# APPENDIX V
# NOTICE OF INTENT INSTRUCTIONS
# AND SUGGESTED FORMS AND MAILING ADDRESSES

## I. Notice of Intent (NOI) Instructions

In order to be covered by the Dewatering General Permit (DGP) applicants must submit a written NOI to EPA and the appropriate state agency. The NOI consists of either the suggested NOI form included in Part II of this Appendix or another form of official correspondence that contains all of the required information listed in the General Permit and the NOI instructions.

**A. Instructions for the NOI** - At a minimum, the NOI must include the following information for each individual facility. Additional information may be attached as needed.

### 1. General facility information.

a) Provide the name and mailing address of the facility.

b) Provide the facility location address, including the latitude and longitude, if different from the mailing address. Provide the SIC code(s) and type of business.

c) Provide the legal name, address, telephone and fax number of the owner and operator (if not the owner) if different from the facility information. Indicate whether the owner is a Federal, State, Tribal, private or other entity.

d) Provide a topographic map indicating the location(s) of the facility and receiving water, and discharge point(s).

e) Provide the answer to the following questions:
   i. Has a prior NPDES permit been granted for this discharge? If yes, provide the permit number:
   ii. Is the discharge a "new discharge" as defined by 40 CFR Section122.2?
   iii. Is the facility covered by an individual NPDES permit? If yes, provide the permit number.
   iv. Is there a pending application on file with EPA for this discharge?

### 2. Discharge information.

a) Provide the name of the receiving water(s) into which each outfall will discharge into and identify if it is freshwater or marine water and its state water quality classification.

b) Describe the activity (construction dewatering, dewatering of foundation sumps etc.) that generates the discharge(s) to be covered by the permit. If available, please provide a facility water flow diagram. Also, if known, identify and describe any and all treatment methods and provide a technology diagram depicting the treatment of discharge at the facility.

c) Provide the number of outfalls; and for each outfall, provide the following information:

i. Please estimate the flow in GPD – both the maximum daily and average flow rate of the discharge in gallons per day;

ii. Provide the maximum and minimum monthly pH of discharge (in s.u.);

iii. Identify the source of the water being discharged (i.e. potable water, surface water, groundwater). If the source is groundwater, the facility shall submit effluent test results, as required in Section 4.4.5 of the General Permit. If the source is potable water, EPA will calculate the Total Residual Chlorine effluent limits.

iv. If known, state whether the discharge(s) is continuous, periodic (occurs regularly, for example monthly or seasonally, but is not continuous all year) or intermittent (occurs sometimes but not regularly), or both. If the discharge is periodic, specify the frequency (number of days or months per year) of the discharge and the specific months of discharge. If the discharge is intermittent, specify the number of days per year there is intermittent discharge. If the dewatering is temporary and will occur within a finite period of time, state the approximate start and end dates of dewatering.

v. Provide the latitude and longitude of each discharge point (outfall) with an accuracy of 100 feet (see EPA's siting tool at: http://www.epa.gov/tri/report/siting_tool/) and,

vi. If the source of the discharge is potable water, provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water. Also, please attach any calculation sheets used to support stream flow and dilution calculations. See Appendix VII for equations and additional information.

vii. For Massachusetts facilities only: Determine if the discharge is into an Area of Critical Environmental Concern (ACEC) and, if yes, provide the name of the ACEC. See Section 3.4 and Appendix 1 of the General Permit for more information on ACECs.

**3. Contaminant Information.**

a) If the facility uses any pH neutralization and/or dechlorination chemicals, provide the product name and manufacturer; maximum and average daily quantity used as well as the maximum and average daily expected concentrations (mg/l) in the discharge; and the vendor's reported aquatic toxicity (NOAEL and/or $LC_{50}$ in percent for aquatic organism(s)).

b) Please report any known remediation activities or water-quality issues in the vicinity of the discharge.

