID #<br>Rinse Vehicles Indoors at the DPW Facility<br>Specify Best Management Practice                                                 | DPW<br>Responsible Dept./Person Name | Record of memo.<br>Specify Measurable Goal                                                                          |
| 6G<br>BMP ID #<br>Divert Stormwater Runoff Away From the White Building at the DPW Facility<br>Specify Best Management Practice                  | DPW<br>Responsible Dept./Person Name | Record of before and after photos.<br>Specify Measurable Goal                                                       |
| 6H<br>BMP ID #<br>Ensure Covered Storage for Salt Materials at the DPW Stockyard<br>Specify Best Management Practice                             | DPW<br>Responsible Dept./Person Name | All salt is covered.<br>Specify Measurable Goal                                                                     |
| 6I<br>BMP ID #<br>Improve Covering and Evaluate BMPs for the Sand/Salt Pile at the DPW Stockyard<br>Specify Best Management Practice             | DPW<br>Responsible Dept./Person Name | No rain contact with pile. No significant runoff contact with pile.<br>Specify Measurable Goal                      |



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**D. Stormwater Management Program Summary (cont.)**

|                                                                                                                                                                         |                                      |                                                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| 6J<br>BMP ID #<br>Construct Berms at the DPW<br>Stockyard to Contain Earth<br>Materials<br>Specify Best Management Practice                                             | DPW<br>Responsible Dept./Person Name | Berms constructed. Before<br>and after photos.<br>Specify Measurable Goal                                            |
| 6K<br>BMP ID #<br>Disconnect Floor Drains and<br>Prohibit Vehicle Washing at<br>the Tree and Park Barn<br>Facility<br>Specify Best Management Practice                  | DPW<br>Responsible Dept./Person Name | Floor drains disconnected as<br>shown by closure records.<br>Record of memo.<br>Specify Measurable Goal              |
| 6L<br>BMP ID #<br>Prevent Stormwater Contact<br>with Vehicle Leaks and<br>Maintenance Areas at the<br>Recycling Facility<br>Specify Best Management Practice            | DPW<br>Responsible Dept./Person Name | No significant vehicle leak<br>stains at the site.<br>Specify Measurable Goal                                        |
| 6M<br>BMP ID #<br>Store Batteries Under Cover at<br>the Recycling Facility<br>Specify Best Management Practice                                                          | DPW<br>Responsible Dept./Person Name | No uncovered outdoor storage<br>of batteries.<br>Specify Measurable Goal                                             |
| 6N<br>BMP ID #<br>Comply with DEP Policy for<br>Vehicle Washing at the<br>Recycling Facility<br>Specify Best Management Practice                                        | DPW<br>Responsible Dept./Person Name | Record of memo.<br>Specify Measurable Goal                                                                           |
| 6O<br>BMP ID #<br>Prevent Stormwater<br>Discharges from Recycling<br>Bales and Loading/Unloading<br>Areas at the Recycling Facility<br>Specify Best Management Practice | DPW<br>Responsible Dept./Person Name | No contact with plastic bales<br>and no stormwater discharges<br>from the unloading area.<br>Specify Measurable Goal |
| 6P<br>BMP ID #<br>Conduct a Feasibility Study<br>For the Trash Trailer Bays at<br>the Transfer Station<br>Specify Best Management Practice                              | DPW<br>Responsible Dept./Person Name | Copy of the feasibility study<br>report. Plans or sketches.<br>Specify Measurable Goal                               |



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**D. Stormwater Management Program Summary (cont.)**

