



## Massachusetts Department of Environmental Protection

Bureau of Resource Protection - Watershed Management

W041019

Transmittal Number

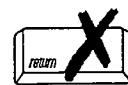
# BRP WM 08A NPDES Stormwater General Permit

## 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 Needham

- *Richard Mercer - Dir. DPW* -

Name

1471 Highland Avenue

Mailing Address

Needham

MA, 02492

City/Town

State

(781) 455-7500

Telephone Number

Email (if available)

2. Municipality Name

Needham

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:

Interstate Route 95, and Route 135

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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#### B. Applicant Information (cont.)

6. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for protection of historic properties been met?

yes     pending     no

**Note:**  
Section C may  
be duplicated to  
accommodate a  
larger list of  
receiving waters

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

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
Unnamed Tributary to Sabrina Lake	3 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Sabrina Lake	0 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Charles River (Southwest corner – Wellesley Town line to Oxbow Road)	7 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Priority Organics, Nutrients, Organic Enrichment/Low DO, Pathogens, Noxious Aquatic Plants, Turbidity Specify
Fuller Brook (Headwaters south of Route 135, Needham to confluence with Waban Brook, Wellesley)	23 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Organic Enrichment/LowDO; (Other Habitat Alterations); Pathogens; Oil and Grease; Taste, Odor, and Color Specify
Unnamed Tributary to the Charles River (Central Ave. to Stratford Road)	23 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Charles River (Central Ave. to Farley Pond near Chestnut Street)	17 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Priority Organics, Nutrients, Organic Enrichment/Low DO, Pathogens, Noxious Aquatic Plants, Turbidity Specify
Unnamed Tributary to Farley Pond	12 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Charles River (Chestnut Street to Dedham Avenue)	18 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Priority Organics, Nutrients, Organic Enrichment/Low DO, Pathogens, Noxious Aquatic Plants, Turbidity, Exotic Species Specify
Rosemary Lake	50 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify



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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 (cont.)

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
Rosemary Brook (Headwaters, outlet Rosemary Lake, Needham to confluence with Charles River, Wellesley Name	36 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Nutrients, Organic Enrichment/Low DO, Pathogens, Taste, Odor, and Color, Suspended Solids, Turbidity Specify
Alder Brook (Headwaters northwest of the Needham Reservoir south of Penn Central Railroad Tracks, to confluence with Charles River, Needham) Name	31 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Cause Unknown, Nutrients, Organic Enrichment/Low DO Specify
Needham Reservoir Name	16 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Cutler Lake (Kendrick Street Pond) Name	7 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Turbidity Specify
Hurd Brook Name	24 Number	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Specify
Charles River (Eastern Border of Needham) Name	28 Number	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Priority Organics, Nutrients, Organic Enrichment/Low DO, Pathogens, Noxious Aquatic Plants, Turbidity, Exotic Species Specify

### D. Stormwater Management Program Summary

#### 1. Public Education:

1-1

BMP ID #

Classroom Education on  
Storm Water

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

3 sets of educational materials,  
3 grade levels, 2 teacher  
workshops  
Specify Measurable Goal

1-2

BMP ID #

Flyer and Brochure Distribution  
and Web Site Link

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Gather and make available  
one flyer & two fact sheets,  
provide web site link  
Specify Measurable Goal

1-3

BMP ID #



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

#### Using the Media

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

One local cable public service announcement, one yearly press release, and one annual storm water article

Specify Measurable Goal

#### 1-4

BMP ID #

#### Hazardous Waste Management

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Track amount of hazardous waste collected, continue to distribute educational materials

Specify Measurable Goal

### 2. Public Participation:

#### 2-1

BMP ID #

#### Adopt-A-Stream Programs

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Adopt two streams and track quantity of trash removed

Specify Measurable Goal

#### 2-2

BMP ID #

#### Stencil Storm Drains

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Stencil 50 storm drains per year

Specify Measurable Goal

#### 2-3

BMP ID #

#### Community Hotline

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Establish a hotline, track # of calls and problems/incidents remedied

