



1109

**BRP WM 08A NPDES Stormwater General Permit**  
**Notice of Intent for Discharges from Small Municipal Separate**  
**Storm Sewer Systems (MS4s)**

**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:

Somerset Highway Department

Name

1263 Brayton Point Road

Mailing Address

Somerset

City/Town

MA

State

508-646-2836

Telephone Number

Email (if available)

2. Municipality Name

Town of Somerset

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:

MassHighway (Interstate Route 195, State Routes 6, 103, and 138)

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**





**Massachusetts Department of Environmental Protection**  
 Bureau of Resource Protection - Watershed Management  
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W035563

Transmittal Number

Facility ID (if known)

**D. Stormwater Management Program Summary**

1. Public Education:

1a BMP ID # Air stormwater message on local cable channel	Conservation Commission Responsible Dept./Person Name	Air one new message for two weeks quarterly
1b BMP ID # Add stormwater information to Town's website	Administration Responsible Dept./Person Name	Complete update by the end of the second permit year
1c BMP ID # Distribute/post non-point source pollution posters	Conservation Commission Responsible Dept./Person Name	Post in all schools and town-owned buildings
1d BMP ID # Inform residents of Town's recycling programs/schedules	Administration Responsible Dept./Person Name	Distribute info. to all residents by website, cable channel, etc.
1e BMP ID # Present stormwater information to local groups	Conservation Commission Responsible Dept./Person Name	Make presentations to Garden Club, schools, etc.

2. Public Participation:

2a BMP ID # Collect household hazardous waste from residents	Fire Dept./Highway Dept. Responsible Dept./Person Name	Hold household haz. waste collection day once per month
2b BMP ID # Collect & recycle waste oil Specify Best Management Practice	Fire Dept./Highway Dept. Responsible Dept./Person Name	Encourage residents to dispose waste oil
2c BMP ID # Implement an annual volun. waterways clean-up day	Conservation Commission Responsible Dept./Person Name	Hold waterways clean-up day once per year
2d BMP ID # Develop storm drain stenciling program	Highway Department Responsible Dept./Person Name	Stencil 20% of catch basins each year
2e BMP ID # Make SWMP available for public review/comment	Administration Responsible Dept./Person Name	Post SWMP on Town website, in library, in High. Dept. office



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

3. Illicit Discharge Detection and Elimination:

3a BMP ID # Map outfalls, receiving waters, and storm drain system	Highway Department Responsible Dept./Person Name	Complete mapping by end of fifth permit year
3b BMP ID # Develop illicit discharge detection & elimination plans	Conservation Commission Responsible Dept./Person Name	Make recommendations for proposed plan
3c BMP ID # Review existing bylaws and regulations	Administration Responsible Dept./Person Name	Determine whether existing bylaws/regs are adequate
3d BMP ID # Develop/modify general illicit discharge bylaw	Admin./ Highway Dept./ ConCom	If necessary, propose recommen. for bylaw updates
3e BMP ID # Present bylaw for Town meeting action	Administration Responsible Dept./Person Name	Make presentations for Town meeting action, if necessary

4. Construction Site Runoff Control:

4a BMP ID # Review existing bylaws and regulations	Administration Responsible Dept./Person Name	Determine whether existing bylaws/regs are adequate
4b BMP ID # Develop/modify bylaws for construction site runoff	Admin./ConCom Responsible Dept./Person Name	If necessary, propose recommen. for bylaw updates
4c BMP ID # Present bylaw for Town meeting action	Administration Responsible Dept./Person Name	Make presentations for Town meeting action, if necessary
4d BMP ID # Review existing site inspection practices	Highway Department Responsible Dept./Person Name	Determine whether existing practices are adequate
4e BMP ID # Develop modify site inspection practices	Highway Department Responsible Dept./Person Name	If necessary, make recommen. for updating existing practices



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

5. Post Construction Runoff Control:

<u>5a</u> BMP ID #	<u>Admin./ConCom</u> Responsible Dept./Person Name	<u>Determine whether existing bylaws/regs are adequate</u>
<u>Review existing bylaws and regulations</u>		
<u>5b</u> BMP ID #	<u>Admin./ Highway Dept./ ConCom</u>	<u>If necessary, propose recommen. for bylaw updates</u>
<u>Develop/modify bylaws for post-construction runoff</u>		
<u>5c</u> BMP ID #	<u>Administration</u> Responsible Dept./Person Name	<u>Make presentations for Town meeting action, if necessary</u>
<u>Present bylaw for Town meeting action</u>		
<u>5d</u> BMP ID #	<u>Highway Department</u> Responsible Dept./Person Name	<u>Determine whether existing practices are adequate</u>
<u>Review existing site inspection practices</u>		
<u>5e</u> BMP ID #	<u>Highway Department</u> Responsible Dept./Person Name	<u>If necessary, make recommen. for updating existing practices</u>
<u>Develop/modify site inspection practices</u>		

6. Municipal Good Housekeeping:

<u>6a</u> BMP ID #	<u>Highway Department</u> Responsible Dept./Person Name	<u>Sweep all streets once per year; Lee/Taunt. Rivers 2/yr.</u>
<u>Sweep Streets</u> Specify Best Management Practice		
<u>6b</u> BMP ID #	<u>Highway Department</u> Responsible Dept./Person Name	<u>Develop &amp; implement cleaning sched.; Lee/Taunt. Rivers 1/yr.</u>
<u>Clean catch basins</u> Specify Best Management Practice		
<u>6c</u> BMP ID #	<u>Highway Department</u> Responsible Dept./Person Name	<u>Target all applicable municipal facilities</u>
<u>Train municipal employees at each facility</u>		
<u>6d</u> BMP ID #	<u>Highway Department</u> Responsible Dept./Person Name	<u>Target all applicable municipal facilities</u>
<u>Perform follow-ups to ensure required practices are met</u>		
<u>6e</u> BMP ID #	<u>Highway Department</u> Responsible Dept./Person Name	<u>Finalize and implement plan</u> <u>Specify Measurable Goal</u>
<u>Develop SPCC plan for Highway Department</u>		
<u>BMP ID #</u>	<u>Specify Best Management Practice</u>	



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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

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

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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.

John McAuliffe

Printed Name

Signature

Date

7/28/03