|                                                                                                                                                              |                                                                                      |                                                                                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| 6Q<br>BMP ID #<br>Continue Existing Pollution<br>Prevention and Good<br>Housekeeping Practices at the<br>Bus Depot<br>Specify Best Management Practice       | School Department and<br>Contractor<br>Responsible Dept./Person Name                 | Ensure existing practices are<br>continued.<br>Specify Measurable Goal                              |
| 6R<br>BMP ID #<br>Modify Downspout Discharges<br>at the Fueling Station<br>Specify Best Management Practice                                                  | School Department and DPW<br>Responsible Dept./Person Name                           | Downspout discharges<br>modified as shown by before<br>and after photos.<br>Specify Measurable Goal |
| 6S<br>BMP ID #<br>Install a Spill Kit at the Fueling<br>Station<br>Specify Best Management Practice                                                          | School Department<br>Responsible Dept./Person Name                                   | Spill kit installed. Record of<br>memo.<br>Specify Measurable Goal                                  |
| 6T<br>BMP ID #<br>Ensure Compliance for Floor<br>Drain Systems in the Bus<br>Depot Building<br>Specify Best Management Practice                              | School Department<br>Responsible Dept./Person Name                                   | Record of inspections and<br>changes to floor drain<br>systems, if any.<br>Specify Measurable Goal  |
| 6U<br>BMP ID #<br>Continue Existing Facility<br>Practices at the Town Hall and<br>Building #104<br>Specify Best Management Practice                          | Police Department and<br>Department of Public Works<br>Responsible Dept./Person Name | Ensure existing practices are<br>continued.<br>Specify Measurable Goal                              |
| 6V<br>BMP ID #<br>Ensure Compliance for Floor<br>Drains at the North Fire<br>Station<br>Specify Best Management Practice                                     | Fire Department<br>Responsible Dept./Person Name                                     | Sketches or inspection<br>memos.<br>Specify Measurable Goal                                         |
| 6W<br>BMP ID #<br>Ensure Compliance for Floor<br>Drains and Vehicle Washing<br>Activities at the Central Fire<br>Station<br>Specify Best Management Practice | Fire Department<br>Responsible Dept./Person Name                                     | Sketches or inspection<br>memos. Record of memo.<br>Specify Measurable Goal                         |



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**D. Stormwater Management Program Summary (cont.)**

6X

BMP ID #

Evaluate Alternative Vehicle  
Washing Options at the  
Hingham Light Plant

Specify Best Management Practice

Light Plant

Responsible Dept./Person Name

New method for handling  
vehicle wash water at the site  
by the end of year 2.

Specify Measurable Goal

6Y

BMP ID #

Use IPM Program for  
Application of Pesticides in  
Town

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Copy of IPM Program.

Specify Measurable Goal

6Z

BMP ID #

Use Licensed Applicators for  
Fertilizers and Pesticides in  
Town

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Record quantities of fertilizers  
and pesticides purchased  
annually.

Specify Measurable Goal

6AA

BMP ID #

Calibrate Salt Spreading  
Equipment

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Record quantity of salt  
purchased annually.

Specify Measurable Goal

6AB

BMP ID #

Use Low Salt Applications at  
Designated Areas

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Document application rate in  
Accord Pond watershed  
compared to other  
watersheds.

Specify Measurable Goal

6AC

BMP ID #

Ensure Proper Waste Disposal  
in Town for Hazardous and  
Special Wastes

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Document quantity of wastes  
collected annually.

Specify Measurable Goal

6AD

BMP ID #

Ensure Compliance for Snow  
Disposal in Town

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Utilize designated snow  
disposal location.

Specify Measurable Goal

6AE

BMP ID #

Ensure Water Quality  
Improvements are Considered  
for Flood Projects.

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Records of Flood Control  
Projects.

Specify Measurable Goal



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)

W041003  
Transmittal Number

Facility ID (if known)

**D. Stormwater Management Program Summary (cont.)**

6AF

BMP ID #

Conduct Town Employee  
Stormwater Training  
Specify Best Management Practice

Town Administrator,  
Department of Public Works,  
Sewer Department, Police and  
Fire Departments, and  
Consultant

Responsible Dept./Person Name

Attendance sheet and copy of  
program.  
Specify Measurable Goal

7. BMPs for Meeting TMDL:

7A

BMP ID #

Develop a Water Quality  
Strategy for 303d Waters  
Specify Best Management Practice

DPW, Conservation  
Commission, and Consultant  
Responsible Dept./Person Name

Summary of pollution  
prevention efforts, future  
needs, and responsible  
parties. Copy of Surface Water  
Quality Strategic Plan.  
Specify Measurable Goal

7B

BMP ID #

Implement BMPs from Water  
Quality Strategy  
Specify Best Management Practice

DPW, Conservation  
Commission, and Consultant  
Responsible Dept./Person Name

Photographs, logs, and BMP  
descriptions for completed  
efforts and water quality  
improvements.  
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.

