

## **APPENDIX 4 SUGGESTED NOTICE OF INTENT (NOI) FORMAT AND INSTRUCTIONS**

### **I. Notice of Intent (NOI) Instructions**

#### **A. Required Information**

Applicants seeking coverage under the Hydroelectric Generating Facilities General Permit (HYDROGP) must submit a written NOI to EPA and the appropriate state agency as described below. The NOI consists of either the suggested NOI format included in Section II of this document or another format of official correspondence that contains all of the required information described below and listed in the suggested format.

At a minimum, the NOI must include the information in Parts I.A.1 through I.A.7 below for each facility. Additional information may be attached as needed.

##### **1. General Facility Information**

- a. Indicate whether applying for MA or NH HYDROGP.
- b. Provide the name, address, and location (latitude and longitude) of the facility, the SIC code and indicate type of business, contact information for the facility owner, and contact information for the facility operator (if different from the owner).
- c. Information about the current permit status of the facility, including if prior HYDROGP coverage or individual NPDES permit coverage has been granted and the permit number, if a pending NPDES application is on file for the discharge(s) and the date of submittal, a topographic map indicating the locations of the facility and outfalls, number of turbines and the maximum and minimum capacity, and whether the facility is a pump storage project.

##### **2. Discharge Information**

- a. Name and type of the receiving water, receiving waterbody classification, if the waterbody is included on the State's Integrated List of Waters and information about any impairments.
- b. A schematic of water flow through the facility.
- c. Information about discharges from each outfall and each type of effluent, including the location of the outfall (latitude and longitude), the type of discharge, maximum and average flows, temperatures, oil and grease concentrations, and pH (including whether alternative pH limitations are requested and, if so, if State's approval is attached).

### 3. Best Technology Available for Cooling Water Intake Structures

- a. Indicate whether the facility withdraws water for cooling purposes. Facilities that do withdraw cooling water must also provide the following information.
- b. Indicate which technology will be employed to comply with the general BTA requirements in Part 4.2 of the HYDROGP and, where applicable, any supplemental information required by Part 4.2 for the compliance technology (such as biological monitoring data or calculated velocity).
- c. Additional information about the cooling water intake structure as required by Part 4.3 of the HYDROGP including intake velocity data, intake volume data, volume of intake as a percentage of the flow through the turbines, source waterbody annual mean flow, and source waterbody 7-day mean low flow with 10-year recurrence (7Q10).
- d. A narrative characterization of the habitat in the source waterbody as described in Part 4.3 of the HYDROGP including descriptions of resident and migratory fish species and stocking information. Where available, facilities may use biological characterizations prepared for or in conjunction with licensing by another Federal Agency.

### 4. Chemical Additives

- a. Indicate if the facility plans to use non-toxic neutralization chemicals for pH adjustment.
- b. Indicate if the facility plans to use anti-freeze chemicals and, if so, for EACH anti-freeze chemical provide the chemical name and manufacturer, dosage concentration, effluent concentration, and a material safety data sheet or other toxicity documentation.

### 5. Endangered Species Act Certification

The certification requirements for the HYDROGP under the ESA, including necessary documentation, are explained in detail in Appendix 2. Facilities must include a certification for species and habitat under the jurisdiction of USFWS AND NMFS. The facility must certify and provide documentation if there are no USFWS species present. The facility must indicate if the facility is not located in the areas where listed species under the jurisdiction of NMFS exist.

### 6. National Historic Properties Act Eligibility

The criteria for eligibility for the HYDROGP under the NHPA are explained in detail in Appendix 3. Facilities must attach supporting documentation for eligibility where historic properties are present and may be impacted by the authorized discharges.

### 7. Supplemental Information

Provide any supplemental information, including antidegradation review information applicable to new or increased discharges.

## **B. Signature Requirements**

The NOI must be signed and dated in accordance with the signatory requirements of 40 CFR §122.22, including the certification statement shown on the suggested NOI format.

## **C. Submission of NOI to EPA and the Appropriate State Agency**

### **1. NOI submittal timelines**

- a. Proposed new dischargers that are seeking coverage under this General Permit must submit an NOI to EPA and the respective State, at least thirty (30) days prior to the commencement of discharge.
- b. Existing facilities, including those covered under the 2009 HYDROGP that expired on December 7, 2014, seeking coverage under this General Permit must file an NOI to EPA and the respective State within sixty (60) days of the effective date of this permit reissuance.

