Hand-enter Your Transmittal Number → W 035938

Your unique Transmittal Number can be accessed through DEP's web site or by calling the DEP InfoLine as listed on the last page of this document

Massachusetts Department of Environmental Protection

Transmittal Form for Permit Application and Payment

Instructions

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Your check should be made payable to the Commonwealth of Massachusetts. Please mail your check along with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three (3) copies of this form will be needed.

Copy 1 (the original) must accompany your permit application.
Copy 2 must accompany your fee payment.
Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to DEP, P.O. Box 4062, Boston, MA 02211

For DEP Use Only
Permit No._____
Rec'd Date_____
Reviewer_____

A. Application Information

DEP Permit Code (the 7 or 8 character code from first page of permit application instructions):
BRPWM08A

Name of Permit Category:
NOI for MS4s

Type of Project or Activity:
stormwater

B. Applicant Information (Firm or Individual)

Name of Firm:
City of West Springfield

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

Individual's Last Name:	First Name	MI

Street Address
26 Central Street

City/Town	State	Zip Code	Telephone Number
West Springfield	MA	01089	(413) 263-3249 ext.

Contact:	e-mail address (optional)
James Lyons, P.E.	jlyons@west-springfield.ma.us

C. Facility, Site or Individual Requiring Approval

Name of Facility, Site or Individual
Same

DEP Facility Number (if Known)

Street Address

e-mail address: (optional)

City/Town	State	Zip Code	Telephone Number
			( ) ext.

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

Name of Individual or Firm:
Tighe & Bond Consulting Engineers

Address
53 Southampton Road

City/Town	State	Zip Code	Telephone Number
Westfield	MA	01085	(413) 562-1600 ext.

Contact:	LSP Number (21E only)
Robert Peirent, P.E.	

E. Permit - Project Coordination

Is this project subject to MEPA review? ☐ yes ☒ no
If yes, indicate the project's EOEA file number (assigned when an Environmental Notification Form is submitted to the MEPA unit)
EOEA # Is an Environmental Impact Report Required? ☐ yes ☒ no
Is this application part of a larger project for which two or more DEP permits are being or will be sought? ☐ yes ☒ no

List any other DEP permits that apply to this project:

Permit Category	Date of Submission (tentative or actual)	Transmittal Number (if application already submitted)

F. Amount Due

Special Provisions:
☒ Fee Exempt* (city, town or municipal housing authority)(state agency if fee is $100 or less)
☐ Hardship Request [payment extensions according to 310 CMR 4.04(3)(c)]
☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10)
*There are no fee exemptions for 21E, regardless of applicant status

Check #:	Dollar Amount:	Date:

Please make check payable to the Commonwealth of Massachusetts and mail check and one copy of this form to DEP, P.O. Box 4062, Boston, MA 02211

rev: 03/21/00

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

BRP WM 08A NPDES Stormwater General Permit

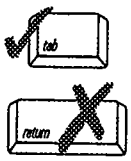
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W 035938
Transmittal Number

Facility ID (if known)

A. Instructions

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Submission of this Notice of Intent constitutes notice that the entity named at item B1. of this form intends to be authorized by the DEP General Permit issued jointly with EPA for stormwater discharges from the small municipal separate storm sewer system (MS4), in the location identified at item B2. of this form. Submission of the Notice of Intent also constitutes notice that the party identified at item B1. has read, understands and meets the eligibility conditions of Part I.B. of the NPDES Small MS4 General Permit, agrees to comply with all applicable terms and conditions of the NPDES Small MS4 General Permit, and understands that continued authorization to discharge is contingent on maintaining eligibility for coverage. **In order to be granted coverage, all information required on BRP WM 08A, including the Stormwater Management Program Summary and Time Frames form, must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a stormwater management program.**

B. Applicant Information

1. Small MS4 Operator/Owner Information:

City of West Springfield
Name

26 Central Street
Mailing Address

West Springfield
City/Town

MA 01089
State

(413) 263-3249 (James Lyons, P.E.)
Telephone Number

jlyons@west-springfield.ma.us
Email (if available)

2. Municipality Name

West Springfield
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:

Mass Highway Dept.

