



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

11/31  
W 035871  
Transmittal Number

**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 Medfield

Name

459 Main Street

Mailing Address

Medfield

City/Town

508-359-8505 x. 602

Telephone Number

Ma

State

kfeeney@medfield.net

Email (if available)

2. Municipality Name

Town of Medfield

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

**B. Applicant Information (cont.)**



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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:       | No. of Outfalls | Listed as Impaired?                                                 | Impairment        |
|------------------------|-----------------|---------------------------------------------------------------------|-------------------|
| Flynn's Pond           | TBD             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Category 3        |
| Name                   | Number          |                                                                     | Specify           |
| Jewells Pond (private) | TBD             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Category 3        |
| Name                   | Number          |                                                                     | Specify           |
| Mill Brook             | TBD             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Nutrients         |
| Name                   | Number          |                                                                     | Specify           |
| Mine Brook             | TBD             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Low DO, Pathogens |
| Name                   | Number          |                                                                     | Specify           |
| Stop River             | TBD             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Low DO            |
| Name                   | Number          |                                                                     | Specify           |
| Charles River          | TBD             | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Fecal Coliform    |
| Name                   | Number          |                                                                     | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |
| Name                   | Number          | <input type="checkbox"/> Yes <input type="checkbox"/> No            | Specify           |

**D. Stormwater Management Program Summary**



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**1. Public Education:**

1

BMP ID #

Continue Partnership with  
Local Watershed Association

Conservation Commission,  
BOH and DPW

Regular meeting attendance  
Specify Measurable Goal

2

BMP ID #

Develop Brochures  
Specify Best Management Practice

DPW  
Responsible Dept./Person Name

Quarterly Mailings  
Specify Measurable Goal

3

BMP ID #

WEB Site Public Service  
Postings

IT DEPT & DPW  
Responsible Dept./Person Name

WEB Site Publication &  
Maintenance

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

**2. Public Participation:**

4

BMP ID #

Water Quality Testing  
Specify Best Management Practice

DPW  
Responsible Dept./Person Name

2 Rounds of Water Quality  
Sampling of Priority Waters

5

BMP ID #

Community Cleanup Days  
Specify Best Management Practice

DPW  
Responsible Dept./Person Name

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

Facility ID (if known)

**3. Illicit Discharge Detection and Elimination:**

6

BMP ID #

Catch Basin/Outfall and  
Receiving Water Mapping

DPW

Responsible Dept./Person Name

GIS Mapping

Specify Measurable Goal

4

BMP ID #

Water Quality Testing

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Testing of Priority Water  
Bodies

7

BMP ID #

Regulatory Review

Specify Best Management Practice

DPW/Planning

Board/BOH/Con. Comm.

Regulatory Revisions and  
Action

8

BMP ID #

Permit Enforcement

Specify Best Management Practice

DPW/Planning

Board/BOH/Con. Comm.

Local Construction Site  
Oversight and Enforcement

9

BMP ID #

Misconnection/Illegal Dumping  
Detection and Correction

DPW/BOH

Responsible Dept./Person Name

Connectivity Mapping, Bylaw  
Enforcement and Fines

**4. Construction Site Runoff Control:**

7

BMP ID #

Regulatory Review

Specify Best Management Practice

DPW/Planning

Board/BOH/Con. Comm.

Regulatory Revisions to  
Bylaws as necessary

8

BMP ID #

Permit Enforcement

Specify Best Management Practice

DPW/Planning

Board/BOH/Con. Comm.

Local Construction Site  
Oversight and Enforcement

10

BMP ID #

Improved As-built Review

Specify Best Management Practice

DPW/Planning Board

Responsible Dept./Person Name

Electronic As-built Submittals  
on Town GIS System

          
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:

7

BMP ID #

Regulatory Review

Specify Best Management Practice

DPW/Planning

Board/BOH/Con. Comm.

Bylaw revisions as necessary

Specify Measurable Goal

8

BMP ID #

Permit Enforcement

Specify Best Management Practice

DPW/Planning

Board/BOH/Con. Comm.

