MAR043003 AH

Hand-enter Your Transmittal Number → W 041170
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 MS4s — Type of Project or Activity

B. Applicant Information – Firm or Individual

Massachusetts Bay Community College — Name of Firm - Or, if party needing this approval is an individual enter name below:

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

50 Oakland Street — Street Address
Wellesley — City/Town; MA — State; 02481 — Zip Code; (781) 239-2571 — Telephone # and extension
Frederick Yule — Contact Person; yulefred@mbcc.mass.edu — e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

Massachusetts Bay Community College — Name of Facility, Site or Individual; DEP Facility Number (if Known): _____; Federal I.D. Number (if Known): _____
50 Oakland Street — Street Address; e-mail address (optional): _____
Wellesley — City/Town; MA — State; 02481 — Zip Code; (781) 239-3000 — Telephone # and extension

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

Woodard & Curran, Inc. — Name of Firm Or Individual
980 Washington Street, Suite 325N — Address
Dedham — City/Town; MA — State; 02026 — Zip Code; (781) 251-0200 x2427 — Telephone # and extension
Edward W. Pickering — 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)

W 041170
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:

   Frederick Yule, Director of College Facilities
   Name

   Massachusetts Bay Community College, 50 Oakland Street
   Mailing Address

   Wellesley — City/Town
   MA — State

   (781) 239-2571 — Telephone Number
   yulefred@mbcc.mass.edu — Email (if available)

2. Municipality Name

   Massachusetts Bay Community College (Massachusetts Board of Higher Education)
   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:

   NA

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
intermittent stream to Academy Brook	Unknown (Number)	☐ Yes ☒ No	None (Specify)
intermittent stream to Longfellow Pond	Unknown (Number)	☐ Yes ☒ No	None (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)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)
(Name)	(Number)	☐ Yes ☐ No	(Specify)

D. Stormwater Management Program Summary

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1.1	Public Education Materials	Facilities Department/F. Yule	Distribute brochure
1.2	Training Program	Facilities Department/F. Yule	Present at 2 training sessions
1.3	Stormwater Web Page	Facilities Department/F. Yule	Develop Web Page
1.4	Storm Drain Stenciling Program	Facilities Department/F. Yule	Develop & implement program

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2.1	"Green Campus" Program	Facilities Department/F. Yule	Develop & implement program
2.2	Partner with Wellesley	Facilities Department/F. Yule	Form partnership
2.3	Partner with Watershed Group	Facilities Department/F. Yule	Form partnership
2.4	Call Center/Suggestion Box	Facilities Department/F. Yule	Set up designated line or rop box and inform public

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	Storm Drain Map	Facilities Department/F. Yule	Complete facility map
3.2	Stormwater Policy	Facilities Department/F. Yule	Develop & implement policy
3.3	Illicit Discharge Detection	Facilities Department/F. Yule	Develop & implement policy
3.4	Illicit Discharge Elimination	Facilities Department/F. Yule	Correct illicit discharges detected by BMP 3.3
3.5	Education Program	Facilities Department/F. Yule	Develop & distribute fliers

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4.1	Regulatory Controls	Facilities Department/F. Yule	Develop erosion & sediment control contract specifications
4.2	Review & Site Inspection Procedures	Facilities Department/F. Yule	Develop and implement site inspection guidelines
4.3	Enforcement Procedures	Facilities Department/F. Yule	Develop sanctions for violators
4.4	Procedures for Handling Public Comment	Facilities Department/F. Yule	Develop & implement procedure for public comment

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	Structural Stormwater Controls	Facilities Department/F. Yule	Develop contract specifications for structural controls
5.2	Stormwater Policy	Facilities Department/F. Yule	Develop & Implement Policy
5.3	Planning Strategies	Facilities Department/F. Yule	Update planning criteria

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6.1	Employee Training Program	Facilities Department/F. Yule	Maintain employee training program
6.2	Recycling Program	Facilities Department/F. Yule	Monitor and maintain recycling program
6.3	Catch Basin Cleaning Program	Facilities Department/F. Yule	Track cleaning quantities
6.4	Street Sweeping Program	Facilities Department/F. Yule	Track sweeping quantities

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.

Frederick Yule, Director of College Facilities - Massachusetts Bay Community College
Printed Name

Signature

7/29/03
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. MassBay Stormwater Management Program TIME FRAMES

Transmittal Number W 041170

Facility ID (if known)

Page 1 of 1

	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					■	■	■						■								
1.2			■	■	■				■			■	■			■	■			■	
1.3								■	■												
1.4		■	■						■		■								■		
2.1					■				■				■				■				
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3.1	■	■	■	■	■																
3.2				■	■	■			■	■							■				
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6.3						■				■											
6.4					■				■				■				■				

■ Represents MassBay's measurable goals and target dates

Represents policy implementation and potential corrective or enforcement actions