MAR041236 AH

Hand-enter Your Transmittal Number → W 040836
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

Bureau of Resource Protection - Watershed Management

NPDES Stormwater General Permit - NOI for Discharges from Small MS4s
Type of Project or Activity

B. Applicant Information – Firm or Individual

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

Last Name of Individual | **First Name** of Individual | MI

City Hall; 59 Court Street
Street Address

Westfield | MA | 01085 | (413) 572-6219
City/Town | State | Zip Code | Telephone # and extension

Mark Cressotti, City Engineer | m.cressotti@mail.ci.westfield.ma.us
Contact Person | e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

City of Westfield
Name of Facility, Site or Individual | DEP Facility Number (if Known) | Federal I.D. Number (if Known)

Street Address | e-mail address (optional)

Westfield | MA | 01085 | (413) 572-6219
City/Town | State | Zip Code | Telephone # and extension

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

Camp Dresser & McKee Inc.
Name of Firm Or Individual

100 Great Meadow Road; Suite 104
Address

Wethersfield | CT | 06109 | (860) 529-7615
City/Town | State | Zip Code | Telephone # and extension

Nancy Oram | LSP Number (21E only)
Contact Person

E. Permit - Project Coordination

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

JUL 30 2003

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)

MUNICIPAL ASSISTANCE UNIT

*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

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

BRP WM 08A NPDES Stormwater General Permit

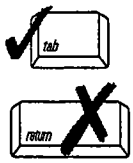
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W040836
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:

   Mr. Mark Cressotti, City Engineer
   Name

   City Hall; 59 Court Street
   Mailing Address

   Westfield — City/Town
   MA — State

   (413) 572-6219 — Telephone Number
   m.cressotti@mail.ci.westfield.ma.us — Email (if available)

2. Municipality Name

   City of Westfield
   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, Westfield State College

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

JUL 30 2003

MUNICIPAL ASSISTANCE UNIT

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
Westfield River (Name)	Unknown (several)	☐ Yes ☒ No	Specify
Little River (Name)	Unknown (several)	☐ Yes ☒ No	Specify
Crane Pond (Name)	3 (est.) (Number)	☐ Yes ☒ No	Specify
Munn's Brook (Name)	3 (est.) (Number)	☐ Yes ☒ No	Specify
Powdermill Brook (Name)	12 (est.) (Number)	☒ Yes ☐ No	siltation, pathogens, suspended solids, turbidity
Arm Brook (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Arm Brook Detention Pond (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Ashley Brook (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Atwater Brook (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Barnes Pond (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Barry Brook (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Brickyard Brook (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Buck Pond (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Bush Brook (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Chapin Pond (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Cook Brook (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Cooley Brook (Name)	Unknown (Number)	☐ Yes ☒ No	Specify
Doe Pond (Name)	Unknown (Number)	☐ Yes ☒ No	Specify

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
Fuller Reservation Pond (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Great Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Horse Pond (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Jack's Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Jim's Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Kellogg Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Lily Pond (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Long Pond (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Manhan River (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Moose Meadow Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Pequot Pond (Name)	Unknown (Number)	☒ Yes ☐ No	nutrients, organic enrichment, low DO, noxious aquatic plants, and exotic speccies (Specify)
Pond Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Round Pond (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Sandy Mill Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Simmons Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Spectacle Pond (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Trask Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Walker Brook (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)

D. Stormwater Management Program Summary

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1-1	Distribute Educational Pamphlets to municipal employees and households	Stormwater Coordinator and Westfield Gas & Electric	Number of households that the pamphlet is distributed to
1-2	Distribute pamphlets to industries	Stormwater Coordinator	Number of pamphlets distributed to industries
1-3	Create and maintain stormwater website	Stormwater Coordinator and IT specialist	Stormwater web page created
1-4	Educate dog owners about picking up dog waste	Animal Control	Info posted on animal control website or fact sheet distributed
1-5	Contact local boy/girl scouts concerning volunteer projects	Stormwater Coordinator	Boy/Girl scout troop contacted
1-6	Update City Council on progress of SWMP activities	Stormwater Coordinator	Annual update via annual report (report also available on the City's website) and a verbal update at a televised City Council Meeting at least once during the permit term

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2-1	Form Stormwater Advisory Committee	City departments in committee	Committee formed and 2 meetings held per year
2-2	Comply with state public notification guidelines	All departments	Notices posted for all meetings as required by state

D. Stormwater Management Program Summary (Cont.)

2-3
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Stencil catch basins with "don't dump" message	Department of Public Works	25 catch basins stenciled per year

2-4
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Sponsor community participation event	Health Department	at least 1 event held annually - # of residents participating

3. Illicit Discharge Detection and Elimination:

3-1
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Develop ordinance for illicit connections and discharges	Planning	Ordinance developed and presented to City Council

3-2
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Map stormwater system, outfalls, and receiving waters	Engineering	Map created

3-3
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Conduct dry weather outfall screening	Engineering and DPW	Number of outfalls screened

3-4
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Develop & implement a plan to identify & remove non-stormwater discharges	DPW and Engineering	Number of illicit connections found and removed

3-5
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Investigate discharge locations of floor drains at fire dep't	DPW and Fire Department	Discharge location determined, connections to MS4 removed if necessary

