1. General facility information. Please provide the following information about the facility.

a) Name of facility: Bear Swamp Substation	**Mailing Address for the Facility:** 40 Sylvan Road, E3687 Waltham, MA 02451	
b) Location Address of the Facility (if different from mailing address): Tunnel Road Rowe, MA 01367	**Facility Location** **longitude:** -72.9495 **latitude:** 42.6839	**Type of Business:** Electrical substation **Facility SIC codes:** 4911

c) Name of facility owner: New England Power Company **Owner's email:** andrea.agostino@nationalgrid.com **Owner's Tel #:** (781) 907-3649 **Owner's Fax #:** _____ **Address of owner (if different from facility address)**

40 Sylvan Road, E3687
Waltham, MA 02451

Owner is (check one): 1. Federal____2. State _____ 3. Private_____ 4. Other __X___(Describe) Electric Utility Company

Legal name of Operator, if not owner: Same as owner

Operator Contact Name: _____

Operator Tel Number: _____ **Fax Number:** _____

Operator's email: _____ _____

Operator Address (if different from owner)

- **d) Attach a topographic map indicating the location of the facility and the outfall(s) to the receiving water. Map attached? _X___**

e) Check Yes or No for the following:

1. **Has a prior NPDES permit been granted for the discharge? Yes _____ No_X__ If Yes, Permit Number: _____**
2. **Is the discharge a "new discharger" as defined by 40 CFR Section 122.2? Yes__X___ No_____**
3. **Is the facility covered by an individual NPDES permit? Yes_____ No__X__If Yes, Permit Number _____**
4. **Is there a pending application on file with EPA for this discharge? Yes _____ No __X___ If Yes, date of submittal:**

2. Discharge information. Please provide information about the discharge, (attaching additional sheets as needed)

a) Name of receiving water into which discharge will occur: _Steele Brook_____
State Water Quality Classification: Class B **Freshwater:** ___Yes__ **Marine Water:** _____

b) Describe the discharge activities for which the owner/applicant is seeking coverage:

1. **Construction dewatering of groundwater intrusion and/or storm water accumulation.**
2. **Short-term or long-term dewatering of foundation sumps.**
3. **Other.**

c) Number of outfalls _1__

For each outfall:

d) Estimate the maximum daily and average monthly flow of the discharge (in gallons per day – GPD). Max Daily Flow ____8,700 **GPD Average Monthly Flow** __1,000__ **GPD**

e.) What is the maximum and minimum monthly pH of the discharge (in s.u.)? Max pH _8.5 s.u._ **Min pH** _6.5 s.u.___

f.) Identify the source of the discharge (i.e. potable water, surface water, or groundwater). If groundwater, the facility shall submit effluent test results, as required in Section 4.4.5 of the General Permit. – Groundwater – Lab Data Attached

g.) What treatment does the wastewater receive prior to discharge? An oil water separator will be installed at the last manhole before discharge.

h.) Is the discharge continuous? Yes _____ No ___X___ If no, is the discharge periodic (P) (occurs regularly, i.e., monthly or seasonally, but is not continuous all year) or intermittent (I) (occurs sometimes but not regularly) or both (B) ____B____

If (P), number of days or months per year of the discharge_____ and the specific months of discharge _ _____; If (I), number of days/year there is a discharge _____

Is the discharge temporary? Yes _____ No___X___

If yes, approximate start date of dewatering _3/30/17___ **approximate end date of dewatering** ___N/A_____

i.) Latitude and longitude of each discharge within 100 feet (See http://www.epa.gov/tri/report/siting_tool): Outfall 1: long. -72.949523°_ **lat.**__42.684800° ;

j.) If the source of the discharge is potable water, please provide the reported or calculated seven day-ten year lowflow(7Q10) of the receiving water and attach any calculation sheets used to support stream flowand dilution calculations ___N/A - Not Potable Water

(See Appendix VII for equations and additional information)

MASSACHUSETTS FACILITIES: See Section 3.4 and Appendix 1 of the General Permit for more information on Areas of Critical Environmental Concern (ACEC):

k.) Does the discharge occur in an ACEC? Yes _____ No__X__
If yes, provide the name of the ACEC: _____

3. Contaminant Information

a) Are any pH neutralization and/or dechlorination chemicals used in the discharge? If so, include the chemical name and manufacturer; maximum and average daily quantity used 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 aquatic organism(s)). – No

b) Please report any known remediation activities or water-quality issues in the vicinity of the discharge. - None known

4. Determination of Endangered Species Act Eligibility: Provide documentation of ESA eligibility as required at Part 3.4 and Appendix IV. In addition, respond to the following questions.

a) Which of the three eligibility criteria listed in Appendix IV, Criterion (A, B, or C) have you met? ___A_____
b) Please attach documentation with your NOI supporting your response. Please see Appendix IV for acceptable documentation

5. Documentation of National Historic Preservation Act requirements: Please respond to the following questions:

a) See Screening Process in Appendix III and respond to questions regarding your site and any historic properties listed or eligible for listing on the National Register of Historic Places. Question 1: Yes __X__ No _____ ; Question 2: No __X___ Yes _____

b) Have any State or Tribal historic preservation officers been consulted in this determination? Yes _____ or No __X__ If yes, attach the results of the consultation(s).