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

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

W 035938
Transmittal Number

Facility ID (if known)

B. Applicant Information (cont.)

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

☐ yes ☒ pending ☐ no

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

C. Names of (Presently Known) Receiving Waters

Receiving Water: Name	No. of Outfalls: Number	Listed as Impaired?	Impairment: Specify
Connecticut River	To be determined	☒ Yes ☐ No	Priority Organics, Pathogens, Suspended Solids
Paucatuck Brook	To be determined	☐ Yes ☒ No	
Westfield River	To be determined	☐ Yes ☒ No	
Piper Brook	To be determined	☐ Yes ☒ No	
Bagg Brook	To be determined	☐ Yes ☒ No	
Block Brook	To be determined	☐ Yes ☒ No	
Schoolhouse Brook	To be determined	☐ Yes ☒ No	
Goldine Brook	To be determined	☐ Yes ☒ No	
Isolated Wetlands	To be determined	☐ Yes ☒ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	

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

BRP WM 08A NPDES Stormwater General Permit

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

W 035938
Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary

1. Public Education:

1A
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Educational Displays	DPW	One display in a municipal building per year, Year 1-5.

1B
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Classroom Education	DPW	DPW classroom presentation Years 1-5.

1C
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Newspaper press release	DPW	Press release to local newspaper. 2 per year, Year 1-5.

1D
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Local Cable Access	DPW	Post community service bulletins twice per year, Year 1-5.

1E
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Informational Pamphlets	DPW	Develop pamphlet, Year 1. Mail 1 per year with water bills, Year 1, 3, 5.

1F
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Open House	DPW	Publicize and support annual event at Transfer Station, Year 1-5.

1G
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Community Website	DPW	2 notices per year on local "Virtual Town Hall" website, Year 1-5.

2. Public Participation:

2A
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Adopt-a-Road	City Council	Support the "Revive the Pride" activities in Merrick section, Year 1-5.

2B
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Adopt-a-Stream	DPW / Conservation Commission	Support volunteer groups, maintain signage identifying stream names, Year 1-5.

2C BMP ID #		
Attitude Surveys	DPW	Include storm water survey on website, Year 2 and 5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2D BMP ID #		
Community Hotline	DPW	Place phone number on Town website for reporting of illicit discharges, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2E BMP ID #		
Storm Drain Stenciling	DPW	Support volunteers for stenciling anticipated 100 catch basins per year, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2F BMP ID #		
Water Quality Monitoring	DPW	Visual Inspection of priority outfalls by volunteers, 10 per year, Year 2-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2G BMP ID #		
Watershed Committee	DPW / Conservation Commission	Support Westfield River Watershed Association, inform of DPW activities, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2H BMP ID #		
Hazardous Waste Collection	Board of Health	Publicize annual event collecting Universal Wastes, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

3. Illicit Discharge Detection and Elimination:

3A BMP ID #		
Mapping Stormwater Outfalls	DPW	Develop map of stormwater outfalls, Year 1. Field inspect / verify 25%, Year 2-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
3B BMP ID #		
Develop Illicit Discharge Plan	DPW	Evaluate Year 1. Draft plan Year 2. Propose for adoption by Year 3. Implement Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
3C BMP ID #		
Non-Stormwater Discharge Ordinance	City Council / DPW	Evaluate Year 1. Draft ordinance and Propose for adoption Year 2. Enforce Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
3D BMP ID #		
Inform Employees, Businesses, Public	DPW	Publicize Illicit Discharge Plan and ordinance, Year 3 and 5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

3E
BMP ID #

Video Inspection	DPW	Conduct as needed in conjunction with BMP #3B, Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

3F
BMP ID #

Failing Septic Systems	Board of Health	Keep Records for identification of problem areas, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

4. Construction Site Runoff Control:

4A
BMP ID #

Construction Runoff Ordinance	Planning Board / Building Commissioner	Evaluate existing regulations Year 1. Draft revisions Year 2. Propose for adoption by Year 3. Enforce Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

4B
BMP ID #

Construction Plan Review	Planning Board / Building Commissioner	Enforcement under existing Town regulations, Year 1 and 2. Enforcement under adopted ordinance, Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

4C
BMP ID #

Inspection / Reporting	Conservation Commission / Building Commissioner	Enforcement under existing Town regulations, Year 1 and 2. Enforcement under adopted ordinance, Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

