1172

**Hand-enter Your Transmittal Number** W 041092
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
NPDES Stormwater General Permit — Name of Permit Category
Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s) — Type of Project or Activity

## B. Applicant Information – Firm or Individual

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

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

703 Washington Street — Street Address

Holliston — City/Town | MA — State | 01746 — Zip Code | (508)429-0608 — Telephone # and extension

Paul LeBeau, Town Administrator — Contact Person | e-mail address (optional)

## C. Facility, Site or Individual Requiring Approval

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

N/A — Street Address | e-mail address (optional)

Holliston — City/Town | MA — State | 01746 — Zip Code | (508)429-0608 — Telephone # and extension

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

Comprehensive Environmental Incorporated — Name of Firm Or Individual

64 Dilla Street — Address

Milford — City/Town | MA — State | 01757 — Zip Code | 800-725-2550 — Telephone # and extension

Rebecca Balke — 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 |
|---|---|---|
| | | |
| | | |
| | | |

JUL 31 2003
MUNICIPAL ASSISTANCE UNIT

## 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)

W041092
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 of Holliston
   Name

   703 Washington Street
   Mailing Address

   Holliston — City/Town
   MA — State

   508-429-0608 — Telephone Number
   minihana@holliston.k12.ma.us — Email (if available)

2. Municipality Name

   Holliston
   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:

   None

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 31 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 |
|---|---|---|---|
| Beaver Brook (Name) | 1 (Number) | ☐ Yes ☒ No | (Specify) |
| Tributary to Beaver Brook starts near Sawmill Rd. (Name) | 1 (Number) | ☐ Yes ☒ No | (Specify) |
| Tributary to Beaver Brook starts near N. Adams St. (Name) | 2 (Number) | ☐ Yes ☒ No | (Specify) |
| Tributary to Beaver Brook starts near S. Adams St. (Name) | 1 (Number) | ☐ Yes ☒ No | (Specify) |
| Hopping Brook (Name) | 3 (Number) | ☐ Yes ☒ No | (Specify) |
| Tributary to Hopping Brook starts near Marshall St. (Name) | 3 (Number) | ☐ Yes ☒ No | (Specify) |
| Chicken Brook (Name) | 3 (Number) | ☐ Yes ☒ No | (Specify) |
| Tributary to Chicken Brook starts near Johnson Dr. (Name) | 1 (Number) | ☐ Yes ☒ No | (Specify) |
| Tributary to Chicken Brook starts near N. Fairview Dr. (Name) | 1 (Number) | ☐ Yes ☒ No | (Specify) |
| Tributary to Chicken Brook starts near S. Fairview Dr. (Name) | 4 (Number) | ☐ Yes ☒ No | (Specify) |
| Tributary to Chicken Brook starts near Cassandra Ln. (Name) | 1 (Number) | ☐ Yes ☒ No | (Specify) |
| Lake Winthrop (LW) (Name) | 1 (Number) | ☒ Yes ☐ No | Pesticides, Noxious aquatic plant, and Turbidity |
| Tributary to LW starts near Rolling Meadow Dr (Name) | 3 (Number) | ☐ Yes ☒ No | (Specify) |

## C. Names of (Presently Known) Receiving Waters (cont.)

| Name | Number | | | Specify |
|---|---|---|---|---|
| Tributary to LW starts near Manchester Cir. | 2 | ☐ Yes | ☒ No | |
| Tributary to LW starts near Austin Rd. | 1 | ☐ Yes | ☒ No | |
| Winthrop Canal | 3 | ☐ Yes | ☒ No | |
| Tributary to Winthrop Canal starts near Central St. | 2 | ☐ Yes | ☒ No | |
| Factory Pond | 1 | ☒ Yes | ☐ No | Noxious aquatic plants, Exotic species |
| Bogastow Brook | 11 | ☐ Yes | ☒ No | |
| Dopping Brook | 4 | ☐ Yes | ☒ No | |
| Tributary to Dopping Brook starts near Jeffrey Ave. | 5 | ☐ Yes | ☒ No | |
| Jar Brook | 7 | ☐ Yes | ☒ No | |
| Tributary to Jar Brook starts near Concord St. | 4 | ☐ Yes | ☒ No | |
| Tributary to Jar Brook starts near Woods Crossing | 7 | ☐ Yes | ☒ No | |
| Tributary to Jar Brook starts near Bald Hill Rd. | 8 | ☐ Yes | ☒ No | |

## D. Stormwater Management Program Summary

1. Public Education:

| BMP ID # | Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|---|
| 1A | Establish a Classroom Education Program | Conservation Commission, Water Department and Education Department | Copies of classroom curriculum. |
| 1B | Distribute Brochures and Fact Sheets to Businesses and Residents | Conservation Commission, Selectmen and Treasurer Collectors Office | Copies of materials. |

## D. Stormwater Management Program Summary (cont.)

1C
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Publish Articles on Stormwater Protection in Local Newspaper | Conservation Commission | Clippings of articles and advertisements printed in local newspaper. |