**4. Determination of Endangered Species Act Eligibility**

Provide documentation of ESA eligibility as required at Part 3.4 and Appendices III and IV and respond to the following questions.

a) Indicate whether any listed threatened or endangered species, designated critical habitat, or essential fish habitat, are in the proximity of the discharge(s) to be covered by this permit.
b) Indicate whether any consultation with the federal Services been completed.
c) Indicate if the consultation is underway.
d) Provide the results of the consultation with the US Fish and Wildlife and/or NOAA Fisheries Service: a "no jeopardy" opinion; or written concurrence on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat
e) Identify which of the five eligibility criteria listed in Appendix 2, Section B (criteria A,B,C,D,or E) that you have met.
f) Include with the NOI, a copy of the most current federal listing of endangered and threatened species found at USF&W website.

## 5. Documentation of National Historic Preservation Act Requirements

Respond to the following questions:

a) Are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility or site or in proximity to the discharge?
b) Have any state or tribal historic preservation officer (SHPO or THPO) been consulted in making this determination. Provide the results of the consultation.
c) Which of the three National Historic Preservation Act requirements listed in Appendix 3, Section C (requirements 1, 2, or 3) have you met?

## 6. Supplemental Information

Applicants should provide any supplemental information needed to meet the requirements of the permit, including, any analytical data used to support the application, and any certification(s) required by the permit.

## 7. Signature Requirements

The Notice of Intent must be signed and dated by the operator in accordance with the signatory requirements of 40 CFR Section 122.22 (see below) including the following certification:

**I certify under penalty of law that (1) no biocides or other chemical additives except for those used for pH adjustment and/or dechlorination are used in the dewatering system; (2) the discharge consists solely of dewatering and authorized pH adjustment and/or dechlorination chemicals; (3) the discharge does not come in contact with any raw materials, intermediate product, waste product or finished product; (4) if the discharge of dewatering subsequently mixes with other wastewater (i.e.stormwater) prior to discharging to the receiving water, any monitoring provided under this permit will be only for**

**dewatering discharges; (5) where applicable, the facility has complied with the requirements of this permit specific to the Endangered Species Act and the National Historic Preservation Act; and (6) 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 certify that I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.**

Federal regulations require this application to be signed as follows:
1. For a corporation, by a principal executive officer of at least the level of vice president;
2. For partnership or sole proprietorship, by a general partner or the proprietor, respectively, or,
3. For a municipality, State, Federal or other public facility, by either a principal executive officer or ranking elected official.

**B. Submission of NOI to EPA**

Filing with EPA - All operators located in Massachusetts and New Hampshire that apply for coverage under this General Permit must submit a written NOI to EPA-New England. The completed, signed NOI forms and attachments must be submitted to EPA-NE at:

US Environmental Protection Agency
Dewatering GP Processing
Municipal Assistance Unit (CMU),
1 Congress Street, Suite 1100
Boston, MA 02114-2023

or electronically mailed to GeneralPermit.Dewatering@epa.gov.

Filing with the states - A copy of the NOI form filed with EPA-NE must also be filed with state agencies. The state agency may elect to develop a state specific form or other additional information requirements.

1. Discharges in Massachusetts

a. New or Increased Discharges or Discharges currently covered by an individual permit

Facilities located in Massachusetts with new or increased discharges, or facilities with a dewatering discharge that is currently covered by an individual permit that have been requested to seek coverage under the general permit, must submit a copy of their completed Notice of Intent; the completed State Transmittal Form; and a **copy** of the check for the appropriate fee to:

Massachusetts Department of Environmental Protection

Division of Watershed Management
627 Main Street, 2nd floor
Worcester, MA 01608

The transmittal form, instructions, and fee amount may be obtained through the MassDEP website at http://www.mass.gov/dep/water/approvals/surffms.htm. Click under "Related Topics" to link to the both the transmittal form and fee instructions. Scroll down to BMP WM 10 to link to the Suggested EPA NOI form and instructions.

