



TOWN OF RYE
DEPARTMENT OF PUBLIC WORKS
10 Central Road
Rye, N.H. 03870-2522
603-964-5300 • Fax 603-964-9708

September 25, 2018

U. S. Environmental Protection Agency – Region 1
5 Post Office Square – Suite 100
Mail Code - OEP06-01
Boston, MA 02109-3912

Attention: Thelma Murphy

Re: NPDES Phase III Small MS4
General Permit NHR041030
Notice of Intent
Rye, New Hampshire

Dear Ms. Murphy:

Enclosed please find the Town of Rye's Notice of Intent (NOI) for its Phase III, MS4 General Permit No. NHR041030.

I have also forwarded an electronic copy to the recommended e-mail address of stormwater.reports@epa.gov.

Should you have any questions or comments pertaining to this matter please do not hesitate to contact me.

Sincerely:
TOWN OF RYE, NH

Dennis G. McCarthy
Public Works Director

Cc: Michael Magnant, Town Administrator

Notice of Intent (NOI) for coverage under Small MS4 General Permit Page 1 of 21

Part I: General Conditions

General Information

Name of Municipality or Organization: TOWN OF RYE

State: NH

EPA NPDES Permit Number (if applicable): NHR041030

Primary MS4 Program Manager Contact Information

Name: DENNIS G. MCCARTHY

Title: PUBLIC WORKS DIRECTOR

Street Address Line 1: 10 CENTRAL ROAD

Street Address Line 2:

City: RYE

State: NH

Zip Code: 03870

Email: dmccarthy@town.rye.nh.us

Phone Number: (603) 964-5300

Fax Number: (603) 964-9708

Other Information

Stormwater Management Program (SWMP) Location
(web address or physical location, if already completed): Located at the Town Hall address above.

Eligibility Determination

Endangered Species Act (ESA) Determination Complete? Yes

Eligibility Criteria
(check all that apply): ☒ A ☐ B ☐ C

National Historic Preservation Act (NHPA) Determination Complete? Yes

Eligibility Criteria
(check all that apply): ☒ A ☐ B ☐ C ☐ D

☒ Check the box if your municipality or organization was covered under the 2003 MS4 General Permit

MS4 Infrastructure (if covered under the 2003 permit)

Estimated Percent of Outfall Map Complete?
(Part II, III, IV or V, Subpart B.3.(a.) of 2003 permit)

90%

If 100% of 2003 requirements not met, enter an
estimated date of completion (MM/DD/YY):

01/01/23

Web address where MS4 map is published:

If outfall map is unavailable on the internet an electronic
or paper copy of the outfall map must be included with
NOI submission (see section V for submission options)

<http://www.caigisonline.com/RyeNH/Default.aspx?Splash=True>

Regulatory Authorities (if covered under the 2003 permit)

Illicit Discharge Detection and Elimination (IDDE) Authority Adopted?
(Part II, III, IV or V, Subpart B.3.(b.) of 2003 permit)

Yes

Effective Date or Estimated
Date of Adoption (MM/DD/YY):

10/20/09

Construction/Erosion and Sediment Control (ESC) Authority Adopted?
(Part II, III, IV or V, Subpart B.4.(a.) of 2003 permit)

Yes

Effective Date or Estimated
Date of Adoption (MM/DD/YY):

09/20/05

Post-Construction Stormwater Management Adopted?
(Part II, III, IV or V, Subpart B.5.(a.) of 2003 permit)

Yes

Effective Date or Estimated
Date of Adoption (MM/DD/YY):

10/20/09

Notice of Intent (NOI) for coverage under Small MS4 General Permit

Part II: Summary of Receiving Waters

Please list the waterbody segments to which your MS4 discharges. For each waterbody segment, please report the number of outfalls discharging into it and, if applicable, any impairments.

New Hampshire list of impaired waters: <http://des.nh.gov/organization/divisions/water/wmb/swqa/>

Check off relevant pollutants for discharges to impaired waterbodies (see above 303(d) lists) without an approved TMDL in accordance with part 2.2.2 of the permit. List any other pollutants in the last column, if applicable.