1D
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Develop Stormwater Section of Town Website | Selectman's Office, Highway Department and Town Website Manager(s) | Measure number of hits annually. |

1E
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Create a Stormwater Educational Display | Water Department | Track quantity of take home materials taken quarterly. |

2. Public Participation:

2A
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Establish a Stormwater Telephone Hotline | Conservation Commission | Record number of phone calls to hotline, copies of advertisements. |

2B
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Distribute Stormwater Education Material During Hazardous Waste Collection Day, Town Meetings and Elections | Board of Selectmen | Copies of materials. |

2C
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Conduct River and Pond Cleanups | Conservation Commission and Lake Winthrop Watershed Association | Cleaner streams as documented by before and after photographs. |

2D
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Mark Storm Drains with Markers or Stencils | Highway Department | 50 % of storm drains marked by year 5 with door hangers placed in associated neighborhoods. |

## 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 |
|---|---|---|---|
| 3A | Develop Primary Town Storm Drain System Map | Highway Department | 70 % of system mapped on GIS. |
| 3B | Complete Mapping of Stormwater Outfalls | Highway Department | All outfalls mapped by year 5. |
| 3C | Illicit Discharge Prohibition Bylaw | Planning Board and Board of Health | Bylaw in place. |
| 3D | Develop Illicit Discharge Detection and Elimination Plan and Implement Activities | Highway Department, Board of Health | All outfalls examined by year 5. Sources traced and results documented within one year of discovery. |
| 3E | Hold Annual Household Hazardous Waste Collections | Recycling Commission and Board of Selectmen | Document quantity of wastes collected annually. |
| 3F | Incorporate Information on Illicit Discharges into Public Education and Outreach Topics | Conservation Commission | Copies of materials. |
| 3G | Evaluate Stormwater Discharges to Historic Places | Conservation Commission | Final list of historic places in Holliston. Results of evaluation |
| 3H | Setup and Advertise a Hotline for Illicit Discharges | Conservation Commission | Log of complaints and actions taken. |

## D. Stormwater Management Program Summary (Cont.)

4. Construction Site Runoff Control:

| BMP ID # | Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|---|
| 4A | Develop Erosion Control Bylaw | Planning Board and Building Inspector | Bylaw at Town meeting by end of year 2. |
| 4B | Establish a Procedure for the Receipt of Information Submitted by the Public | Conservation Commission | Record number of phone calls to hotline, copies of articles. |
| 4C | Develop Guidance for Erosion Controls | Planning Board, Highway Department, Building Department, Conservation Commission and Consultant | Inspection checklist and documented inspections. |

5. Post Construction Runoff Control:

| BMP ID # | Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|---|
| 5A | Develop Stormwater Management Control Bylaw | Planning Board and Building Inspector | Bylaw at Town meeting by end of year 2. |
| 5B | Develop and Implement Inspection Program | Planning Board, Highway Department, Building Inspector, Conservation Commission and Consultant | Copies of maintenance reports received annually, plus records of inspections completed and results. |
| 5C | Develop BMP Design Standards | Planning Board, Building Inspector, and Consultant | Copy of improved bylaws as adopted. |

## D. Stormwater Management Program Summary (Cont.)

6. Municipal Good Housekeeping:

| BMP ID # | Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|---|
| 6A | Comply with DEP Policy for Vehicle Washing at All Town Owned Facilities | Police Dept., Fire Dept., Highway Department, Pine Crest Golf Course, Municipal Facilities Maintenance Dept., and Water Dept. | Copy of employee memo. |
| 6B | Ensure Compliance for Floor Drain Systems | Police Dept., Fire Dept., Highway Department, and Building Dept. | Record of modification to floor drain systems. |
| 6C | Evaluate and Implement Stormwater BMP for Police Station Parking Lot Runoff | Police Department, Highway Department, Consultant | Record of BMP construction. |
| 6D | Clean Catch Basins | Highway Department | Clean all catch basins. |
| 6E | Sweep Streets in Town | Highway Department | Sweeping schedule. Volume of sweepings collected. |
| 6F | Develop an Inspection and Maintenance Plan | Highway Department | Written schedule. Inspection checklists. Records of inspections and maintenance. |
| 6G | Continue Existing Pollution Prevention and Good Housekeeping Practices at the DPW Garage | Highway Department | Ensure existing practices are continued. |

## D. Stormwater Management Program Summary (Cont.)

6H
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Ensure Covered Storage for Salt Materials at the DPW Stockyard | Highway Department | All salt is covered. |

6I
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Prevent Stormwater Contact with Vehicle Fueling Station | Highway Department | Construction of BMP. |

6J
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Evaluate Sediment Loading to Wetland | Highway Department | Evaluation report. |

6K
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Disconnect Utility Sink at DPW Garage | Highway Department | Record of modification to sink drain. |

6L
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Document Protocols for Municipal Operations | Highway Department | Written Protocols. |