4. Construction Site Runoff Control:

4-1
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Develop construction site E&S control ordinance	DPW and Building/Zoning	Final ordinance developed and presented to City Council

4-2
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Require a waste management plan at constr. sites > 1 acre	DPW and Building/Zoning	Requirement developed, # of waste mgmt plans reviewed

D. Stormwater Management Program Summary (Cont.)

4-3 BMP ID #		
Review site plans for stormwater impacts Specify Best Management Practice	DPW, Engineering, Building/Zoning Responsible Dept./Person Name	Internal protocol developed, # of plans reviewed Specify Measurable Goal
4-4 BMP ID #		
Consider public input during project's planning phase for projects >1 acre Specify Best Management Practice	Engineering and DPW Responsible Dept./Person Name	Number of public review and comment periods held Specify Measurable Goal
4-5 BMP ID #		
Inspect Erosion & Sediment Controls Specify Best Management Practice	DPW, Engineering, Con. Comm. & Bldg. Inspector Responsible Dept./Person Name	Number of inspections conducted Specify Measurable Goal

5. Post Construction Runoff Control:

5-1 BMP ID #		
Apply stds 2,3,4,7,9 of Mass. Stormwater Policy for projects >1 acre Specify Best Management Practice	DPW Responsible Dept./Person Name	Included in Stormwater ordinance (BMP 4-1) - Presented to City Council Specify Measurable Goal
5-2 BMP ID #		
Specifiy Stormwater BMP Manual Specify Best Management Practice	DPW Responsible Dept./Person Name	BMP manual selected Specify Measurable Goal
5-3 BMP ID #		
Develop procedure to track and schedule maint. on BMPs Specify Best Management Practice	DPW Responsible Dept./Person Name	Procedure developed to track and plan regular maintenance on private structural BMPs Specify Measurable Goal

6. Municipal Good Housekeeping:

6-1 BMP ID #		
Conduct good housekeeping training Specify Best Management Practice	DPW Responsible Dept./Person Name	Training held for staff who could potentially impact stormwater Specify Measurable Goal
6-2 BMP ID #		
Street sweeping Specify Best Management Practice	DPW Responsible Dept./Person Name	Percent of streets swept Specify Measurable Goal
6-3 BMP ID #		
Roadway deicing Specify Best Management Practice	DPW Responsible Dept./Person Name	Alternative deicers evaluated, Amt. of alt. deicers used Specify Measurable Goal

D. Stormwater Management Program Summary (cont.)

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-4	Snow removal	DPW	Install silt fence or haybales around disposal area
6-5	Minimize impacts from municipal vehicle washing	Individual department heads	Need for add'l controls evaluated, installed (if needed)
6-6	Minimize impacts from municipal vehicle maintenance	Individual department heads	Hazardous material inventory updated
6-7	Catch basin cleaning and storm drain maintenance	DPW	Number of CBs cleaned, condition of system recorded
6-8	Park and landscape maintenance	DPW	Obtain amts. of pesticides, fertilizers used by contractor
6-9	Urban forestry program	DPW and City Engineer	Urban forestry program developed, # of trees planted
6-10	Illegal dumping control	Board of Health	Number of signs posted, number of sites cleaned up
6-11	Spill prevention and response	Individual department heads	Number of training sessions held; number of employees attending

7. BMPs for Meeting TMDL:

BMP ID #		Responsible Dept./Person Name	Specify Measurable Goal
N/A	There are no TMDLs developed for Westfield		

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.

The Honorable Richard K. Sullivan, Mayor of the City of Westfield
Printed Name

Signature

7-28-03
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

City of Westfield, MA
Transmittal Number W040836
Facility ID (if known)

	PERMIT YEAR ONE				PERMIT YEAR TWO				PERMIT YEAR THREE				PERMIT YEAR FOUR				PERMIT YEAR FIVE				
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
1-1								X								X					
1-2												X								X	
1-3																					
1-4								X				X				X				X	
1-5																X				X	
1-6				X				X				X				X				X	
2-1	Form committee in first year & meet twice a year					X		X		X		X		X		X		X		X	
2-2																					
2-3				X		X				X				X				X			
2-4				X			X				X				X				X		
3-1	Develop and present ordinance in first year and annually thereafter until passed																				
3-2			Map all outfalls by end of year 2						Map drainage system by end of year 5												
3-3															X				X		X
3-4																					
3-5		Investigate floor drains by end of year 2 and develop a plan to remove drains if connected to separate storm sewer system by end of year 4																			
4-1	Develop and present ordinance in first year and annually thereafter until passed																				
4-2														Develop requirement by end of fifth year and review plans after requirement is developed							
4-3																					
4-4																					
4-5																					
5-1	Develop and present ordinance in first year and annually thereafter until passed																				
5-2	Develop and present ordinance in first year and annually thereafter until passed																				
5-3								Develop program to track maintenance of private BMPs by end of fourth year. Perform long term maintenance on structural BMPs thereafter												
6-1				Training program will be developed by the end of the first year and each appropriate staff will attend training at least once per permit term																	
6-2																					
6-3																					
6-4																					
6-5																				X	
6-6																					
6-7																					
6-8																					
6-9				X			X				X				X				X		
6-10				Inventory illegal dumping areas by end of first year, post signs and train staff by end of second year, clean up dump sites as necessary																	
6-11								X				X				X				X	