Waterbody segment that receives flow from the MS4	Number of outfalls into receiving water segment	Chloride	Chlorophyll-a	Dissolved Oxygen/DO Saturation	Nitrogen	Oil & Grease/PAH	Phosphorus	Solids/TSS/Turbidity	E. coli	Enterococcus	Other pollutant(s) causing impairments
NHEST600031001-04, LOWER SAGAMORE CREEK	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, ESTUARINE BIOASSESSMENTS, MERCURY, POLYCHORINATED BIPHENYLS
NHEST600031001-05, BACK CHANNEL		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, ESTUARINE BIOASSESSMENTS, LIGHT ATTENUATION COEFFICIENTS, MERCURY, POLYCHORINATED BIPHENYLS
NHEST600031002-01-01, WITCH CREEK	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLS
NHEST600031002-01-02, BERRYS BROOK		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLS
NHEST600031002-02, LITTLE HARBOR	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, ESTUARINE BIOASSESSMENTS, FECAL COLIFORMS, LIGHT ATTENUATION COEFFICIENTS, MERCURY, POLYCHORINATED BIPHENYLS
NHEST600031002-04, UNNAMED BROOK TO BASS BEACH	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLS
NHEST600031002-05, PARSONS CREEK	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLS
NHLAK600031002-01, EEL POND	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MERCURY
NHOCN000000000-02-04, ATLANTIC OCEAN-WALLIS SANDS AT WALLIS ROAD	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, MERCURY, POLYCHORINATED BIPHENYLS
NHOCN000000000-02-05, ATLANTIC OCEAN - CABLE BEACH		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLS
NHOCN000000000-02-06, ATLANTIC OCEAN - SAWYER BEACH	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLS
NHOCN000000000-02-07, ATLANTIC OCEAN - JENNESS BEACH	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, MERCURY, POLYCHORINATED BIPHENYLS
NHOCN000000000-02-14, ATLANTIC OCEAN - FOSS BEACH		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, MERCURY, POLYCHORINATED BIPHENYLS
NHOCN000000000-02-15, ATLANTIC OCEAN - WALLIS SANDS WWTP OUTFALL	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, MERCURY, POLYCHORINATED BIPHENYLS
NHOCN000000000-02-16, ATLANTIC OCEAN - WALLIS SANDS STATE BEACH	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, MERCURY, POLYCHORINATED BIPHENYLS
NHOCN000000000-02-18, ATLANTIC OCEAN		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, MERCURY, POLYCHORINATED BIPHENYLS

NHOCN000000000-02-20, PISCATAQUA RIVER MOUTH		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, MERCURY, POLYCHORINATED BIPHENYLES
NHOCN000000000-03-01, BASS BEACH BROOK OUTFALL AREA	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLES
Waterbody segment that receives flow from the MS4	Number of outfalls into receiving water segment	Chloride	Chlorophyll-a	Dissolved Oxygen/DO Saturation	Nitrogen	Oil & Grease/ PAH	Phosphorus	Solids/ TSS/ Turbidity	E. coli	Enterococcus	Other pollutant(s) causing impairments
NHOCN000000000-05, ATLANTIC OCEAN - ELL POND		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLES
NHOCN000000000-07, ATLANTIC OCEAN - PARSONS CREEK		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	DIOXIN, FECAL COLIFORM, MERCURY, POLYCHORINATED BIPHENYLES
NHOCN000000000-11, ATLANTIC OCEAN - RYE HARBOR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DIOXIN, MERCURY, POLYCHORINATED BIPHENYLES
NHRIV600031002-01, BERRYS BROOK	1	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	MERCURY, pH
NHRIV600031002-03, PARSONS EAST	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	MERCURY
NHRIV600031002-10, EEL POND OUTLET TO ATLANTIC OCEAN		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	MERCURY
NHRIV600031004-04, LITTLE RIVER - UNNAMED BROOK - OLIVER BROOK	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MERCURY, pH
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Click to lengthen table

Notice of Intent (NOI) for coverage under Small MS4 General Permit

Part III: Stormwater Management Program Summary

Identify the Best Management Practices (BMPs) that will be employed to address each of the six Minimum Control Measures (MCMs).

