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DEPARTMENT OF THE AIR FORCE
102D FIGHTER WING (ACC)
MASSACHUSETTS AIR NATIONAL GUARD
OTIS AIR NATIONAL GUARD BASE MASSACHUSETTS

19 June 2003

102FW/EMO
197 Granville Avenue; Box 46
Otis ANG Base, MA 02542-1330

Liz MASCia
508/968-4327
508-968-4844

US Environmental Protection Agency
Region 1
Municipal Assistance Unit (CMU)
One Congress Street – Suite 1100
Boston, MA 02114-2023

JUN 23 2003

MA Department of Environmental Protection
Division of Watershed Management
627 Main Street
Worcester, MA 01608

SUBJECT: Notice of Intent Phase II NPDES Program

In accordance with the requirements of the Phase II portion of the National Pollutant Discharge Elimination System program, this letter serves as a Notice of Intent for the 102nd Fighter Wing (102FW) of the Massachusetts Air National Guard seeking coverage under the aforementioned program. The pertinent information is presented as follows:

Person Responsible for Program Coordination
LtCol Christopher Faux
ANG/102FW
Environmental Management Office
197 Granville Ave, Box 46
Otis ANG Base, MA 02542-1330

The legal status of the MS4 operator is a federal facility. There are three outfalls emanating from the facility operated by the 102FW. There are two receiving waterbodies, Ashumet Pond and John's Pond. Based upon storm water control devices already in place, it is expected that only two of the three outfalls would actually discharge from the facility and reach John's Pond. There are no expected discharges to Ashumet Pond.

In accordance with Addendums A and B of the general permit, the following is a certification of the eligibility criteria for listed species and critical habitat and protection of historic properties. The facility operated by the 102FW meets Criterion A under the Endangered Species Act, there are no endangered or threatened species or critical habitat in proximity to the MS4 or the points where authorized discharges reach the receiving waters. The facility operated by the 102FW does not have the potential to affect a property that is either listed or eligible for listing on the National Register of Historic Places.

Attached to this Notice of Intent are the Best Management Practices (BMPs) outlined for each of the six minimum control measures. The attached documents outline the BMPs for each measure and also identify the measureable goals and implementation timeframe for each BMP.

Per the requirements of the MADEP, the application fee of $80.00 is being submitted concurrently. For any questions or further clarification please contact the undersigned at 508/313-0577.

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.

CHRISTOPHER M. FAUX, LtCol, MA ANG
Environmental Manager

Attachments

cc:
102FW/CC
102FW-SPTG/CC
102FW-CES/CC
102FW/PA
102FW/EMO
HQMAANG/JA (Mullen)

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)

W039880
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:

   Air National Guard, 102nd Fighter Wing
   Name

   197 Granville Ave, Box 46
   Mailing Address

   Otis ANG Base — City/Town
   MA 02542-1330 — State

   508/313-0577 — Telephone Number
   christopher.faux@maotis.ang.af.mil — Email (if available)

2. Municipality Name

   Otis ANG Base
   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

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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
Ashumet Pond (Name)	1 (Number)	☒ Yes ☐ No	metals (Specify)
John's Pond (Name)	2 (Number)	☒ Yes ☐ No	metals (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)

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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	Trash Management	Environmental Mgmt Office	list of areas inspected/cleaned
1B	Stormwater Education	Environmental Mgmt Office	list of documents distributed
1C	Pollution Prevention	Environmental Mgmt Office	list of documents distributed
1D	Education/Outreach	Environmental Mgmt Office	list of documents distributed

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2A	Attitude Surveys	Environmental Mgmt Office	analysis of results
2B	Storm Drain Stenciling	Environmental Mgmt Office	list drains stenciled

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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	ID/Elimination	Environmental Mgmt Office	list of areas inspected
3B	Sanitary Sewer Overflows	Environmental Mgmt Office	list of inspections/repair
3C	ID Illicit Connections	Environmental Mgmt Office	distribute ordinance

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4A	Good Housekeeping	Environmental Mgmt Office	document trained personnel
4B	Runoff Control	Environmental Mgmt Office	list inspections/maintenance
4C	Erosion Control	Environmental Mgmt Office	list inspections/maintenance
4D	Sediment Control	Environmental Mgmt Office	list inspections/maintenance

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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	Ordinance for Control	Environmental Mgmt Office	track reduction of cover
5B	BMP Inspection	Environmental Mgmt Office	analyze BMP effectiveness
5C	Catch Basin	Environmental Mgmt Office	list of evaluation/upgrade

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6A	Illegal Dumping Control	Environmental Mgmt Office	list articles created/distributed
6B	Roadway Maintenance	Environmental Mgmt Office	list of employees trained in P2
6C	Good Housekeeping	Environmental Mgmt Office	document spills and training
6D	Parking Lot/Street Cleaning	Environmental Mgmt Office	instruction manual/schedule
6E	Auto Maintenance	Environmental Mgmt Office	educational statement

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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	Laboratory Analysis	Environmental Mgmt Office	list results/data analysis
7B	Dry Weather Monitoring	Environmental Mgmt Office	list of results

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.

LtCol Christopher M. Faux
Printed Name

Signature

19 June 2003
Date

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

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F. Storm Water Management Program TIME FRAMES

Transmittal Number W039880

Facility ID (if known)

BMP ID #	PERMIT YEAR ONE				PERMIT YEAR TWO				PERMIT YEAR THREE				PERMIT YEAR FOUR				PERMIT YEAR FIVE				Next Permit
	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	
1A																					
1B																					
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