1043

**Hand-enter Your Transmittal Number** → **W 035460**

Your unique Transmittal Number can be accessed through DEP's web site or by calling the DEP InfoLine as listed on the last page of this document

# *Massachusetts Department of Environmental Protection*
## Transmittal Form for Permit Application and Payment

**Instructions**

1. Please type or print. A separate Transmittal Form must be completed for each permit application.

2. Your check should be made payable to the Commonwealth of Massachusetts. Please mail your check along with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.

3. Three (3) 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. Application Information

DEP Permit Code (the 7 or 8 character code from first page of permit application instructions):
BRPWM08A

Name of Permit Category:
NPDES Stormwater Gen Permit Notice of Intent for Discharges from Small MS4s

Type of Project or Activity:
Muncipal Small MS4 NPDES Phase II 5-Year Stormwater Management Plan

## B. Applicant Information (Firm or Individual)

Name of Firm:
Town of Lincoln, Massachusetts

***Or, if party needing this approval is clearly an individual:***

| Individual's Last Name: | First Name | MI |
|---|---|---|
| | | |

| Street Address | | | |
|---|---|---|---|
| 16 Lincoln Road | | | |
| City/Town: Lincoln | State: MA | Zip Code: 01773 | Telephone Number: (781) 259-2600 ext. |
| Contact: Timothy Higgins | | e-mail address (optional): higginst@lincolntown.org | |

## C. Facility, Site or Individual Requiring Approval

| Name of Facility, Site or Individual | | | DEP Facility Number (if Known) |
|---|---|---|---|
| Town of Lincoln, Massachusetts | | | |
| Street Address: 16 LIncoln Road | | | e-mail address: (optional) |
| City/Town: Lincoln | State: MA | Zip Code: 01773 | Telephone Number: (781) 259-2600 ext. |

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

| Name of Individual or Firm: | | | |
|---|---|---|---|
| Vannasse Hangen Brustlin, Inc. | | | |
| Address: 101 Walnut Street, P.O. Box 9151 | | | |
| City/Town: Watertown | State: MA | Zip Code: 02471 9151 | Telephone Number: (617) 924-1770 ext. |
| Contact: Christine Wallace, P.E. | | LSP Number (21E only) | |

## E. Permit - Project Coordination

Is this project subject to MEPA review? ☐ yes ☒ no

If yes, indicate the project's EOEA file number (assigned when an Environmental Notification Form is submitted to the MEPA unit)

EOEA # 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 Number (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 #: N/A | Dollar Amount: N/A | 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)

W035460
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 Lincoln
   Name

   16 Lincoln Road
   Mailing Address

   Lincoln — City/Town
   MA — State

   781-259-2600 — Telephone Number
   higginst@lincolntown.org — Email (if available)

2. Municipality Name

   Town of Lincoln, Massachusetts
   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:

   Massachsusetts Highway Department, Hanscom Air Force Base

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

**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)**

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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 |
|---|---|---|---|
| Beaver Pond (Name) | pending (Number) | ☐ Yes ☒ No | (Specify) |
| Cambridge Reservoir (Name) | pending (Number) | ☐ Yes ☒ No | (Specify) |
| Elm Brook (Name) | pending (Number) | ☒ Yes ☐ No | Pathogens, Turbidity (Specify) |
| Farrar Pond (Name) | pending (Number) | ☐ Yes ☒ No | (Specify) |
| Hobb's Brook (Name) | pending (Number) | ☐ Yes ☒ No | (Specify) |
| Iron Mine Brook (Name) | pending (Number) | ☐ Yes ☒ No | (Specify) |
| Sandy Pond (Name) | pending (Number) | ☐ Yes ☒ No | (Specify) |
| Stony Brook (Name) | pending (Number) | ☐ Yes ☒ No | (Specify) |
| Todd Pond (Name) | pending (Number) | ☐ Yes ☒ No | (Specify) |
| Valley Pond (Name) | pending (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) |

**Massachusetts Department of Environmental Protection**
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# BRP WM 08A NPDES Stormwater General Permit

**Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)**

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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 |
|---|---|---|---|
| 1A | Stormwater Flyer for Residents | SuAsCo & Conservation Commission | See Attached Outline |
| 1B | Lesson Plan for Fifth Graders | SuAsCo & Conservation Commission | See Attached Outline |
| 1C | Stormwater Flyer for Businesses | SuAsCo & Conservation Commission | See Attached Outline |
| 1D | Stormwater Media Campaign | SuAsCo & Conservation Commission | See Attached Outline |
| 1E | Stormwater Video | SuAsCo & Conservation Commission | See Attached Outline |
| 1F | Lincoln-Specific Stormwater Flyers | Conservation Commission | See Attached Outline |
| 1G | Coordinate w/ Business, Landscapers | Conservation Commission | See Attached Outline |
| 1H | Stormwater Flyer for Agriculture | Conservation Commission | See Attached Outline |
| 1I | /Newspaper Articles | Conservation Commission | See Attached Outline |
| 1J | Stormwater Info on Town Website | Conservation Commission | See Attached Outline |
| | | | |