In addition, the appropriate fee and a copy of the transmittal form must be sent to:

Massachusetts Department of Environmental Protection
P.O. Box 4062
Boston, MA 02211

b. Administratively Continued Discharges under the expired General Permit

Facilities located in Massachusetts with dewatering discharges that were covered under the expired general permit had their coverage administratively continued if the facility submitted a renewal application before the permit expired on September 23, 2007. To obtain coverage under this General Permit, these facilities must submit a completed copy of their Notice of Intent, and a copy of the MassDEP transmittal from their previous application to:

Massachusetts Department of Environmental Protection
Division of Watershed Management
627 Main Street, 2nd floor
Worcester, MA 01608

All applicants should keep a copy of the complete application package for their records.

2. Discharges in New Hampshire

All applicants must provide a completed copy of their Notice of Intent to:

New Hampshire Department of Environmental Services
Water Division, Wastewater Engineering Bureau
29 Hazen Drive, P.O. Box 95
Concord, New Hampshire 03302-0095

## II. Suggested Notice of Intent (NOI) Form

**1. General facility information. Please provide the following information about the facility.**

| | | |
|---|---|---|
| **a) Name of facility:** | **Mailing Address for the Facility:** | |
| **b) Location Address of the Facility (if different from mailing address):** | **Facility Location**<br><br>**longitude:_____**<br>**latitude:_____** | **Type of Business:**<br><br>**Facility SIC codes:** |

**c) Name of facility owner: _____ Owner's email: _____**

**Owner's Tel #: _____ Owner's Fax #: _____**

**Address of owner (if different from facility address)**

**Owner is (check one): 1. Federal____ 2. State _____ 3.Tribal_____ 4. Private_____ 4. Other _____(Describe)**

**Legal name of Operator, if not owner: _____**

**Operator Contact Name: _____**

**Operator Tel Number: _____ Fax Number: _____**

**Operator's email: _____**

**Operator Address (if different from owner)**

**d) Attach a topographic map indicating the location of the facility and the outfall(s) to the receiving water. Map attached? _____**

**e) Check Yes or No for the following:**

1. **Has a prior NPDES permit been granted for the discharge? Yes ____ No____ If Yes, Permit Number: _____**
2. **Is the discharge a "new discharge" as defined by 40 CFR Section 122.22? Yes_____ No_____**
3. **Is the facility covered by an individual NPDES permit? Yes_____ No_____ If Yes, Permit Number ____**
4. **Is there a pending application on file with EPA for this discharge? Yes _____ No _____ If Yes, date of submittal:**

**2. Discharge information. Please provide information about the discharge, (attaching additional sheets as needed)**

**a) Name of receiving water into which discharge will occur: _____**
**State Water Quality Classification: _____ Freshwater: _____ Marine Water: _____**

**b) Describe the discharge activities for which the owner/applicant is seeking coverage:**
1. **Construction dewatering of groundwater intrusion and/or storm water accumulation.**
2. **Short-term or long-term dewatering of foundation sumps.**
3. **Other.**

**c) Number of outfalls _____**

**For each outfall:**

**d) Estimate the maximum daily and average monthly flow of the discharge (in gallons per day – GPD). Max Daily Flow _____ GPD**
**Average Monthly Flow _____ GPD**

**e) What is the maximum and minimum monthly pH of the discharge (in s.u.)? Max pH _____ Min pH _____**

**f) Identify the source of the discharge (i.e. potable water, surface water, or groundwater). If groundwater, the facility shall submit effluent test results, as required in Section 4.4.5 of the General Permit.**

**g) What treatment does the wastewater receive prior to discharge?**

**h) Is the discharge continuous? Yes _____ No _____ If no, is the discharge periodic (P) (occurs regularly, i.e., monthly or seasonally, but is not continuous all year) or intermittent (I) (occurs sometimes but not regularly) or both (B) _____**
**If (P), number of days or months per year of the discharge _____ and the specific months of discharge _____;**
**If (I), number of days/year there is a discharge _____**
**Is the discharge temporary? Yes _____ No _____**
**If yes, approximate start date of dewatering _____ approximate end date of dewatering _____**