6M
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Store Absorption Materials for Large Chemical Spills at Highway Garage and Install a Spill Kit at the Fueling Station | Highway Department | Purchase records. Spill kit installed. Record of memo. |

6N
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Store Batteries Under Cover at the Recycling Facility | Highway Department | No uncovered outdoor storage of batteries. |

6O
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Store Maintenance Items Under Cover at Pine Crest Golf Course | Pine Crest Golf Course | No uncovered materials outdoors. |

## D. Stormwater Management Program Summary (Cont.)

6P
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Comply with Upcoming DEP Policy for Vehicle Washing at the Golf Course Maintenance Facility | Pine Crest Golf Course | Record of memo. |

6Q
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Prevent Sedimentation to Adjacent Waterway from Road Material Storage At Water Department Maintenance Facility | Water Department | Record of before and after photos. |

6R
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Calibrate Salt Spreading Equipment | Highway Department | Record quantity of salt purchased annually. |

6S
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Use Low Salt Applications at Designated Areas | Highway Department | Document application rate for Marshal Street compared to other roads. |

7. BMPs for Meeting TMDL:

7A
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Develop a Water Quality Strategy for 303d Waters | Highway Department, Board of Selectmen, and Consultant | Summary of existing pollution prevention efforts, future needs, and responsible parties. Copy of surface water quality strategic plan. |

7B
BMP ID #

| Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|
| Implement BMPs from Water Quality Strategy | Highway Department, Board of Selectmen, and Consultant | Photographs, logs, and BMP descriptions for completed efforts and water quality improvements. |

**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)**

W041092
Transmittal Number

Facility ID (if known)

## 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.

Paul LeBeau, Town Administrator
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

Transmittal Number W041092

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 |
| 1A | | | | | | | | | | | | | | | | | | | | | |
| 1B | | | | | | | | | | | | | | | | | | | | | |
| 1C | | | | | | | | | | | | | | | | | | | | | |
| 1D | | | | | | | | | | | | | | | | | | | | | |
| 1E | | | | | | | | | | | | | | | | | | | | | |
| 2A | | | | | | | | | | | | | | | | | | | | | |
| 2B | | | | | | | | | | | | | | | | | | | | | |
| 2C | | | | | | | | | | | | | | | | | | | | | |
| 2D | | | | | | | | | | | | | | | | | | | | | |
| 3A | Completed February 2003 | | | | | | | | | | | | | | | | | | | | |
| 3B | | | | | | | | | | | | | | | | | | | | | |
| 3C | Completed | | | | | | | | | | | | | | | | | | | | |
| 3D | | | | | | | | | | | | | | | | | | | | | |
| 3E | ongoing under existing operations | | | | | | | | | | | | | | | | | | | | |
| 3F | | | | | | | | | | | | | | | | | | | | | |
| 3G | | | | | | | | | | | | | | | | | | | | | |
| 3H | | | | | | | | | | | | | | | | | | | | | |
| 4A | | | | | | | | | | | | | | | | | | | | | |
| 4B | | | | | | | | | | | | | | | | | | | | | |
| 4C | | | | | | | | | | | | | | | | | | | | | |
| 5A | | | | | | | | | | | | | | | | | | | | | |
| 5B | | | | | | | | | | | | | | | | | | | | | |
| 5C | | | | | | | | | | | | | | | | | | | | | |
| 6A | | | | | | | | | | | | | | | | | | | | | |
| 6B | | | | | | | | | | | | | | | | | | | | | |
| 6C | | | | | | | | | | | | | | | | | | | | | |
| 6D | | | | | | | | | | | | | | | | | | | | | |
| 6E | ongoing under existing operations | | | | | | | | | | | | | | | | | | | | |
| 6F | | | | | | | | | | | | | | | | | | | | | |
| 6G | ongoing under existing operations | | | | | | | | | | | | | | | | | | | | |
| 6H | ongoing under existing operations | | | | | | | | | | | | | | | | | | | | |
| 6I | | | | | | | | | | | | | | | | | | | | | |
| 6J | | | | | | | | | | | | | | | | | | | | | |
| 6K | | | | | | | | | | | | | | | | | | | | | |
| 6L | | | | | | | | | | | | | | | | | | | | | |
| 6M | | | | | | | | | | | | | | | | | | | | | |
| 6N | | | | | | | | | | | | | | | | | | | | | |
| 6O | | | | | | | | | | | | | | | | | | | | | |

**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 W041092

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 |
| 6P | | △ | | | | | | | | | | | | | | | | | | | |
| 6Q | | ↔ | ↔ | ↔ | | | | | | | | | | | | | | | | | |
| 6R-6U | ongoing under existing operations | | | | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | → |
| 6V | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | ← | → |
| 6W | | | | | | △ | | | | △ | | | | △ | | | | △ | | | |
| 7A | | | | | | | | | | | | | | | | | ↔ | ↔ | ↔ | ↔ | → |
| 7B | | | | | | | | | | | | | | | | | | | ↔ | ↔ | → |