Hand-enter Your Transmittal Number → W W040791 1212
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

NPDES General Permit
Name of Permit Category

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

B. Applicant Information – Firm or Individual

Newbury Highway Department
Name of Firm - Or, if party needing this approval is an individual enter name below:

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

197 High Road
Street Address

Newbury | MA | 01951 | 978-265-5097
City/Town | State | Zip Code | Telephone # and extension

Mr. Timothy Leonard
Contact Person

e-mail address (optional)

C. Facility, Site or Individual Requiring Approval

Town of Newbury
Name of Facility, Site or Individual

DEP Facility Number (if Known) | Federal I.D. Number (if Known)

25 High Road
Street Address

e-mail address (optional)

Newbury | MA | 01951
City/Town | State | Zip Code

Telephone # and extension

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

CDM
Name of Firm Or Individual

One Cambridge Place, 50 Hampshire Street
Address

Cambridge | MA | 02139 | 617-452-6306
City/Town | State | Zip Code | Telephone # and extension

Alan D. Roscoe
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

W040791
Transmittal Number

BRP WM 08A NPDES Stormwater General Permit

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

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:

   Mr. Timothy Leonard, Highway Department Superintendent
   Name

   197 High Road
   Mailing Address

   Newbury — City/Town
   MA — State

   978-265-5097 — Telephone Number
   Email (if available)

2. Municipality Name

   Town of Newbury
   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

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.)

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
Merrimack River (Name)	unknown (Number)	☒ Yes ☐ No	Priority Organics, pathogens (Specify)
Plum Island River (Name)	unknown (Number)	☒ Yes ☐ No	pathogens (Specify)
Little River (Name)	unknown (Number)	☒ Yes ☐ No	pathogens (Specify)
The Basin in Merrimack River Estuary (Name)	unknown (Number)	☒ Yes ☐ No	pathogens (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

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)

W040791
Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1-1	Prepare Newsletter/brochure	Highway Department and/or Conservation Commission	Newsletter/brochure distributed to all households
1-2	Dog Owner Education	Town Clerk	Pet waste fact sheets distributed to dog owners
1-3	Stormwater Education Program for Schoolchildren	Stormwater Coordinator	Inquire about presentation to Middle and/or Elementary School children on stormwater issues
1-4	Dog Waste Cleanup signs	Highway Department	Signs are posted on Plum Island and in Parks
1-5	Annual Update of Stormwater Management Plan	Conservation Commission	Update of the SWMP at a Board of Selectmen's meeting

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2-1	Form Stormwater Advisory Committee	Conservation Commission	Promote Environmental Awareness, implement Stormwater Management Plan
2-2	Compliance with Public Meeting Law	Conservation Commission	Post Notices in Town Hall, Public Library and newspapers
2-3	Catch Basin Stenciling	Highway Department	Identify high priority locations and stencil "Don't Dump" message

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	Dry-weather Outfall Screening	Highway Department	All outfalls screened during permit term
3-2	Map Outfalls and receiving waters	Highway Department	Identify outfalls and create map
3-3	Investigate Need for GIS Mapping	Highway Department	Evaluate need for electronic map of stormwater system
3-4	Develop Plan to Remove Non-Stormwater Discharges	Highway Department	Document illicit connections found and removed
3-5	Develop By-Law for sewer inspection prior to occupancy	Building Department	Draft By-Law and present to Town Meeting

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4-1	Develop Erosion Control By-Law	Conservation Commission	Draft By-Law and present to Town Meeting
4-2	Waste Management Plan	Conservation Commission	Draft By-Law and present to Town Meeting
4-3	Site Plan review	Planning Board	Continue Site Plan Review procedures
4-4	Consideration of public input	Planning Board	Number of Public Hearings
4-5	Inspection of Erosion and Sediment Controls	Building Inspector and/or Conservation Commission	Number of Inspections

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	Develop By-Law to include standards 2, 3, 4, 7, and 9 of Massachusetts Stormwater Policy	Conservation Commission	Draft By-Law and present to Town Meeting
5-2	Specify BMP Manual	Conservation Commission	BMP Manual Selected
5-3	Develop By-Law for long-term maintenance of private BMPs	Conservation Commission	Draft By-Law and present to Town Meeting

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-1	Identify Sensitive Receptors (i.e. wetlands, beaches, etc.)	Conservation Commission	List of Sensitive Receptors developed, staff notified
6-2	Street Sweeping	Highway Department	All streets swept annually in the spring of each year
6-3	Sidewalk Sweeping	Highway Department	All sidewalks swept annually in the spring of each year
6-4	Roadway De-icing	Highway Department	Maintain documentation of amount of deicer use
6-5	Minimize Impacts from Vehicle Washing	Highway Department	Evaluate need for containment area for vehicle washing, use biodegradeable soaps
6-6	Minimize Impacts from Vehicle Maintenance	Highway Department	Employee training, materials inventory developed

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)

W040791
Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary (Cont.)

6-7
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Storm drain maintenance	Highway Department	All Catch basins cleaned at least once every 3 years

6-8
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Park and Landscape Maintenance	Highway Department	Employee training, materials inventory developed

6-9
BMP ID #

Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Control Illegal Dumping	Highway Department	Number of signs posted, Number of cleanups supported

7. BMPs for Meeting TMDL: N/A (No TMDLs have been developed)

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.

Richard Joy, Board of Selectmen Chmn.
Printed Name

Richard Joy
Signature

7/23/03
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. Newbury Storm Water Management Program TIME FRAMES

Transmittal Number W040791
Facility ID (if known)

	PERMIT YEAR			PERMIT YEAR TWO				PERMIT YEAR THREE				PERMIT YEAR FOUR				PERMIT YEAR FIVE			
BMP ID #	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
1-1				X				X				X				X			
1-2				X				X				X				X			
1-3	Inquire about presentation			If approved, commence			X				X				X				X
1-4	Signs Posted			Inspect & Maintain throughout permit term															
1-5		X				X				X				X				X	
2-1				X		X		X		X		X		X		X		X	
2-2																			
2-3	Identify High Priority Basins			Stencil Basins throughout permit term															
3-1	Identify			Screen Annually		X				X				X				X	
3-2				Completed															
3-3																			
3-4				Develop Plan by end of permit year two				Implement throughout remainder of permit term											
3-5				Completed															
4-1								Done if passed by Town Meeting											
4-2								Done if passed by Town Meeting											
4-3	Completed																		
4-4								Done if passed by Town Meeting											
4-5								Done if passed by Town Meeting											
5-1								Done if passed by Town Meeting											
5-2								Done if passed by Town Meeting											
5-3								Done if passed by Town Meeting											
6-1				Completed															
6-2																			
6-3																			
6-4																			
6-5																			
6-6																			
6-7																			
6-8																			
6-9					X				X				X				X		