c) Which of the three National Historic Preservation Act eligibility criterion listed in Appendix III, Criterion (A, B, or C) have you met? ___B_____

d) Is the project located on property of religious or cultural significance to an Indian Tribe? Yes _____ or No __X_ If yes, provide that name of the Indian Tribe associated with the property. _____

6. Supplemental Information: Please provide any supplemental information. Attach any analytical data used to support the application. Attach any certification(s) required by the general permit. – See Appendices

7. 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 (1) no biocides or other chemical additives except for those used for pH adjustment and/or dechlorination are used in the dewatering system; (2) the discharge consists solely of dewatering and authorized pH adjustment and/or dechlorination chemicals; (3) the discharge does not come in contact with any raw materials, intermediate product, water product or finished product; (4) if the discharge of dewatering subsequently mixes with other permitted wastewater (i.e. stormwater) prior to discharging to the receiving water, any monitoring provided under this permit will be only for dewatering discharge; (5) where applicable, the facility has complied with the requirements of this permit specific to the Endangered Species Act and National Historic P reservation Act; and (6) 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.

Facility Name: Bear Swamp Substation

Operator signature: Charl Willard

Print Full Name and Title: Charles Willard, Authorized Representative

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.**

APPENDIX B

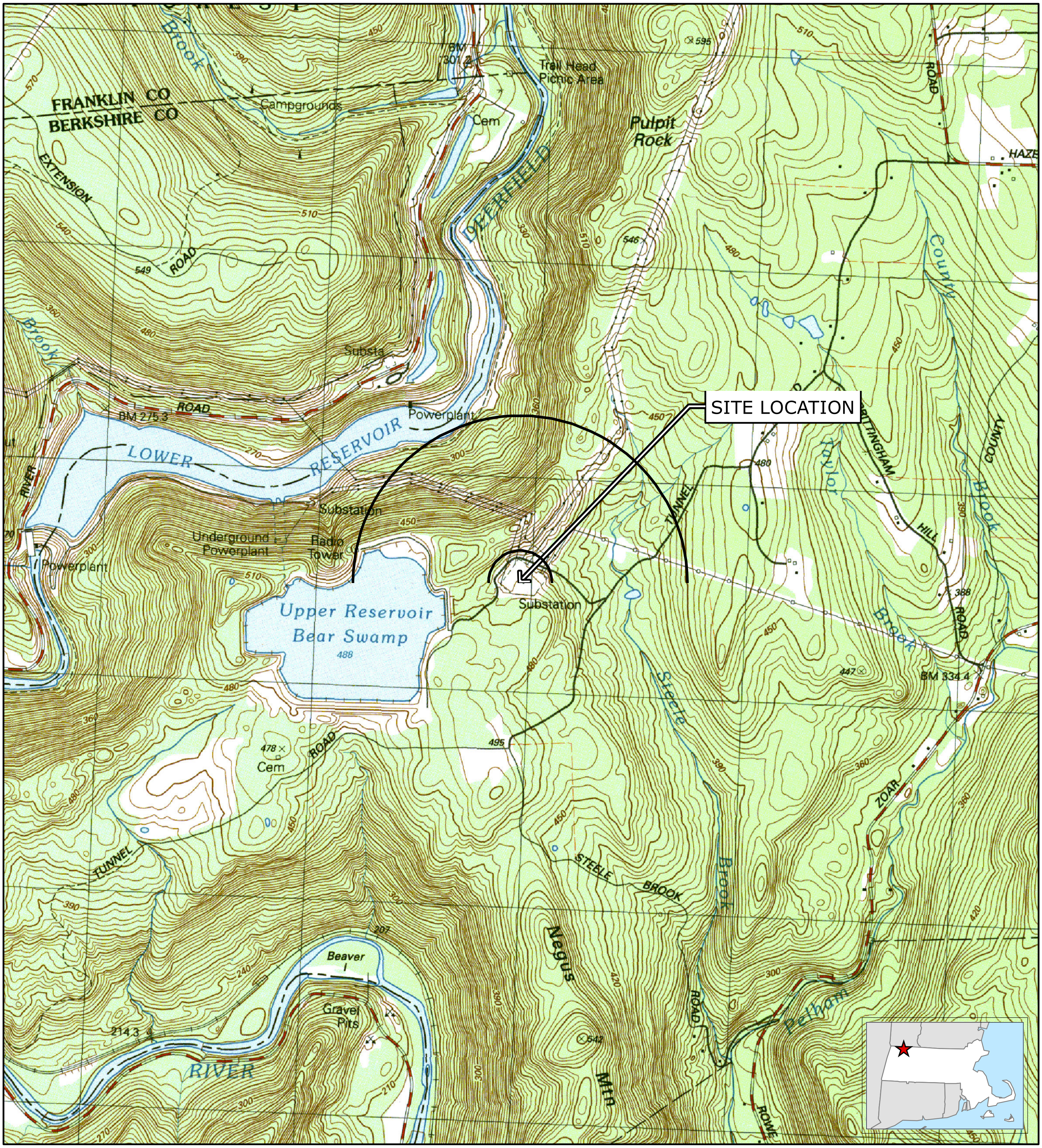

FIGURE 1
SITE LOCATION

Bear Swamp Substation
Rowe, Massachusetts

November 2016

Tighe&Bond
Engineers | Environmental Specialists

Based on USGS Topographic Map for
Rowe, MA Revised 1990.
Contour Interval Equals 6-Meter.
Circles indicate 500-foot and half-mile radii