For each MCM, list each existing or proposed BMP by category and provide a brief description, responsible parties/departments, measurable goals, and the year the BMP will be employed (public education and outreach BMPs also requires a target audience). **Use the drop-down menus in each table or enter your own text to override the drop down menu.**

MCM 1: Public Education and Outreach

BMP Media/Category (enter your own text to override the drop down menu)	BMP Description	Targeted Audience	Responsible Department/Parties (enter your own text to override the drop down menu)	Measurable Goal	Beginning Year of BMP Implementation
Various delivery methods -	Varied. Use NH Seacoast Stormwater Coalition outreach materials and guidance to implement outreach for relevant impairments *See Note 2 in Section IV.	Residents	Public Works Dept. with Seacoast Stormwater Coalition	To be determined with coordination with NH Seacoast Stormwater Coalition. Examples 1) Increased awareness of proper fertilizer use. 2) Increased awareness of pet waste impacts to water quality. 3) Increased awareness of yard waste impacts to water quality. 4) Increased septic system testing.	Year 1
Various delivery methods	Varied. Use NH Seacoast Stormwater Coalition outreach materials and guidance to implement outreach for relevant impairments *See Note 2 in Section IV.	Businesses, Institutions and Commercial Facilities	Public Works Dept. with Seacoast Stormwater Coalition	To be determined with coordination with NH Seacoast Stormwater Coalition.	Year 1

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Part III: Stormwater Management Program Summary (continued)

MCM 3: Illicit Discharge Detection and Elimination (IDDE)

BMP Categorization (enter your own text to override the drop down menu)	BMP Description	Responsible Department/Parties (enter your own text to override the drop down menu)	Measurable Goal (all text can be overwritten)
Sanitary Sewer Overflow (SSO) inventory (not applicable to towns with no sewer)	Develop SSO inventory in accordance of permit conditions	Public Works Department	Complete within 1 year of effective date of permit (See Note 3 in Section IV.)
Storm sewer system map (not applicable to towns with no sewer)	Create map and update during IDDE program completion, update annually	Public Works Department	Update map within 2 years of effective date of permit and complete full system map 10 years after effective date of permit (See Note 3 in Section IV.)
Written Illicit Discharge and Detection Elimination (IDDE) program development	Create written IDDE program	Public Works Department	Complete within 1 year of the effective date of permit and update as required under sections 2.3.4.6-11
Implement IDDE program	Implement catchment investigations according to program and permit conditions	Public Works Department	Complete 10 years after effective date of permit
Implement employee training (if no employees, Select Board responsible)	Train employees in IDDE program implementation	Public Works Department	Provide training annually
Conduct dry weather screening	Conduct in accordance with outfall screening procedure and permit conditions in section 2.3.4.7.b	Public Works Department	Complete 3 years after effective date of permit, update annually and based on results of dry weather screening
Conduct wet weather screening	Conduct in accordance with outfall screening procedures in in section 2.3.4.7.b	Public Works Department	Complete 10 years after effective date of permit
Ongoing screening	Conduct dry weather and wet weather screening (as necessary)	Public Works Department o	Complete ongoing outfall screening on completion of IDDE program

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Part III: Stormwater Management Program Summary (continued)

MCM 4: Construction Site Stormwater Runoff Control

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Notice of Intent (NOI) for coverage under Small MS4 General Permit

Part III: Stormwater Management Program Summary (continued)

MCM 5: Post-Construction Stormwater Management in New Development and Redevelopment

BMP Categorization <small>(enter your own text to override the drop down menu or entered text)</small>	BMP Description	Responsible Department/Parties <small>(enter your own text to override the drop down menu)</small>	Measurable Goal <small>(all text can be overwritten)</small>
As-built plans for on-site stormwater controls	Enact procedures to require submission of as-built plans and ensure long term operations and maintenance s part of the SWMP	Planning Board & Code Enforcement through a public hearing process	Require submission of as-built plans for completed projects.
Target properties for reduction in impervious cover	Complete an inventory and priority ranking of permittee-owned property and existing infrastructure that could be retrofitted with BMPs designed to reduce the frequency, volume and pollutant loads of stormwater discharges to its MS4 through the mitigation of impervious area	Public Works Department	Complete 4 years after effective date of permit and report annually on retrofitted properties
Determine feasibility and allow for green infrastructure implementation	Report assessing existing local regulations to determine the feasibility of making green infrastructure practices allowable when appropriate site conditions exist	Planning Board through a public hearing process	Complete 4 years after effective date of permit and implement recommendations of report
Street design and parking lot guidelines	Report assessing requirements that affect the creation of impervious cover. The assessment will help determine if changes to design standards for streets and parking lots can be modified to support low impact design options.	Planning Board through a public hearing process	Complete 4 years after effective date of permit and implement recommendations of report

[illegible]

Notice of Intent (NOI) for coverage under Small MS4 General Permit

Part III: Stormwater Management Program Summary (continued)