BMP ID #
Specify Best Management Practice
Responsible Dept./Person Name
Specify Measurable Goal

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

2. Public Participation:

| BMP ID # | Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|---|
| 2A | Stormwater Traveling Display | SuAsCo & Conservation Commission | See Attached Outline |
| 2B | Poster Contest for Fifth Graders | SuAsCo & Conservation Commission | See Attached Outline |
| 2C | Photo Contest for High Schoolers | SuAsCo & Conservation Commission | See Attached Outline |
| 2D | Stormwater Summit Event | SuAsCo & Conservation Commission | See Attached Outline |
| 2E | Stormwater Super Summit Event | SuAsCo & Conservation Commission | See Attached Outline |
| 2F | Annual Stormwater Public Hearing | Town Administrator | See Attached Outline |
| 2G | Watershed Group Involvement | Conservation Com & Local Groups | See Attached Outline |
| 2H | Involve Local Children's Groups | Conservation Commission | See Attached Outline |
| | | | |
| | | | |
| | | | |

## 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 | Illicit Discharge Bylaw | Highway Dept. & Board of Health | See Attached Outline |
| 3B | Storm Sewer Map | Highway Dept. | See Attached Outline |
| 3C | Detection & Elimination Plan | Highway Dept. | See Attached Outline |
| 3D | Education for Public & Businesses | Conservation Commission | See Attached Outline |
| 3E | Education for Municipal Employees | Highway Dept. | See Attached Outline |

4. Construction Site Runoff Control:

| BMP ID # | Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|---|
| 4A | Construction Site Runoff Bylaw | Conservation Com & Planning Board | See Attached Outline |
| 4B | Erosion, Sediment, & Waste Controls | Conservation Com & Planning Board | See Attached Outline |
| 4C | Site Plan Review Procedures | Conservation Com & Planning Board | See Attached Outline |
| 4D | Site Inspection & Enforcement | Conservation Com & Planning Board | See Attached Outline |
| 4E | Stormwater Hotline | Conservation Com & Highway Dept. | See Attached Outline |

**Massachusetts Department of Environmental Protection**
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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 |
|---|---|---|---|
| 5A | Post-Construction Site Runoff Bylaw | Planning Board | See Attached Outline |
| 5B | Structural & Non-Structural BMPs | Planning Board | See Attached Outline |
| 5C | Long-Term Operation & Maintenance | Planning Board | See Attached Outline |
| 5D | Struct BMP Implement. Procedures | Planning Board | See Attached Outline |
| | | | |

6. Municipal Good Housekeeping:

| BMP ID # | Specify Best Management Practice | Responsible Dept./Person Name | Specify Measurable Goal |
|---|---|---|---|
| 6A | Municipal Employee Training | Highway Dept. | See Attached Outline |
| 6B | Maintenance & Inspection Procedures | Highway Dept. | See Attached Outline |
| 6C | Municipal Pollutant Source Reduction | Highway Dept. | See Attached Outline |
| 6D | Waste Disposal Procedures | Highway Dept. | See Attached Outline |
| | | | |

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W035460
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## D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

| | | |
|---|---|---|
| 7A<br>BMP ID # | | |
| Residential Education<br>Specify Best Management Practice | Conservation Commission<br>Responsible Dept./Person Name | Elm Brook a priority under Measure 1<br>Specify Measurable Goal |
| 7B<br>BMP ID # | | |
| Outfall Inspection and Testing<br>Specify Best Management Practice | Highway Department<br>Responsible Dept./Person Name | Elm Brook Area Completed by Year 2<br>Specify Measurable Goal |
| 7C<br>BMP ID # | | |
| Illicit Discharge Elimination (if found)<br>Specify Best Management Practice | Highway Department<br>Responsible Dept./Person Name | Elm Brook Area Completed by Year 2<br>Specify Measurable Goal |
| 7D<br>BMP ID # | | |
| Municipal Operations Prioritized<br>Specify Best Management Practice | Highway Department<br>Responsible Dept./Person Name | Elm Brook Area Evaluated by Year 2<br>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.

Timothy S. Higgins — Town Administrator
Printed Name

Signature — 9/11/03
Date

OCT -1 2003

**Massachusetts Department of Environmental Protection**
Bureau of Resource Protection - Watershed Management

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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 |
|---|---|---|---|
| 7A | Residential Education | Conservation Commission | Elm Brook a priority under Measure 1 |
| 7B | Outfall Inspection and Testing | Highway Department | Elm Brook Area Completed by Year 2 |
| 7C | Illicit Discharge Elimination (if found) | Highway Department | Elm Brook Area Completed by Year 2 |
| 7D | Municipal Operations Prioritized | Highway Department | Elm Brook Area Evaluated by Year 2 |
| | | | |

## 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.

Timothy S. Higgins Town Administrator
Printed Name

Signature

3/10/03
Date

FAX 781-259-1677