1087

Hand-enter Your Transmittal Number → W 040422
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

BRPWM08A — Permit Code: 7 or 8 character code from permit instructions
Stormwater — Name of Permit Category
NPDES Stormwater General Permit — Type of Project or Activity

B. Applicant Information – Firm or Individual

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

Last Name of Individual _____ **First Name** of Individual _____ MI _____

77 Park Street — Street Address

Attleboro — City/Town; MA — State; 02703 — Zip Code; 508-223-2222 — Telephone # and extension

Mr. Edward Tanner — Contact Person; e-mail address (optional) _____

C. Facility, Site or Individual Requiring Approval

City of Attleboro Storm Drainage System — Name of Facility, Site or Individual; DEP Facility Number (if Known) _____; Federal I.D. Number (if Known) _____

same as above — Street Address; e-mail address (optional) _____

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

50 Hampshire Street — Address

Cambridge — City/Town; MA — State; 02139 — Zip Code; 617452-6000 — Telephone # and extension

Brent McCarthy — Contact Person; LSP Number (21E only) _____

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

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 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)

W040422
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 Attleboro
   Name

   77 Park Street
   Mailing Address

   Attleboro — City/Town
   MA — State

   508-223-2222 — Telephone Number
   Email (if available)

2. Municipality Name

   Attleboro
   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:

   Massachusetts Highway Department

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.)

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
Tenmile River (Name)	Unknown (Number)	☒ Yes ☐ No	Metals, nutrients, siltation, organic enrichment/low DO, pathogens, noxious aquatic plants, turbidity (Specify)
Sevenmile River (Name)	Unknown (Number)	☒ Yes ☐ No	organic enrichment, low DO, pathogens (Specify)
Dodgeville Pond (Name)	Unknown (Number)	☒ Yes ☐ No	nutrient, pathogens, noxious aquatic plants, turbidity (Specify)
Farmers Pond (Name)	Unknown (Number)	☒ Yes ☐ No	nutrients, noxious aquatic plants (Specify)
Hebronville Pond (Name)	Unknown (Number)	☒ Yes ☐ No	noxious aquatic plants (Specify)
Mechanics Pond (Name)	Unknown (Number)	☒ Yes ☐ No	nutrients, pathogens, noxious aquatic plants (Specify)
Luther Reservoir (Name)	Unknown (Number)	☒ Yes ☐ No	turbidity (Specify)
Lake Como (Name)	Unknown (Number)	☒ Yes ☐ No	noxious aquatic plants, turbidity (Specify)
Speedway Brook (Name)	Unknown (Number)	☒ Yes ☐ No	metals, nutrients, siltation, organic enrichment, low DO, pathogens, turbidity (Specify)
Manchester Pond (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Orrs Pond (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)
Cranberry Ponds (Name)	Unknown (Number)	☐ Yes ☒ No	(Specify)

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

Name	Number		Specify
Sweeden's Swamp	Unknown	☐ Yes ☒ No	
Fourmile Brook	Unknown	☐ Yes ☒ No	
Brook Tributary to Tenmile River	Unknown	☐ Yes ☒ No	
Brook Tributary to Sevenmile River	Unknown	☐ Yes ☒ No	
Thatcher Brook	Unknown	☐ Yes ☒ No	
Bliss Brook	Unknown	☐ Yes ☒ No	
Streams Tributary to Thatcher Brook	Unknown	☐ Yes ☒ No	
Chartley Brook	Unknown	☐ Yes ☒ No	
Chartley Pond	Unknown	☐ Yes ☒ No	
Coopers Pond	Unknown	☐ Yes ☒ No	
Bungay River	Unknown	☐ Yes ☒ No	
Blackstone River	Unknown	☐ Yes ☒ No	
Happy Hollow Pond	Unknown	☐ Yes ☒ No	
Robin Hollow Pond	Unknown	☐ Yes ☒ No	
Unnamed ponds and wetlands	Unknown	☐ Yes ☒ No	

D. Stormwater Management Program Summary

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1-1	Article/brochure about stormwater mailed to residents and businesses	Environmental Planner	Article/brochure distributed annually
1-2	Update City website to include stormwater management information	Environmental Planner/Conservation Commission	City website updated
1-3	Sponsor Cleanup Days for rivers and water bodies within City limits	DPW/Health Dept/Park and Forestry Dept	Hold City-sponsored Cleanup Days
1-4	Stormwater education program for school children	Environmental Planner	Presentation given to middle schools
1-5	Present stormwater management issues to organizations	Environmental Planner	Presentation given to at least one group annually
1-6	Educate dog owners about picking up dog waste	Health Dept/City Clerk	Pet waste fact sheets mailed to dog owners in annual dog registration mailing
1-7	Install and maintain signs for stormwater management and pet waste clean-up at schools and parks	Park and Forestry Dept/Recreation Dept	Number of signs installed, number of signs inspected

D. Stormwater Management Program Summary (Cont.)

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1-8	Staff table at annual Earth Day event	Health Dept	Table staffed annually, number of brochures handed out
1-9	Continue to staff a table weekly at "Wednesday Night Market	Health Dept	Table staffed, number of brochures handed out
1-10	Annual update of Stormwater Management Plan at televised Municipal Council meeting	Environmental Planner/DPW	Annual update of SWMP at Municipal Council meeting
1-11	Appear on local access television talk show to discuss stormwater management	Planning Dept/Health Dept/DPW	Periodic discussion of stormwater management on local access television
1-12	Post information on stormwater management on local access television	Environmental Planner	Information posted and updated on local access channel.
1-13	Post signs and develop and distribute brochures on Wall Street Highway Yard Stormwater Improvements	DPW/Environmental Planner	Signs posted and brochures distributed