MCM 6: Municipal Good Housekeeping and Pollution Prevention

BMP Categorization (enter your own text to override the drop down menu or entered text)	BMP Description	Responsible Department/Parties (enter your own text to override the drop down menu)	Measurable Goal (all text can be overwritten)	Beginning Year of BMP Implementation
Operation and Maintenance (O&M) Procedures	Create written O&M procedures including all requirements contained in section 2.3.7.1 for parks and open spaces, buildings and facilities, and vehicles and equipment	Public Works Department	Complete and implement 2 years after effective date of permit	Year 2
Inventory all permittee-owned parks and open spaces, buildings and facilities, and vehicles and equipment	Prepare inventory	Public Works Department	Complete 2 years after effective date of permit and update inventory annually	Year 2
Infrastructure Operations and Maintenance	Establish and record annually implementation of program activities for maintenance, repair and rehabilitation of MS4 infrastructure	Public Works Department & Code Enforcement	Complete 2 years after effective date of permit	Year 2
Stormwater Pollution Prevention Plan (SWPPP)	Create SWPPPs for municipal properties or individual facilities per requirements of section 2.3.7.2	Public Works Department	Complete 2 years after effective date of permit	Year 2
Catch basin cleaning	Establish schedule for catch basin cleaning such that each catch basin is no more than 50% full and clean catch basins on that schedule, ensure proper storage of basin cleanings	Public Works Department	Clean catch basins on established schedule and report number of catch basins cleaned and volume of material moved annually	Year 1

[illegible]

Use the drop-down menus to select the applicable TMDL, action description to meet the TMDL requirements, and the responsible department/parties. If no options are applicable, or more than one, **enter your own text to override drop-down menus**. If submitting a NHDES approved alternative reduction plan, attach and submit it with the NOI.

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Notice of Intent (NOI) for coverage under Small MS4 General Permit

Part III: Stormwater Management Program Summary (continued)

Actions for Meeting Requirements Related to Water Quality Limited Waters

Use the drop-down menus to select the pollutant causing the water quality limitation and enter the waterbody ID(s) experiencing excursions above water quality standards for that pollutant. Choose the action description from the dropdown menu and indicate the responsible party. If no options are applicable, or more than one, **enter your own text to override drop-down menus**.

Pollutant	Waterbody ID(s)	Action Description	Responsible Department/Parties (enter your own text to override the drop down menu)
E. Coli	NHRIV600031002-01, NHRIV600031002-03, NHRIV600031002-10	Adhere to requirements in part III of Appendix H	Public Works Department & Planning Board
Enterococcus	NHEST600031001-04, NHEST600031002-01-01, NHEST600031002-01-02, NHEST600031002-01-02, NHEST600031002-02, NHEST600031002-05, NHOCN000000000-02-05, NHOCN000000000-02-06, NHOCN000000000-02-14, NHOCN000000000-03-01, NHOCN000000000-07	Adhere to requirements in part III of Appendix H	Public Works & Planning Board
Fecal Coliform	NHEST600031002-01-01, NHEST600031002-01-02, NHEST600031002-02, NHEST600031002-04, NHEST600031002-05, NHOCN000000000-02-05, NHOCN000000000-02-06, NHOCN000000000-03-01, NHOCN000000000-05, NHOCN000000000-07	Adhere to requirements in part III of Appendix H	Public Work & Planning Board
Nitrogen	NHEST600031001-05, NHEST600031002-02	Adhere to requirements in part I of Appendix H	Public Works Department
Chloride	NHLAK600031002-01	Adhere to requirements in part IV of Appendix H	Public Works Department

Part IV: Notes and additional information

Use the space below to indicate the part(s) of 2.2.2 that you have identified as not applicable to your MS4 and provide all supporting documentation below or attach additional documents if necessary.

Provide any additional information about your MS4 program below.

Note 1: See attached table for complete listing of all water bodies found within municipal boundaries, impairment status, and listing of each water body's impairments .

Note 2: Additional messages will be provided in accordance with Appendix H for Water Quality Limited Water bodies.

Notice of Intent (NOI) for coverage under Small MS4 General Permit

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Part V: 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 gathered and evaluated 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, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I have no personal knowledge that the information submitted is other than 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.

Name:

PRISCILLA V. JENNESS

Title:

BOARD OF SELECMEN - CHAIRMAN

Signature:

Priscilla V. Jenness

Date:

9/24/2018

[To be signed according to Appendix B, Subparagraph B.11, Standard Conditions]

Note: When prompted during signing, save the document under a new file name