Filing with EPA - All operators located in Massachusetts and New Hampshire that apply for coverage under this General Permit must submit a NOI to EPA-New England. All NOIs submitted after December 21, 2020 must be submitted electronically. Prior to December 21, 2020, NOIs and any attachments may be submitted to EPA either electronically at [Hydro.GeneralPermit@epa.gov](mailto:Hydro.GeneralPermit@epa.gov) or at the address provided below. After December 21, 2020, where an operator is able to demonstrate a reasonable basis, such as technical or administrative infeasibility, that precludes submittal in electronic format, submit NOIs in hard copy form to:

U.S. Environmental Protection Agency  
Office of Ecosystem Protection  
EPA/OEP HYDROGP Applications Coordinator  
5 Post Office Square - Suite 100 (OEP06-01)  
Boston, MA 02109-3912

2. Filing with the States - A copy of the NOI filed with EPA-NE must also be filed with state agencies as described below. The state agency may elect to develop a state specific form or other additional information requirements. All applicants should keep a copy of the complete application package for their records.
  - a. Discharges in Massachusetts: Applicants for discharges to an outstanding resource water (ORW) must submit a copy of their completed NOI and the completed State Transmittal Form to:

Massachusetts Department of Environmental Protection  
Surface Water Discharge (NPDES) Permitting Program  
1 Winter Street, 5<sup>th</sup> floor, Boston, MA 02108

The transmittal form, instructions, and fee amount may be obtained through the MassDEP website at <http://www.mass.gov/eea/agencies/massdep/water/wastewater/surface-water-discharge-permitting-npdes.html>. Click on NPDES General Permits for instructions and a link to the transmittal form.

In addition, a check for the appropriate fee and a copy of the transmittal form must be sent to:

Massachusetts Department of Environmental Protection  
P.O. Box 4062  
Boston, MA 02211

Applicants for discharges to all other waters do not require any submission to MassDEP.

- b. Discharges in New Hampshire: All applicants must provide a completed copy of their NOI to:

New Hampshire Department of Environmental Services  
Water Division, Wastewater Engineering Bureau  
29 Hazen Drive, P.O. Box 95  
Concord, New Hampshire 03302-0095

## **II. Suggested Format for the HYDRO General Permit Notice of Intent (NOI):**

### **Request for General Permit Authorization to Discharge Wastewater Notice of Intent (NOI) to be covered by Hydroelectric Generating Facilities General Permit (HYDROGP) No. MAG360000 or NHG360000**

Indicate Applicable General Permit for Discharge(s):      ☐ MAG360000      ☐ NHG360000

#### **A. Facility Information**

1. Facility Location	Name:	
	Street:	
	City:	State:
	Zip:	SIC Code:
	Latitude:	Longitude:
	Type of Business:	
2. Facility Mailing Address (if different from Location)	Street:	
	City:	State:
	Zip:	
3. Facility Owner	Name:	Email:
	Street:	Telephone:

	City:	State:	
	Contact Person:	Zip:	
4. Facility Operator (if different from above)	Name:	Email:	
	Street:	Telephone:	
	City:	State:	
	Zip:		
5. Current Permit Status	Has prior HYDROGP coverage been granted for the discharge(s) listed in the NOI?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Permit number (if yes):		
	Is the facility covered under an Individual Permit?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Is there a pending NPDES application of file with EPA for the discharge(s)?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Date of Submittal (if yes): <a href="#">Click or tap to enter a date.</a>		Permit Number (if known):
	Attach a topographic map indicating the locations. of the facility and outfall(s) to the receiving water		<input type="checkbox"/> Map Attached
	Number of turbines:		
	Combined turbine discharge (installed capacity) at:	Maximum capacity? Minimum capacity?	cfs cfs
	Is this facility operated as a pump storage project?		<input type="checkbox"/> Yes <input type="checkbox"/> No

**B. Discharge Information**

1.	Name of Receiving Water(s):	<input type="checkbox"/> Freshwater <input type="checkbox"/> Marine
2.	Waterbody classification: <input type="checkbox"/> Class A <input type="checkbox"/> Class B <input type="checkbox"/> Class SA <input type="checkbox"/> Class SB	
3.	Is the receiving water is listed in the State's Integrated List of Waters (i.e., CWA Section 303(d))?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	If the applicant answered yes to B.2, has the applicant identified the designated uses that are impaired, any pollutants indicated, and whether a final TMDL is available for any of the indicated pollutants in a separate attachment to the NOI?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Attach a line drawing or flow schematic showing water flow through the facility including location of intake(s), operations contributing to effluent flow, treatment units, outfalls, and receiving water(s).	<input type="checkbox"/> Line Drawing Attached
6.	List each outfall (numbered sequentially) discharging effluent from the following categories and provide an estimate of the average monthly flow (in gallons per day) for each discharge type. See Parts 1.1 through 1.5 (for MA) or Parts 2.1 through 2.5 (for NH) for descriptions and permit conditions for each discharge type.	
	Equipment-related cooling water	Outfalls: gpd
	Equipment and floor drain water	Outfalls: gpd
	Maintenance-related water	Outfalls: gpd
	Facility maintenance-related water during flood/high water events	Outfalls: gpd
	Equipment-related backwash strainer water	Outfalls: gpd

