MA R041070 AH

Hand-enter Your Transmittal Number → **W 035571**

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 General Permit
Type of Project or Activity: Notice of Intent for Discharges from Small Municipal MS4s

B. Applicant Information (Firm or Individual)

Name of Firm: Town of Weymouth

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

Individual's Last Name:	First Name	MI
Madden	David	M

Street Address: 120 Winter Street			
City/Town: Weymouth	State: MA	Zip Code: 02188	Telephone Number: (781) 337-5100 ext.
Contact: Andrew P. Fontaine, P.E.		e-mail address (optional): cfontaine@weymouth.ma.us	

C. Facility, Site or Individual Requiring Approval

Name of Facility, Site or Individual: Department of Public Works		DEP Facility Number (if Known)	
Street Address: 120 Winter Street		e-mail address: (optional)	
City/Town: Weymouth	State: MA	Zip Code: 02188	Telephone Number: (781) 337-5100 ext. 318

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

Name of Individual or Firm: BETA Group, Inc.			
Address: 315 Norwood Park South			
City/Town: Norwood	State: MA	Zip Code: 02062	Telephone Number: (781) 255-1982 ext.
Contact: Sean Scully		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

JUL 31 2009 MUNICIPAL ASSISTANCE UNIT

Check #:	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

rev: 03/21/00

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

W035571
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:

   Town of Weymouth
   Name

   120 Winter Street
   Mailing Address

   Weymouth — City/Town
   MA — State

   (781) 337-5100 — Telephone Number
   Email (if available)

2. Municipality Name

   Town of Weymouth
   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:

   _____

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
Weymouth Back River (South)	20 (Number)	☒ Yes ☐ No	Pathogens (Specify)
Weymouth Back River (North)	23 (Number)	☒ Yes ☐ No	Organic Enrichment/Low DO, Pathogens
Weymouth Fore River (Name)	75 (Number)	☒ Yes ☐ No	Pathogens (Specify)
Mill River (Name)	47 (Number)	☒ Yes ☐ No	Nutrients, Pathogens, Noxious Aquatic Plants
Old Swamp River (Name)	71 (Number)	☒ Yes ☐ No	Pathogens, Cause Unknown (Specify)
Whitman's Pond (Name)	47 (Number)	☐ Yes ☒ No	(Specify)
Plymouth River (Name)	25 (Number)	☐ Yes ☒ No	(Specify)
Great Pond (Name)	3 (Number)	☐ Yes ☒ No	(Specify)
Whorttleberry Pond (Name)	4 (Number)	☐ Yes ☒ No	(Specify)
Cranberry Pond (Name)	2 (Number)	☐ Yes ☒ No	(Specify)
Elias Pond (Name)	8 (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	Classroom Education	School Department	Introduce SW Management Issues in Env. Sci. Classes
1-2	Flyer and Brochure Distribution	Department of Public Works	Educational Material, Storm Water Fact Sheets, Flyers
1-3	Using the Media	Department of Public Works	Annual Press Release, Article, Pub. Service Announcement
1-4	Hazardous Waste Management	Department of Public Works	Track Collected Waste, Flyers

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
2-1	Adopt-A-Stream/Drain Program	Department of Public Works	All Water Bodies Adopted, Track Amount Trash Removed
2-2	Pond & Stream Cleanup & Monitoring	Department of Public Works	Track Cleanup Activities, Participants and Waste
2-3	Stencil Storm Drains	Department of Public Works	Stencil 300 or More Drains Per Year.
2-5	Community Hotline/Weblink	Department of Public Works	Establish Hotline/Link, Track # of Calls & Remedied Problems
2-8	Pet Waste Collection	Town Council	Create & Enforce Ordinance, Track # Signs Posted

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	Inspect & Sample Town Discharges	Department of Public Works	Continue Program to Locate, Insp., Sample,Test Discharges
3-2	System Mapping Development	Department of Public Works	Complete System Map, Add Soils, Land Use Maps
3-3	Illegal Dumping Education	Department of Public Works	Flyers, Track # of Illegal Dumps Reported & Penalties
3-4	Septic System Controls	Board of Health	Track #, Location & Inspection of Septic Systems

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
4-1	Ordinance Review & Update	Town Council, Planning	Develop Erosion & Sediment Control Ordinance
4-2	Construction Inspection	Department of Public Works, Building Department	Track Inadequate Sites/Plans & # of Non-Complaint Permits

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	Regulations for Post Construction Runoff	Town Council/Department of Public Works	Develop Storm Drain Regs. & Construction Details & Policies
5-2	BMP Inspection & Maintenance	Department of Public Works	Inspect Structural BMPs Once /yr, Document # of Problems

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6-1	Catch Basin Cleaning Program	Department of Public Works	Develop Program, Collect Data, Refine Program
6-2	Street Cleaning	Department of Public Works	Sweep All Roads Annually, Track Lbs. of Debris
6-3	Pipe Inspections	Department of Public Works	Inspect Drain Lines on As-Needed Basis
6-4	Pipe Cleaning	Department of Public Works	Clean, Flush Drain Lines on As-Needed Basis
6-5	New Pipe & Structural Installations	Department of Public Works	Replace Drainage Pipe & Catch Basins as needed.

D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting TMDL:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	
1-1	Flyer & Brochure Distribution	Department of Public Works	Educational Material, Storm Water Fact Sheets, Flyers
2-2	Pond & Stream Cleanup & Monitoring	Department of Public Works	Track Cleanup Activities, Participants and Waste
2-3	Stencil Storm Drains	Department of Public Works	Stencil 300 or More Drains Per Year.
3-1	Inspect & Sample Town Discharges	Department of Public Works	Locate, Inspect, Sample & Test All Discharges
3-3	Illegal Dumping Education	Department of Public Works	Flyers, Track # of Illegal Dumps Reported & Penalties

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.

David M. Madden, Mayor
Printed Name

Jane Hackett
Signature

7/29/03
Date

Signed by Jane Hackett, Chief of Staff, per Weymouth Charter

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. Storm Water Management Program TIME FRAMES

Transmittal Number W 035571

Facility ID (if known)

	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							X				X				X				X		
1-2				X				X				X				X				X	
1-3																					
1-4																					
2-1																					
2-2																					
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