5. Post Construction Runoff Control:

5A
BMP ID #

Post Construction Runoff Ordinance	Planning Board	Evaluate current regulations Year 1. Draft revisions Year 2. Propose for adoption Year 3. Enforce Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

5B
BMP ID #

Site Plan Review	Planning Board / Building Commissioner	Enforcement under existing Town regulations, Year 1 and 2. Enforcement under adopted ordinance, Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

5C
BMP ID #

Stormwater System Maintenance Plan	Conservation Commission / Building Commissioner	Enforcement under existing Town regulations, Year 1 and 2. Enforcement under adopted ordinance, Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

6. Municipal Good Housekeeping:

6A
BMP ID #

Municipal Maintenance Activity Program	DPW	Evaluate and draft additional policies as necessary, Year 2. Comply, Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

6B BMP ID #		
Training of Municipal Employees	DPW	Initial Good Housekeeping training, Year 2. Annual refresher, Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6C BMP ID #		
Catch Basin Cleaning Program	DPW	Clean 50% of catch basins per year, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6D BMP ID #		
Street Sweeping	DPW	Sweep streets once per year and Business Districts monthly, spring through fall, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6E BMP ID #		
Road Salt Program	DPW	Employee to training at Salt-Institute seminar, Year 1. Investigate alternatives Year 2. Implement Year 3-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6F BMP ID #		
Lawn Care and Pest Control	DPW	Train 1 additional employee for application of controls, Year 1. Implement practices, Year 2-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6G BMP ID #		
Used Oil Recycling	DPW	Continue recycling for Town vehicles, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6H BMP ID #		
Illegal Dumping	DPW	Pickup of dumped waste, Year 1-5.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

7. BMPs for Meeting TMDL:

7A BMP ID #		
See Section 7 of the attached narrative, Appendix A		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

E. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Edward J. Gibson, mayor
Printed Name

Edward J. Gibson
Signature

July 17, 2003
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
DRAFT

Transmittal Number W - 035938

Facility ID (If known)

Minimum Control	BMP ID	Description of BMP	Permit Year 1				Permit Year 2				Permit Year 3				Permit Year 4				Permit Year 5				
			Spring '03	Summer '03	Fall '03	Winter '03	Spring '04	Summer '04	Fall '04	Winter '04	Spring '05	Summer '05	Fall '05	Winter '05	Spring '06	Summer '06	Fall '06	Winter '06	Spring '07	Summer '07	Fall '07	Winter '07	Next Permit
No. 1 - Public Education / Outreach Program	1A	Educational Displays	Permit not in effect																				
	1B	Classroom Education																					
	1C	Newspaper Press Release																					
	1D	Local Cable Access																					
	1E	Informational Pamphlets																					
	1F	Open House																					
	1G	Community Website																					
No. 2 - Public Involvement / Participation	2A	Adopt-a-Road																					
	2B	Adopt-a-Stream																					
	2C	Attitude Surveys																					
	2D	Community Hotline																					
	2E	Storm Drain Stenciling																					
	2F	Water Quality Monitoring																					
	2G	Watershed Committee																					
	2H	Hazardous Waste Collection																					
No. 3 - Illicit Discharge Detection and Elimination	3A	Mapping Stormwater Outfalls																					
	3B	Develop Illicit Discharge Plan																					
	3C	Non-Stormwater Discharge Ordinance																					
	3D	Inform Employees and Businesses																					
	3E	Video Inspection																					
	3F	Failing Septic Systems																					
No. 4 - Construction Site Runoff	4A	Construction Runoff Ordinance																					
	4B	Site Plan Review																					
	4C	Inspection / Reporting																					
No. 5 - Post-Construction	5A	Post Construction Runoff Ordinance																					
	5B	Site Plan Review																					
	5C	Stormwater Maintenance Plan																					
No. 6 - Good Housekeeping	6A	Municipal Maint. Activity Program																					
	6B	Training of Municipal Employees																					
	6C	Catch Basin Cleaning Program																					
	6D	Street Sweeping																					
	6E	Road Salt Program																					
	6F	Lawn Care and Pest Control																					
	6G	Used Oil Recycling																					
	6H	Illegal Dumping																					