7. For each outfall listed above, provide the following information (attach additional sheets if necessary). Outfalls may be eligible for alternative pH effluent limits. See Parts 1.8 and 2.8 of the permit for additional information. Contact MassDEP or NHDES to determine the required information and protocol to request alternative pH effluent limits.			
Outfall No.	Latitude:		Longitude:
	Discharge is: <input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent <input type="checkbox"/> Seasonal		
	Maximum Daily Flow MGD		Average Monthly Flow MGD
	Maximum Daily Temperature °F		Average Monthly Temperature °F
	Maximum Daily Oil & Grease mg/L		Average Monthly Oil & Grease mg/L
	Maximum Monthly pH s.u.		Minimum Monthly pH s.u.
	Alternative pH limits requested? <input type="checkbox"/> Yes <input type="checkbox"/> No		State approval attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
Outfall No.	Latitude:		Longitude:
	Discharge is: <input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent <input type="checkbox"/> Seasonal		
	Maximum Daily Flow MGD		Average Monthly Flow MGD
	Maximum Daily Temperature °F		Average Monthly Temperature °F
	Maximum Daily Oil & Grease mg/L		Average Monthly Oil & Grease mg/L
	Maximum Monthly pH s.u.		Minimum Monthly pH s.u.
	Alternative pH limits requested? <input type="checkbox"/> Yes <input type="checkbox"/> No		State approval attached? <input type="checkbox"/> Yes <input type="checkbox"/> No



Outfall No.	Latitude:	Longitude:
	Discharge is: <input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent <input type="checkbox"/> Seasonal	
	Maximum Daily Flow MGD	Average Monthly Flow MGD
	Maximum Daily Temperature °F	Average Monthly Temperature °F
	Maximum Daily Oil & Grease mg/L	Average Monthly Oil & Grease mg/L
	Maximum Monthly pH s.u.	Minimum Monthly pH s.u.
	Alternative pH limits requested? <input type="checkbox"/> Yes <input type="checkbox"/> No	State approval attached? <input type="checkbox"/> Yes <input type="checkbox"/> No

### C. Best Technology Available for Cooling Water Intake Structures

Facilities that checked “equipment-related cooling” as one of the discharges in Part B. of this NOI are subject to the following requirements. Facilities that intake more than 2 MGD for use in the facility (i.e., not used in the turbines to generate power) and which use at least 25% of the intake volume exclusively for cooling are not eligible for permit coverage and must submit an individual permit application. See Part 3.3 of the HYDROGP.

1. Does the facility intake water for cooling purposes subject to the BTA Requirements at Part 4 of the HYDROGP?	<input type="checkbox"/> Yes <input type="checkbox"/> No If no, skip to Part D of this NOI.
2. If yes, indicate which technology employed to comply with the general BTA requirements at Part 4.1 of the HYDROGP:	
<input type="checkbox"/> A physical or behavioral barrier located at the first intake encountered by fish on the upstream side of the dam that directs fish towards a downstream passage which safely conveys fish over the dam without being exposed to the CWIS. Has the applicant attached a narrative description of the barrier and provided data to demonstrate that the downstream fish passage effectively transports live fish in a manner that minimizes the likelihood of becoming impinged or entrained at the cooling water intake? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<input type="checkbox"/> An intake velocity at the cooling water intake not exceeding 0.5 fps. Has the applicant attached a demonstration of compliance with this intake velocity through monitoring or calculation based on the maximum intake volume and minimum bypass flow? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> A physical screen on an intake located in the source waterbody of sufficient mesh size to minimize the potential for adult and juvenile fish to become entrained and a through-screen velocity not exceeding 0.5 fps. Has the applicant attached a demonstration of compliance with this intake velocity through monitoring or calculation based on the maximum intake volume and source water 7Q10 low flow? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3. If the answer to question C.1 is yes, in addition to complying with one of the criteria above, the applicant must submit the following information:			
Maximum daily intake volume during previous five (5) years:		gpd	
Date of maximum daily intake: <a href="#">Click or tap to enter a date.</a>			
Maximum monthly average intake volume during the previous five (5) years:		gpd	
Month and year of maximum monthly average intake: Month		Year	
Maximum daily and average monthly volume of water used exclusively for cooling: Max:		gpd	Avg: gpd
Maximum daily and average monthly volume of water used for another process before or after being used for cooling: Max:		gpd	
		Avg: gpd	
Has the applicant attached a narrative description explaining how cooling water is reused? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Calculated velocity at cooling water intake?		Fps	
Volume of total intake water withdrawn and used in facility as a percentage of:			
Installed turbine capacity	%	Average daily flow through penstock	%
Minimum flow through penstock	%		
Source water annual mean flow (e.g., available from USGS, MassDEP, or NHDES):		cfs	
Source water 7-day mean low flow with 10-year recurrence interval (7Q10):		cfs	
Has the applicant included a narrative characterization of the habitat? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**D. Chemical Additives**