Construction Site Oversight

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:

11

BMP ID #

Improved Street Sweeping

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Semi-annual Collections

Specify Measurable Goal

12

BMP ID #

Improved Catch Basin  
Cleaning

DPW

Responsible Dept./Person Name

Semi-annual Collections

Specify Measurable Goal

13

BMP ID #

Household Hazardous Waste  
Days

DPW

Responsible Dept./Person Name

Annual Collection

Specify Measurable Goal

14

BMP ID #

Drain Stenciling

Specify Best Management Practice

DPW

Responsible Dept./Person Name

Aquifer Protection Area

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:

|                                     |                               |                                                      |
|-------------------------------------|-------------------------------|------------------------------------------------------|
| 6                                   |                               |                                                      |
| BMP ID #                            |                               |                                                      |
| GIS Mapping                         | DPW                           | GIS Mapping of Priority Waters and Drainage Patterns |
| Specify Best Management Practice    | Responsible Dept./Person Name |                                                      |
| 4                                   |                               |                                                      |
| BMP ID #                            |                               |                                                      |
| Water Quality Testing               | DPW                           | Semi-annual Water Quality Testing                    |
| Specify Best Management Practice    | Responsible Dept./Person Name |                                                      |
| 15                                  |                               |                                                      |
| BMP ID #                            |                               |                                                      |
| Stormwater Modeling                 | DPW                           | Needs Assessment for Category 5 Water Bodies         |
| Specify Best Management Practice    | Responsible Dept./Person Name |                                                      |
| 16                                  |                               |                                                      |
| BMP ID #                            |                               |                                                      |
| Misc. Structural BMPs as needed     | DPW                           | i.e. Construction improvements                       |
|                                     | Responsible Dept./Person Name | Specify Measurable Goal                              |
| 17                                  |                               |                                                      |
| BMP ID #                            |                               |                                                      |
| Misc. Non-structural BMPs as needed | DPW                           | i.e. Bylaw Enforcement, Fees and Fines               |
|                                     | Responsible Dept./Person Name |                                                      |

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.

Michael Sullivan - Town Administrator

Printed Name

Signature

7/15/02  
Date



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

**APPROXIMATE SCHEDULE OF ACTIVITIES (ALSO SEE ATTACHED TABLE 4.1)**

|                                                             |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
|-------------------------------------------------------------|--------------------------------------------------------|------------------------------------|---------|--------------|-----------|-----------|---------|--------------|-----------|-----------|---------|--------------|-----------|-----------|---------|--------------|-----------|-----------|---------|--------------|-------------|
|                                                             |                                                        | Transmittal Number <b>W 035871</b> |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
|                                                             |                                                        | Facility ID (if known)             |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
|                                                             |                                                        | Page <b>1</b> of <b>1</b>          |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
|                                                             |                                                        | PERMIT YEAR FIVE                   |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
|                                                             |                                                        | PERMIT YEAR FOUR                   |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
|                                                             |                                                        | PERMIT YEAR THREE                  |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
|                                                             |                                                        | PERMIT YEAR TWO                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
|                                                             |                                                        | PERMIT YEAR ONE                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 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, 2, 3                                                     |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 4, 5                                                        |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 6                                                           | Structure Mapping                                      |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 7, 8                                                        | Regulatory Review                                      |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 9                                                           | Misconnection/Illegal Dumping Detection and Correction |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 10                                                          | Improved As-Built Requirements                         |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 11-14                                                       |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 15                                                          | Stormwater Modeling                                    |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 16, 17                                                      | Misc. Structural and Non-Structural BMPs, as needed    |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| <b>LEGEND:</b>                                              |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 1 = Continued Partnership with Local Watershed Associations |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 2 = Developing Brochures for mailing                        |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 3 = WEB Site Public Service Announcements                   |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 4 = Water Quality Testing                                   |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 5 = Community Cleanup Days                                  |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 6 = GIS Mapping                                             |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 7, 8 = Regulatory Review and Permit Enforcement             |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 9 = Misconnection/Illegal Dumping Detection and Correction  |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 10 = Improved As-Built Requirements                         |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 11 = Improved Street Sweeping                               |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 12 = Improved Catch Basin Cleanings                         |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 13 = Household Hazardous Waste Days                         |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |
| 14 = Drain Stenciling                                       |                                                        |                                    |         |              |           |           |         |              |           |           |         |              |           |           |         |              |           |           |         |              |             |