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2-1	Comply with state public notification guidelines at MGL Chapter 39 Section 23B	DPW/Environmental Planner/Health Dept	Notices posted in designated locations

D. Stormwater Management Program Summary (Cont.)

2-2
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Stencil catch basins with don't dump message	DPW	Number of catch basins stenciled

3. Illicit Discharge Detection and Elimination:

3-1
BMP ID #

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

3-2
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Map stormwater outfalls and receiving waters	Environmental Planner	Map created

3-3
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Map stormwater collection system in GIS	Environmental Planner	GIS of stormwater system created

3-4
BMP ID #

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

3-5
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Develop ordinance that prohibits illicit connections, allows access to buildings, and requires redirection of illicit connections found	City Attorney/Planning Dept/DPW	Draft ordinance developed and presented to Municipal Council

3-6
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Continue inspection of new construction for correct connection to sanitary sewer	DPW/Dept of Water and Wastewater	New construction inspected

D. Stormwater Management Program Summary (Cont.)

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4-1	Develop city-wide construction site erosion and sediment control ordinance for sites greater than 1 acre	City Attorney/Planning Dept	Draft ordinance developed and presented to Municipal Council
4-2	Require construction site operator to submit monthly erosion and sediment control reports.	DPW	Inspection reports submitted to City
4-3	Review site plans for stormwater impacts	Environmental Planner/Planning Board	Number of site plans reviewed
4-4	Consideration of public input	Environmental Planner/Planning Board	Public review and comment periods held; signs posted at construction sites

5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
5-1	Develop ordinance to apply Performance Standards 2,3,4,7,and 9 of the MA Stormwater Policy to developments disturbing more than 1 acre.	City Attorney/Planning Dept	Draft ordinance developed and presented to Municipal Council
5-2	Specify a stormwater BMP manual to be used for consistent design and performance standards.	Environmental Planner	BMP manual selected.

D. Stormwater Management Program Summary (Cont.)

5-3
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Ensure long-term maintenance of structural BMPs.	City Attorney/Planning Dept	Draft ordinance developed and presented to Municipal Council

6. Municipal Good Housekeeping:

6-1
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Employee Training Program	DPW	Number/percent of DPW employees who receive stormwater training each year.

6-2
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Continue street and parking lot sweeping	DPW	All streets and municipal parking lots swept in spring; downtown street swept twice weekly throughout year, weather permitting; tons of materials removed from roadways annually.

6-3
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Storm drain maintenance	DPW	Percent of catch basins cleaned annually.

6-4
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Evaluate street sweeping and catch basin cleaning equipment.	DPW	Evaluation of existing equipment

6-5
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Roadway deicing	DPW	Reduction in amount of deicers used (compared to years with similar snowfall and deicer demand) and environmental impacts of deicers.

D. Stormwater Management Program Summary (Cont.)

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-6	Proper snow disposal	DPW	Designated snow disposal areas identified.
6-7	Continue spill prevention and response training at DPW facility	DPW/Health Dept	Periodic training of employees.
6-8	Develop a written spill prevention and response plan for the DPW facility	DPW/Health Dept	Written spill prevention and response plan developed and updated annually.
6-9	Continue to maintain hazardous materials inventory for materials used or generated by the City.	DPW/Fire Dept/Health Dept	Maintenance of hazardous materials inventory system.
6-10	Minimize impacts from vehicle maintenance.	DPW	Reduction in amount of hazardous materials used.
6-11	Minimize impacts from vehicle washing.	DPW/Police Dept	Investigation with specific recommendations completed. Resulting implementation of recommendations scheduled. Decline in use of soap. Switch to biodegradable soap.
6-12	Park and landscape maintenance.	Park & Forestry Dept/Recreation Dept	Amount of herbicides/fertilizers used.

D. Stormwater Management Program Summary (Cont.)

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-13	Continue tree planting and maintenance program.	Park & Forestry Dept/Recreation Dept	Number of trees planted.
6-14	Illegal dumping control.	DPW/Health Dept	Number of signs posted; number of sites cleaned up.
6-15	Continue to hold Annual Household Hazardous Waste Collection Day.	Health Dept	Household Hazardous Waste Collection Day held annually.
6-16	Continue to provide monthly drop off days for automotive and other waste products.	Health Dept	Monthly waste drop offs for residents provided during non-winter months.
6-17	Continue enforcement of pet waste pick-up ordinance. Empty trash barrels frequently to encourage proper disposal.	Health Dept/Animal Control Officer/DPW/Parks and Recreation Depts	Reduction in complaints, if any, of pet waste in public areas; frequency of trash barrel emptying.
6-18	Implement stormwater improvements at the City's Wall Street Highway Yard designed to reduce nonpoint source pollution to the Tenmile River.	DPW/Environmental Planner	Construction of stormwater improvement projects.
6-19	Enter into agreement with Historic Preservation Officer to mitigate potential impacts to Blackinton Houses & Park Historic Site.	Environmental Planner	Written agreement with Historic Preservation Officer obtained.

7. BMPs for Meeting TMDL: NONE REQUIRED; NO TMDLs IN ATTLEBORO.

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.

Judith H. Robbins
Printed Name

Judith H. Robbins
Signature

Mayor

7/24/03
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. Example Storm Water Management Program TIME FRAMES

Transmittal Number W040422

Facility ID (if known) _____

Page ____ of ____

	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
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