NOTICE OF INTENT

For Coverage Under the NPDES General Permit for Storm Water Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

NEW HAMPSHIRE DEPARTMENT OF Environmental Services

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 NPDES General Permit issued by EPA for storm water 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 of the information required on this Notice of Intent form and the separate Storm Water Management Program (SWMP) Implementation Schedule form (Excel Spreadsheet), must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a storm water management program.**

B. Applicant Information

1. Small MS4 Operator/Owner Information:

   David Sullivan, Town of Windham, New Hampshire
   Name

   3 North Lowell Road
   Mailing Address

   Windham — City/Town
   NH — State

   (603) 432-7732 — Telephone Number
   Dsullivan@town.windham.nh.us — Email (if available)

2. Municipality Name

   Town of Windham, New Hampshire
   City/Town

3. Legal Status:

   ☐ Federal ☒ City/Town ☐ State ☐ County ☐ Private

   ☐ Other public entity: _____ Specify Public Entity

4. Other regulated MS4(s) within municipal boundaries:

   New Hampshire Department of Transportation State Routes

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

AUG 04 2003
MUNICIPAL ASSISTANCE UNIT

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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

(Note: to be confirmed during first permit term)

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
Canobie Lake (Name)	unknown (Number)	☒ Yes ☐ No	Excess Algal Growth (Specify)
Beaver Brook (Name)	unknown (Number)	☐ Yes ☒ No	(Specify)
Rock Pond (Name)	unknown (Number)	☐ Yes ☒ No	(Specify)
Golden Pond (Name)	unknown (Number)	☐ Yes ☒ No	(Specify)
Simpson Pond (Name)	unknown (Number)	☐ Yes ☒ No	(Specify)
Shadow Lake (Name)	unknown (Number)	☐ Yes ☒ No	(Specify)
Cobbett's Pond (Name)	unknown (Number)	☐ Yes ☒ No	(Specify)
Golden Brook (Name)	unknown (Number)	☐ Yes ☒ No	(Specify)
Others, not verified (Name)	unknown (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. Storm Water Management Program Summary

1. Public Education:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
7	Document and Continue Existing Programs	Planning & Dev./Al Turner	Written Summary of Existing Programs
8	Coordinate Public Educators	David Poulson	Minutes of Task Force Events
9	Coord. Information & Program Distribution within School Network	Fire Department/Don Messier	Contact 90% of Grade 1-12 Schools in MS4

2. Public Participation:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
10	Create Task Committee	David Sullivan	Task Committee Established/Minutes of Meetings
11	Conduct Public Meeting/Acquire Public Input	David Sullivan	Prepare Meeting Minutes
12	Establish Storm Water Information Display	David Poulson	Attend One Event/Year
13	Storm Drain Stenciling/Community Clean-Up Day	Highway Department	50% of All Storm Drains Stenciled/Community Clean-Up Day Held

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NEW HAMPSHIRE DEPARTMENT OF Environmental Services

D. Storm Water Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
14	Map Outfalls & Receiving Waters	Planning and Development	Prepare Map Showing Outfalls & Receiving Waters
15	Evaluate Need for Storm Sewer Ordinance; Develop if Necessary	Task Force	Document Need or Prepare and Ordinance
16	Train Volunteers in Illicit Discharge Identification	David Poulson	Create Procedures for Identifying Illicit Discharges
17	Dry Weather Screening of Outfalls	Highway Department	Prepare List of Outfalls requiring Follow-up
18	Develop System of Identifying Illicit Discharges & Initiate Program to Eliminate Them	David Poulson	Prepare Plan & Document Progress of Elimination
19	Identify Magnitude of Effort to Continue Mapping Storm Sewer System	Planning & Development	Prepare Assessment of Effort

4. Construction Site Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
20 (ordinances)	Document Existing Programs & Expand Them as Required	Planning & Development	Prepare Written Summary of Existing Program & Include Revisions as Necessary

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D. Storm Water Management Program Summary (Cont.)

5. Post Construction Runoff Control:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
21 ordinance	Document & Enhance Procedures for MS4 Storm Sewer System	Planning & Development	Complete Procedure Manual
22	Incorporate Best Management Practices into Town Master Plan	David Poulson	Complete Master Plan Update

6. Municipal Good Housekeeping:

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
23	Document & Enhance Employee Training Procedures	Don Messier/David Poulson	Complete Training Manual
2418	Evaluate Use of Pesticides, Sand and Salt	Jack McCartney/Al Barlow	Complete Procedures for Storing, Use and Maintenance

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D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting Requirements of Part I.C. (Discharges to Water Quality Impaired Waters) and Part I.D. (Total Maximum Daily Load Allocations):

BMP ID #	Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
1	Locate Canobie Lake Outfall Locations	Planning and Development	Produce a Map showing Canobie Lake Outfalls
2	Set up Testing Program, Including Timing and Parameters	Task Force	Produce a program and schedule
3	Perform Canobie Lake Outfall Testing	Planning and Development	Tabulate Data
4	Update Canobie Lake Educational Program	Task Force	Flyers created and distributed
5	Review NHDES Report	David Poulson	To Be Determined
6	Coordinate BMP's with Canobie Lake Report	Task Force	To Be Determined

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 Sullivan
Printed Name

Signature

7/29/03
Date

SWMP Summary
SCHEDULE

NPDES No. NHR04_ _ _ _

Name:Town of Windham
Date: July 29, 2003

	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	New Permit
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2				—																	
3					X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
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