1.	Does the facility use or plan to use non-toxic chemicals for pH adjustment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Does the facility use or plan to use chemicals for anti-freeze purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	If the answer to D.2 is yes, provide the following for <b>EACH</b> chemical additive used for anti-freeze:	
Chemical Name and Manufacturer:		
Maximum Dosage Concentration Used:		Average Dosage Concentration Used:
Maximum Concentration in Discharge: mg/L		Average Concentration in Discharge: mg/L
Material Safety Data Sheet (MSDS) or other toxicity documentation for each chemical attached? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**E. Endangered Species Act Certification**

Appendix 2 to the HYDROGP explains the certification requirements related to threatened and endangered species and designated critical habitat. Indicate under which criteria the discharge is eligible for coverage under the HYDROGP:	
1. ESA eligibility for species under jurisdiction of USFWS	<input type="checkbox"/> <b>Criterion A:</b> No endangered or threatened species or critical habitat are in proximity to the discharges or related activities or come in contact with the “action area.” See Appendix 2, Part B for documentation requirements. Documentation attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> <b>Criterion B:</b> Formal or informal consultation with the USFWS under Section 7 of the ESA resulted in either a no jeopardy opinion (formal consultation) or a written concurrence by USFWS on a finding that the discharges and related activities are “not likely to adversely affect” listed species or critical habitat. Has the operator completed consultation with USFWS and attached documentation? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, is consultation underway? <input type="checkbox"/> Yes <input type="checkbox"/> No

	<input type="checkbox"/> <b>Criterion C:</b> Using the best scientific and commercial data available, the effect of the discharges and related activities on listed species and designated critical habitat have been evaluated. Based on those evaluations, a determination is made by EPA, or by the operator and affirmed by EPA, that the discharges and related activities will have “no effect” on any federally threatened or endangered species or designated critical habitat under the jurisdiction of the USFWS. Has the applicant attached documentation of the “no effect” finding? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. ESA eligibility for species under jurisdiction of NMFS	<p>Is the facility located on: the Connecticut River between the Massachusetts/Connecticut state line and Turners Falls, MA; the Taunton River; the Merrimack River between Lawrence, MA and the Atlantic Ocean; the Piscataqua River including the Salmon Falls and Cocheco Rivers; or a marine water?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, was the applicant authorized to discharge from the facility under the 2009 HYDROGP?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If the discharge is to one of the named rivers above or to a marine water <i>and</i> the facility was not previously covered under the 2009 HYDROGP, has there been any previous formal or informal consultation with NMFS? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Documentation of consultation attached? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

#### F. National Historic Properties Act Eligibility

1. Indicate under which criterion the discharge(s) is eligible for covered under the HYDROGP:
<input type="checkbox"/> <b>Criterion A:</b> No historic properties are present.
<input type="checkbox"/> <b>Criterion B:</b> Historic properties are present. The discharges and related activities do not have the potential to impact historic properties.
<input type="checkbox"/> <b>Criterion C:</b> Historic properties are present. The discharges and related activities have the potential to impact or adversely impact historic properties.

2.	Has the applicant attached supporting documentation for NHPA eligibility described in Appendix 3, Part C of the HYDROGP? <input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Does supporting documentation include a written agreement from the State Historic Preservation Officer, Tribal Historic Preservation Officer, or other tribal representative that outlines measures the operation will carry out to mitigate or prevent any adverse effects on historic properties? <input type="checkbox"/> Yes <input type="checkbox"/> No

### G. Supplemental Information

Please provide any supplemental information, including antidegradation review information applicable to new or increased discharges. Attach any certifications required by the HYDROGP. Supplemental information attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
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### H. Signature Requirements

1.	The NOI must be signed by the operator in accordance with the signatory requirements of 40 C.F.R. § 122.22, including the following certification:	
	<i>I certify under penalty of law that no chemical additives are used in the discharges to be authorized under this General Permit except for those used for pH adjustment or anti-freeze purposes and 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 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 certify that I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>	
2.	Notification provided to the appropriate State, including a copy of this NOI, if required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Signature:	Date: Click or tap to enter a date.
	Print Name and Title:	