Specify Measurable Goal

#### 2-4

BMP ID #

#### Storm Water Committee

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Establish committee and hold annual meetings

Specify Measurable Goal

#### 2-5

BMP ID #

#### Pet Waste By-Law

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

# signs posted, # of educational materials, and # of dog licenses issued

Specify Measurable Goal



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

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

3-1

BMP ID #

Outfall Testing Program

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Follow-up testing for eight areas, Perform study to verify need for TV inspections

Specify Measurable Goal

3-2

BMP ID #

Illegal Dumping Education

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

# of education tools distributed, # of illegal dumps reported, # of penalties given to dumpers, # of meritorious acknowledgements to citizens,

Specify Measurable Goal

3-3

BMP ID #

Septic System Controls (Board of Health)

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

# of systems, # regularly maintained, # of educational flyers, # of trained people, # of failed systems

Specify Measurable Goal

**4. Construction Site Runoff Control:**

4-1

BMP ID #

Policy and Procedure Review and Updates

Specify Best Management Practice

Town Engineer

Responsible Dept./Person Name

Revise existing policies and procedures, develop Storm Drain Connection Permit requirement

Specify Measurable Goal

4-2

BMP ID #

Construction Reviews

Specify Best Management Practice

Town Engineer

Responsible Dept./Person Name

Develop requirement to inspect sites, # of inadequate sites/plans reported by inspectors, # of non-compliant permits

Specify Measurable Goal

**5. Post Construction Runoff Control:**

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

5-1

BMP ID #

Policy for Post Construction  
Runoff  
Specify Best Management Practice

Town Engineer  
Responsible Dept./Person Name

Develop Town-wide policy for  
Post-Construction Runoff  
control, a storm drain  
connection permit requirement,  
develop and implement  
standard construction details  
and policies

Specify Measurable Goal

5-2

BMP ID #

BMP Inspection and  
Maintenance  
Specify Best Management Practice

Town Engineer  
Responsible Dept./Person Name

Inspect all Town maintained  
BMPs annually, document # of  
problems identified and  
remedied & changes in effluent

Specify Measurable Goal

**6. Municipal Good Housekeeping:**

6-1

BMP ID #

Predictive Catch Basin  
Program  
Specify Best Management Practice

DPW Director  
Responsible Dept./Person Name

Develop, collect data, and  
refine program

Specify Measurable Goal

6-2

BMP ID #

DPW Director  
Responsible Dept./Person Name

Sweep all streets annually  
years 1&2, sweep twice years  
3-5, sweep all parking lots  
annually, document pound of  
debris collected

Specify Measurable Goal

6-3

BMP ID #

Pipe Inspections  
Specify Best Management Practice

DPW Director  
Responsible Dept./Person Name

Analyze 10% of Drainage  
System per Year

6-4

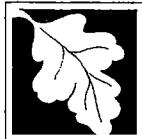
BMP ID #

Pipe Cleaning  
Specify Best Management Practice

DPW Director  
Responsible Dept./Person Name

Clean 4,750' of drain pipe per  
year, Jet Flush 19,000' of drain  
pipe per year

Specify Measurable Goal

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**D. Stormwater Management Program Summary (cont.)**6-5

BMP ID #

New Pipe and Structure

Installations

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Replace 10 catch basins and  
475' of drain pipe per year

Specify Measurable Goal

6-6

BMP ID #

Investigate Town Owned

BMPs for Retrofit

Opportunities

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Inspect 3 structural BMPs  
annually, implement two  
retrofit projects by year five

Specify Measurable Goal

6-7

BMP ID #

Integrated Pest Management

Specify Best Management Practice

DPW Director

Responsible Dept./Person Name

Continue established program  
in the future

Specify Measurable Goal

**7. BMPs for Meeting TMDL:**N/A

BMP ID #

No TMDLs have been  
established thus far

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



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#### 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.

Richard Merson DPW Director

Printed Name

Date

7/28/03

Signature

Daniel P. Matthews Chairman, Board of Selectmen

Printed Name

Signature

10/14/03

Date

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**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	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																			
1-2																			
1-3																			
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