Charles Cristello

Printed Name

Town Administrator

Signature

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**

| BMP ID # | Management Program Time Frames |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
|----------|--------------------------------|-----------|-----------------|--------------|-------------------|-----------|------------------|--------------|------------------|-----------|-------------|---------|--------------|-----------|-----------|---------|--------------|-----------|-----------|---------|--------------|
|          | 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 |
| 1A       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 1B       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 1C       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 1D       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 1E       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 1F       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 2A       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 2B       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 2C       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 3A       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 3B       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 3C       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 3D       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 3E       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 3F       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 3G       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 3H       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 4A       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 4B       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 4C       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 5A       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 5B       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6A       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6B       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6C       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6D       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6E       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6F       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6G       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6H       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6I       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6J       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6K       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6L       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6M       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |
| 6N       |                                |           |                 |              |                   |           |                  |              |                  |           |             |         |              |           |           |         |              |           |           |         |              |

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Program Established  
Completed February 2003

Town of Hindham MA

Transmittal Number W041003  
Facility ID (if known)  
Page 1 of 2

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**

| 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 |
| 60       |                     | ↓         |                 |              |                   |           |         | ↑                |           |           |                  |              |           |             |           |         |              |           |           |         |              |
| 6P       |                     |           |                 | △            |                   | △         |         |                  |           | △         |                  |              |           |             |           |         |              |           |           |         |              |
| 6Q       |                     | ↓         |                 |              |                   |           |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         | ↑            |
| 6R       |                     |           |                 |              |                   | △         |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         |              |
| 6S       |                     | △         |                 | △            |                   |           |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         |              |
| 6T       |                     | ↓         |                 | ↑            |                   |           |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         |              |
| 6U       |                     | ↓         |                 |              |                   |           |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         |              |
| 6V       |                     | ↓         |                 | ↑            |                   |           |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         | ↑            |
| 6W       |                     | ↓         |                 |              |                   |           |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         |              |
| 6X       |                     |           |                 | △            |                   | △         |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         | ↑            |
| 6Y       | Ongoing             | ↓         | ↑               |              | ↓                 |           | ↑       |                  | ↓         | ↑         | ↑                | ↓            | ↓         | ↓           | ↓         | ↓       | ↓            | ↓         | ↓         | ↓       | ↑            |
| 6Z       | Ongoing             | ↓         | ↑               |              | ↓                 |           | ↑       |                  | ↓         | ↑         | ↑                | ↓            | ↓         | ↓           | ↓         | ↓       | ↓            | ↓         | ↓         | ↓       | ↑            |
| 6AA      | Ongoing             |           |                 | △            |                   |           |         |                  | △         |           |                  | △            | △         |             |           |         |              |           |           |         | △            |
| 6AB      | Ongoing             |           |                 | △            |                   |           |         |                  | △         |           |                  | △            | △         |             |           |         |              |           |           |         | △            |
| 6AC      | Program Established | ↓         |                 |              |                   |           |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         | ↑            |
| 6AD      | Ongoing             |           |                 | △            |                   |           |         |                  | △         |           |                  | △            |           |             |           |         |              |           |           |         | △            |
| 6AE      |                     | ↓         |                 |              |                   |           |         |                  |           |           |                  |              |           |             |           |         |              |           |           |         | ↑            |
| 6AF      |                     |           |                 |              | ↓                 |           | ↑       |                  |           |           |                  |              |           |             |           |         |              |           |           | △       |              |
| 7A       |                     |           |                 |              |                   |           |         |                  |           |           |                  |              |           |             |           |         |              | ↓         |           |         | ↑            |
| 7B       |                     |           |                 |              |                   |           |         |                  |           |           |                  |              |           |             |           |         |              | ↓         |           |         | ↑            |