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

NH6360030

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	
1. Indicate applicable General Permit for disch	arge: MAG360000
	NHG360000 X
Facility Name, Location, and Data:     Name Rollinsford Hydroelectric Project	
Street/POBox 1 1/2 Front Street State New Hampshire Latitude 43° 14' 10.70" N	City Rollinsford
State New Hampshire	Zip Code 03869
Latitude 43° 14' 10.70" N	Longitude 70° 49' 08.67" W
Type of Business Hydroelectric power ge	eneration
Facility Mailing Address (if different from L Name Rollinsford Hydroelectric Project  One Tech Drive Cuit 2009	
Street/PO BoxOne Tech Drive Suite 220	
State Massachusetts	Zip Code 01810
Facility Owner:     Name Consolidated Hydro New Hampsh     Street/PO Box One Tech Drive Suite 220     State Massachusetts	e-mail (optional) City Andover Zip Code 01810 Telephone Number 508-681-1900
Contact Person Adam Sotirakopoulos	Telephone Number 508-681-1900
Owner is (check one): 1. Federal 2. S Other (Describe)	tate 3. Tribal 4. Private_X
Facility Operator (if different from above):     Legal Name	e-mail (optional)
Street/PO Box	City
State	Zip Code
Contact Person	Telephone Number
Current permit status (please check Yes or l	No):
	eral permit coverage) been granted for the discharge that is listed o
the NOI? Yes No X If Yes, Per	mit Number:
b. Is the facility covered by an individual NPD	ES permit? Yes No_X
If Yes, Permit Number	
<ul> <li>Is there a pending NPDES application on file of submittal:and</li> </ul>	e with EPA for this discharge? Yes No _X If Yes, dat
or suchilitian.	permit number if available.

7. Attach a topographic map indicating the location of the facility attached? Yes	and the outtail(s) to the receiving water. Map
8. Provide the number of turbines and the combined turbine disch minimum output, in cubic feet per second (cfs). Number of turbin capacity): maximum output, cfs 456 and minimum output, cfs 136	ces 2 Combined turbine discharge (installed
9. Is the hydroelectric generating facility operated as a pump stor	\$1.4 B1
B. Discharge Information (attach additional sheets as neede	ed).
Name of receiving water into which discharge will occur: Sa     Freshwater:	lmon Falls River
<ol> <li>Attach a line drawing or flow schematic showing water flow th water, operations contributing flow, treatment units, outfalls, a schematic attached? Yes</li> </ol>	
<ol> <li>List each outfall under the following categories and number seq equipment and floor drain water; maintenance-related water; fac water events, and equipment-related backwash strainer water (see 4). Attach additional sheets to identify outfalls as needed.</li> </ol>	cility maintenance-related water during flood/high
Equipment-related cooling water	Equipment and floor drain water
	surgener was the street of the street
Maintenance-related water	Facility maintenance-related water during flood/high water events
Equipment-related backwash strainer water	
List each outfall discharging any combination of the following related cooling water, equipment and floor drain water, mainten strainer water, and facility maintenance-related water during floor.	to identify the combined discharges: equipment-

and continue the sequential numbering. Attach additional sheets to identify outfalls as needed.

## Rollinsford Hydroelectric Project Rollinsford, NH

SALMON FALLS RIVER OUTFALL 002 TAILRACE OUTFALL 001 FLOOR DRAIN (<1 GPM) Notice of Intent Attachment 1 GPM, INTERMITTENT) GPM,INTERMITTENT) **TURBINE PIT 1 (20 TURBINE PIT 2 (20** TWO TURBINES (228 CFS EACH) FOR UNIT 2 (1 GPM) FOR UNIT 1 (1 GPM) PACKING WATER PACKING WATER NTAKE

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