UNITED STATES ENVIRONMENTAL PROTECTION AGENCY NEW ENGLAND - REGION I 5 POST OFFICE SQUARE, SUITE 100 BOSTON, MASSACHUSETTS 02109-3912

Request for General Permit Authorization to Discharge Wastewater (Notice of Intent (NOI) to be covered by the General Permit)

Hydroelectric Generating Facilities (HYDROGP) NPDES General Permits No. MAG360000 and NHG360000

A. Facility Information	MAG360021
1. Indicate applicable General Permit for discharge:	MAG360000 X
18.000 Control (19.000)	NHG360000
2. Facility Name, Location, and Data: Name NAEA Energy Massachuse Street/POBox 5 Red Bridge Rd. State MA Latitude 42° 10' 30" Type of Business SIC Code(s)	Hs, LLC - Red Bridge Station City Wilbraham Zip Code 01095 Longitude 72° 25' 00"
3. Facility Mailing Address (if different from Locati Name NAEA Energy Massachusett Street/PO Box 15 Agawam Avenue State Massachusetts	on Address): 5, UC City_West_Springbeld Zip Code_01089
	Cermail (optional) City West Spring Seld Zip Code 01083 Telephone Number 413. 730. 4781 3. Tribal 4. Private X
Other (Describe)	
State	_ e-mail (optional) City Zip Code Telephone Number
b. Is the facility covered by an individual NPDES pe If Yes, Permit Number MA 035823 c. Is there a pending NPDES application on file with	EPA for this discharge? Yes X No If Yes date
of submittal: 3/16/2000 and permi	t number if available: MA 0635823

7. Attach a topographic map indicating the location of the facility a attached?	nd the outfall(s) to the receiving water. Map
8. Provide the number of turbines and the combined turbine dischar minimum output, in cubic feet per second (cfs). Number of turbines capacity): maximum output, cfs 1236 and minimum output, cfs 378	rge (installed capacity) at maximum and Combined turbine discharge (installed
9. Is the hydroelectric generating facility operated as a pump storage	ge project? No
B. Discharge Information (attach additional sheets as needed	().
1. Name of receiving water into which discharge will occur: Kreshwater: Marine Water:	icoppee River
2. Attach a line drawing or flow schematic showing water flow throwater, operations contributing flow, treatment units, outfalls, and schematic attached? YES	ough the facility including sources of intake d receiving waters(s). Line drawing or flow
 List each outfall under the following categories and number seque equipment and floor drain water; maintenance-related water; facil water events, and equipment-related backwash strainer water (see 4). Attach additional sheets to identify outfalls as needed. 	ity maintenance-related water during flood/high
Equipment-related cooling water	Equipment and floor drain water
See Attached Lin	e Drawings
Maintenance-related water	Facility maintenance-related water during flood/high water events
See Attached Li	ne Drawings
Equipment-related backwash strainer water	
See Attached	Line Drawing 5

4. List each outfall discharging any combination of the following to identify the combined discharges: equipmentrelated cooling water, equipment and floor drain water, maintenance-related water, equipment-related backwash strainer water, and facility maintenance-related water during flood/high water events (see Parts I.A.5 and B.5) and continue the sequential numbering. Attach additional sheets to identify outfalls as needed.

NOI Information - NPDES Hydroelectric Facilities General Permit

- 5. Provide for each outfall the following:
- a. Latitude and longitude to the nearest second (see EPA's siting tool at: http://www.epa.gov/tri/report/siting_tool/) and the name(s) of the receiving water(s) into which the discharge will occur. 42 10 35 -72 24 33"

 b. The operations contributing flow and the treatment received by the discharge. Indicate the average flow from each operation.
- c. Indicate if the discharge can be sampled at least once per year or can be sampled using the representative outfall sampling provisions (see Parts I.A.6 or B.6 and III.E). See Attached Live & rawings Notall.
- d. Note if the outfall discharges intermittently or seasonally.

 See Attached Live Drawings

C. Chemical Additives

Are any non-toxic neutralization chemicals used in the discharge(s)? Yes _____ No __ If so, include the chemical name and manufacturer; maximum and average daily quantity used on a monthly basis as well as the maximum and average daily expected concentrations (mg/l) in the discharge, and the vendor's reported aquatic toxicity (NOAEL and/or LC50 in percent for typically acceptable aquatic organism).

D. Endangered Species Act Eligibility Information

A facility, with a previous ESA Section 7 consultation with the National Marine Fisheries Service (NMFS), seeking coverage under the Massachusetts general permit and discharging to the Connecticut River or Merrimack River should provide one of the following, if available.

- 1. A formal certification indicating consultation with the National Marine Fisheries Service (NMFS) resulted in either a no jeopardy opinion or a written concurrence on a finding that the discharges are not likely to adversely affect the shortnose sturgeon or critical habitat. Information should also be provided indicating the hydroelectric facility's previous ESA Section 7 consultation with NMFS covered the discharges to be authorized under this general permit and demonstrating no significant changes in the discharges have occurred since the previous consultation.
- 2. Another operator's certificate of the ESA eligibility for those discharges to be authorized under this general permit.

E. Supplemental Information

Please provide any supplemental information, including antidegradation review information applicable to new or increased discharges. Attach any certification(s) required by the general permit.

F. Signature Requirements

The Notice of Intent must be signed by the operator in accordance with the signatory requirements of 40 CFR Section 122.22 (see below) including the following certification:

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 and (2) 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 certify that I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Jan

Signature Wall

Date 7/15/2010

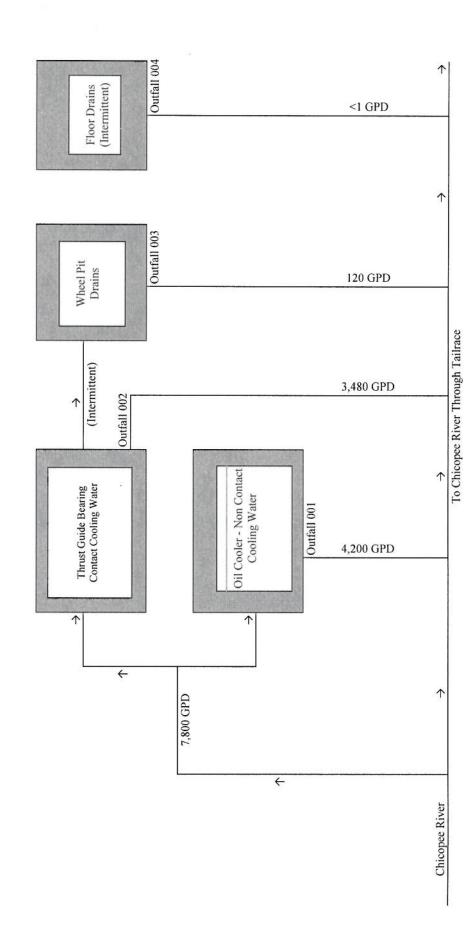
Printed Name and Title

THOMAS M. RAINWATER, PRESIDENT & CEC

Federal regulations require this application to be signed as follows:

- 1. For a corporation, by a principal executive officer of at least the level of vice president;
- 2. For partnership or sole proprietorship, by a general partner or the proprietor, respectively, or,
- 3. For a municipality, State, Federal or other public facility, by either a principal executive officer or ranking elected official.

Site Locus Map Red Bridge Station Wilbraham, Massachusetts



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NAEA Energy Massachusetts, LLC Red Bridge Station-Unit 4 NPDES Permit Renewal Water Flow Schematic **EPA ID # MA0035823**

