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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 035626
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:

   Steven C. Pisch, Assistant Town Engineer
   Name

   59 Town Hall Square
   Mailing Address

   Falmouth — City/Town
   MA — State

   508-495-7430 — Telephone Number
   scpisch@cape.com — Email (if available)

2. Municipality Name

   Falmouth
   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:

   State Highways Routes 28 & 28A, Locust Street and Woods Hole Road

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
Falmouth Harbor (Name)	14 (Number)	☐ Yes ☐ No	Pathogens (Specify)
Sols Pond (Name)	5 (Number)	☐ Yes ☐ No	(Specify)
Jones Pond (Name)	3 (Number)	☐ Yes ☐ No	(Specify)
Great Pond (Name)	6 (Number)	☐ Yes ☐ No	(Specify)
Green Pond (Name)	5 (Number)	☐ Yes ☐ No	(Specify)
Salt Pond (Name)	1 (Number)	☐ Yes ☐ No	(Specify)
Shivericks Pond (Name)	5 (Number)	☐ Yes ☐ No	(Specify)
Morse Pond (Name)	2 (Number)	☐ Yes ☐ No	(Specify)
Little Pond (Name)	4 (Number)	☐ Yes ☐ No	(Specify)
Vineyard Sound (Name)	21 (Number)	☐ Yes ☐ No	(Specify)
Siders Pond (Name)	5 (Number)	☐ Yes ☐ No	(Specify)
West Falmouth Harbor (Name)	3 (Number)	☐ Yes ☐ No	Pathogens (Specify)
Bournes Pond (Name)	2 (Number)	☐ Yes ☐ No	(Specify)
Eel Pond (Name)	23 (Number)	☐ Yes ☐ No	(Specify)
Perch Pond (Name)	5 (Number)	☐ Yes ☐ No	(Specify)
Quissett Harbor (Name)	1 (Number)	☐ Yes ☐ No	Pathogens (Specify)
Great Harbor (Name)	3 (Number)	☐ Yes ☐ No	Pathogens (Specify)
Megansett Harbor (Name)	1 (Number)	☐ Yes ☐ No	(Specify)

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W035626
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:	No. of Outfalls	Listed as Impaired?	Impairment
Jenkins Pond (Name)	1 (Number)	☐ Yes ☐ No	(Specify)
Cedar Lake (Name)	1 (Number)	☐ Yes ☐ No	(Specify)
Little Harbor (Name)	2 (Number)	☐ Yes ☐ No	Pathogens (Specify)
Buzzards Bay (Name)	4 (Number)	☐ Yes ☐ No	(Specify)
Wild Harbor (Name)	2 (Number)	☐ Yes ☐ No	(Specify)
Oyster Pond (Name)	1 (Number)	☐ Yes ☐ No	(Specify)
Miles Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Crocker Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Little Sippewissett Marsh (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Fiddlers Cove (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Dam Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Wings Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Flax Pond (North Falmouth) (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Grews Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Mares Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Spectacle Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)

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
Deer Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Round Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Shallow Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Crooked Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Coonamessett Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Flax Pond (East Falmouth) (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Spectacle Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Deep Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Grassy Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Fresh Pond (West Falmouth) (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Hamblin Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Ashumet Road (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Waquoit Bay (Name)	0 (Number)	☐ Yes ☐ No	nutrients organic enrichment /Low DO Pathogens
Nye Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Randall Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Nobska Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Quahog Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)
Beach Pond (Name)	0 (Number)	☐ Yes ☐ No	(Specify)

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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
Fresh Pond (East Falmouth)	0	☐ Yes ☐ No	
Cable Pond	0	☐ Yes ☐ No	
Bog Pond	0	☐ Yes ☐ No	
Bourne Pond	0	☐ Yes ☐ No	
Childs River	0	☐ Yes ☐ No	
Mill Pond (Woods Hole)	0	☐ Yes ☐ No	
Moonakis River	0	☐ Yes ☐ No	Nutrients organic enrichment /Low DO, pathogens
Herring Brook	0	☐ Yes ☐ No	Pathogens
Snug Harbor	0	☐ Yes ☐ No	
Rands Canal	0	☐ Yes ☐ No	
Fiddlers Cove	0	☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	
		☐ Yes ☐ No	

Name / Number / Specify

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D. Stormwater Management Program Summary

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1-1	Educational Flyer	Town Administrator	Flyer Distributed
1-2	Annual Public Hearing	Town Administrator	Meeting Held
1-3	Posting of Maps	DPW-Engineering Division	Map Displayed

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2-1	Encourage Participation	Town Administrator	Complaint Report Filed
2-2	Stormwater Management Committee	Board of Selectmen	Committee Established
2-3	Annual Selectmen's Review	Board of Selectmen	Meetings Held
2-4	Storm Drain Stenciling	Director of Public Works	Document Stenciled CB's
2-5	Hazardous Waste Collection	Board of Health Agent	Document Material Collected

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D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
3-1	Discharge Identification	Director of Public Works	Production of Maps
3-2	Drainage Network Mapping	Director of Public Works	Production of Maps
3-3	Illicit Discharge Identification	BOH, DPW	Quantify Illicit Discharges
3-4	Illicit Discharge Enforcement	BOH, Planning, DPW	Quantify Illicit Discharges
3-5	DPW Training	Director of Public Works	Meetings Held

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4-1	Conservation Commission Bylaw	Conservation Commission	Bylaws Changed
4-2	Planning Board Regulations	Planning Board	Regulations Changed
4-3	Planning Board Zoning	Planning Board	Bylaws Changed

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D. Stormwater Management Program Summary (Cont.)

5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
5-1	Conservation Commission Bylaws	Conservation Commission	Bylaws Changed
5-2	Planning Board Regulations	Planning Board	Regulations Changed
5-3	Planning Board Zoning	Planning Board	Bylaws Changed

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-1	DPW Policy Guide	Director of Public Works	Policy Guide Prepared
6-2	DPW Annual Training	Director of Public Works	Training Completed
6-3	DPW Permit Filing	Director of Public Works	Permits Filed

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D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

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

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

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.

Robert L. Whritenour Jr., Town Administrator
Printed Name

Signature

March 7, 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. StormWater Management Program TIME FRAMES

Transmittal Number W 035626
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				X				X				X		X
1.2			X				X				X				X				X		X
1.3			X				X				X				X				X		X
2.1			X				X				X				X				X		X
2.2			X		X		X		X		X		X		X		X		X		X
2.3			X				X				X				X				X		X
2.4						X				X				X				X			X
2.5	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
3.1		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X			
3.2		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X			
3.3			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
3.4			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
3.5					X				X				X				X				X
3.6			X				X				X				X				X		X
4.1					X		X				X				X				X		
4.2					X		X				X				X				X		
4.3					X		X				X				X				X		
5.1					X		X				X				X				X		
5.2					X		X				X				X				X		
5.3					X		X				X				X				X		
6.1					X																
6.2					X				X				X				X				X
6.3	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X