**i) Latitude and longitude of each discharge within 100 feet (See http://www.epa.gov/tri/report/siting_tool): Outfall 1: long._____ lat._____; Outfall 2: long._____ lat._____; Outfall 3: long._____ lat._____.**

**j) If the source of the discharge is potable water, please provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water and attach any calculation sheets used to support stream flow and dilution calculations_____ cfs**
**(See Appendix VII for equations and additional information)**

**MASSACHUSETTS FACILITIES: See Section 3.4 and Appendix 1 of the General Permit for more information on Areas of Critical Environmental Concern (ACEC):**

**k) Does the discharge occur in an ACEC? Yes _____ No _____**
**If yes, provide the name of the ACEC: _____**

**3. Contaminant Information**

**a) Are any pH neutralization and/or dechlorination chemicals used in the discharge? If so, include the chemical name and manufacturer; maximum and average daily quantity used as well as the maximum and average daily expected concentrations (mg/l) in the discharge, and the vendor's reported aquatic toxicity (NOAEL and/or $LC_{50}$ in percent for aquatic organism(s)).**

**b) Please report any known remediation activities or water-quality issues in the vicinity of the discharge.**

**4. Determination of Endangered Species Act Eligibility: Provide documentation of ESA eligibility as required at Part 3.4 and Appendices III and IV. In addition, respond to the following questions.**

**a) Are any listed threatened or endangered species, or designated critical habitat, in proximity to the discharge? Yes____No____**
**b) Has any consultation with the federal services been completed ? Yes___ No__**
**c) Is consultation underway? Yes ____ No____**
**d) What were the results of the consultation with the U.S. Fish and Wildlife Service and/or NOAA Fisheries Service (check one): a "no jeopardy" opinion _____or written concurrence____ on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat.**
**e) Which of the five eligibility criteria listed in Appendix 2, Section B (A,B,C,D,or E) have you met? _____**
**f) Please attach a copy of the most current federal listing of endangered and threatened species, found at USF&W website.**

**5. Documentation of National Historic Preservation Act requirements: Please respond to the following questions:**

**a) Are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility site or in proximity to the discharge? Yes _____ No ____**
**b) Have any State or Tribal historic preservation officers been consulted in this determination? Yes _____ or No _____ If yes, attach the results of the consultation(s).**
**c) Which of the three National Historic Preservation Act requirements listed in Appendix 3, Section C (1,2 o3) have you met? _____**

**6. Supplemental Information: Please provide any supplemental information. Attach any analytical data used to support the application. Attach any certification(s) required by the general permit**

**7. Signature Requirements: The Notice of Intent must be signed by the operator in accordance with the signatory requirements of 40 CFR Section 122.22 (see below) including the following certification:**

**I certify under penalty of law that (1) no biocides or other chemical additives except for those used for pH adjustment and/or dechlorination are used in the dewatering system; (2) the discharge consists solely of dewatering and authorized pH adjustment and/or**

**dechlorination chemicals; (3) the discharge does not come in contact with any raw materials, intermediate product, water product or finished product; (4) if the discharge of dewatering subsequently mixes with other permitted wastewater (i.e.stormwater) prior to discharging to the receiving water, any monitoring provided under this permit will be only for dewatering discharge; (5) where applicable, the facility has complied with the requirements of this permit specific to the Endangered Species Act and National Historic Preservation Act; and (6) 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 certify that I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.**

| |
|---|
| **Facility Name:** |
| **Operator signature:** |
| **Title:** |
| **Date:** |

**Federal regulations require this application to be signed as follows:**

**1. For a corporation, by a principal executive officer of at least the level of vice president;**
**2. For partnership or sole proprietorship, by a general partner or the proprietor, respectively, or,**
**3. For a municipality, State, Federal or other public facility, by either a principal executive officer or ranking elected official.**