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Hand-enter Your Transmittal Number → W 041238
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 Phase II General Permit for MS4s
Name of Permit Category

Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)
Type of Project or Activity

B. Applicant Information – Firm or Individual

Town of Franklin, Massachusetts
Name of Firm - Or, if party needing this approval is an individual enter name below:

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

150 Emmons Street
Street Address

Franklin | MA | 02038 | (508) 520-4910
City/Town | State | Zip Code | Telephone # and extension

William Fitzgerald, DPW Director
Contact Person | e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

Town of Franklin, Massachusetts
Name of Facility, Site or Individual | DEP Facility Number (if Known) | Federal I.D. Number (if Known)

Street Address | e-mail address (optional)

Franklin | MA | 02038 | (508) 520-4910
City/Town | State | Zip Code | Telephone # and extension

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

Malcolm Pirnie, Inc.
Name of Firm Or Individual

500 Edgewater Drive, Suite 566
Address

Wakefield | MA | 01880 | (781) 224-4488
City/Town | State | Zip Code | Telephone # and extension

Robert Winn, P.E.
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)

W 041238
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:

   Town Franklin
   Name

   150 Emmons Street
   Mailing Address

   Franklin — City/Town
   Massachusetts — State

   508-520-4910 — Telephone Number
   Email (if available)

2. Municipality Name

   Town of Franklin
   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 Route 495, Dean 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

B. Applicant Information (cont.)

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 041238
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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
Charles River (Name)	unknown (Number)	☒ Yes ☐ No	Pathogens, Metals (Specify)
Populatic Pond (Name)	unknown (Number)	☐ Yes ☒ No	(Specify)
Franklin Reservoir (Name)	unknown (Number)	☒ Yes ☐ No	Noxious Aquatic Plants, Turbidity
Mine Brook Pond (Name)	unknown (Number)	☒ Yes ☐ No	Noxious aquatic plants, turbidity
Mine Brook (Name)	unknown (Number)	☒ Yes ☐ No	Cause Unknown (Specify)
Beaver Pond (Name)	unknown (Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)

D. Stormwater Management Program Summary

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 041238
Transmittal Number

Facility ID (if known)

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1A	Recycling education for home owners	DPW/ William Fitzgerald	Distribute 3 times per year
1B	Education information on web site	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Web Site information developed and posted
1C	Education on waste disposal and water conservation	DPW/ William Fitzgerald	Materials available in all public buildings
1D	Water resource information and protection signs	DPW/ William Fitzgerald	Five signs posted per year
1E	Public education with Charles River Watershed Assoc.l	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Number of coordinated programs

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2A	Storm drain stenciling		Ten catch basins per year
2B	Outreach efforts with Charles Rivers Watershed Assoc.	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Number of coordinated programs
2C	Public meeting to encourage volunteers	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Meetings held with public

D. Stormwater Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

BMP ID #	Responsible Dept./Person Name	Specify Measurable Goal
3A Storm water map development	DPW/ William Fitzgerald	Map completed showing collection system and outfalls
3B Develop non-storm water discharge ordinance	DPW/ William Fitzgerald	Ordinance adopted by Town
3C Develop illicit detection implementation plan	DPW/ William Fitzgerald	Plan developed
3D Perform dry weather outfall assessments	DPW/ William Fitzgerald	Prioritized areas and number of outfalls assessed
3E Develop procedures for removing illicit connections	DPW/ William Fitzgerald	Procedures developed and number of locations identified

4. Construction Site Runoff Control:

BMP ID #	Responsible Dept./Person Name	Specify Measurable Goal
4A Ordinance development for waste control	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Ordinance adopted by Town
4B Formalization of site plan review procedures	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Site plan review procedures adopted by Town
4C Revised ordinance to address storm water pollution	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Revised ordinance adopted by the Town
4D Best management practice manual for developers	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Handbook completed and adopted by Town
4E Formalization of inspection procedures	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Inspection procedures adopted by the Town Towncompleted

D. Stormwater Management Program Summary (Cont.)

5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
5A	Procedures for long term O&M	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Adoption of procedures by Town
5B	Review Procedures for post construction impacts	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Adoption of procedures by Town
5C	Best management handbook for developers	DPW/ William Fitzgerald Plan./Cons Richard Vacca	Handbook completed and adopted by Town
5D			

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6A	Standard operating procedures	DPW/ William Fitzgerald	Ten procedures developed
6B	Employee training	DPW/ William Fitzgerald	Four employees training sessions
6C	Parking lot and road sweeping	DPW/ William Fitzgerald	Schedule developed and areas prioritized for cleaning
6D	Spill response and prevention	DPW/ William Fitzgerald	procedures and inventory completed
6E	Catch Basin Cleaning	DPW/ William Fitzgerald	Schedule developed and areas prioritized cleaning

D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
N/A	Not Applicable	Not Applicable	Not Applicable

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.

Printed Name: Jeff Nutting - Town Administrator

Signature:

Date: 7/25/03

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

Transmittal Number W 041238

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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