1:24,000
0 1,000 2,000
Feet

N

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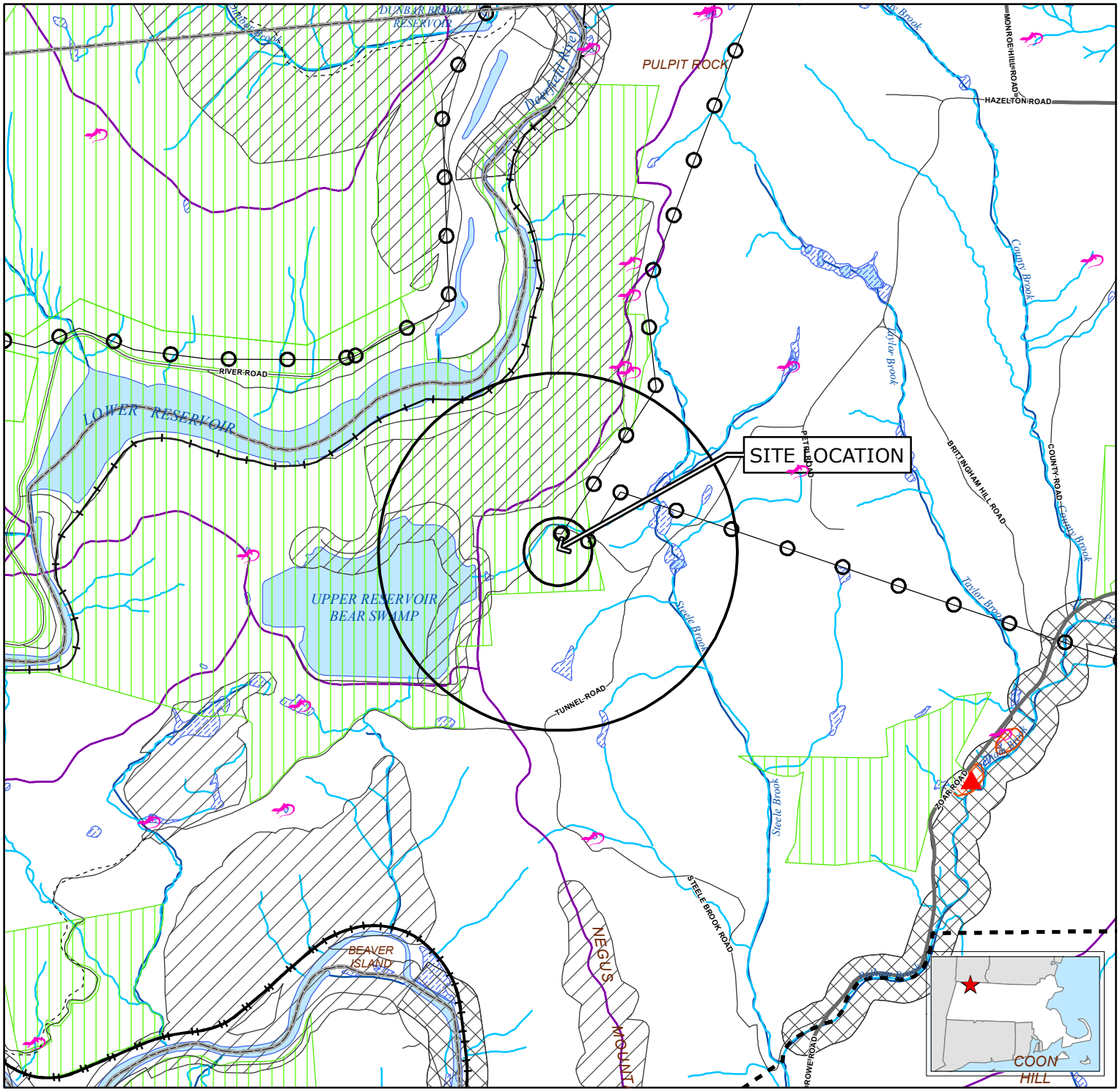

Legend

- NHESP Certified Vernal Pools
- NHESP Potential Vernal Pools
- Non-Landfill Solid Waste Sites
- Community Public Water Supply - Surface Water
- Community Public Water Supply - Groundwater
- Non-Community Non-Transient Public Water Supply
- Non-Community Transient Public Water Supply
- Limited Access Highway
- Multi-Lane Highway, NOT Limited Access
- Other Numbered Highway
- Major Road - Collector
- Minor Street or Road
- Aquaducts
- Hydrologic Connections
- Powerline
- Pipeline
- Track or Trail
- Trains
- Stream/Intermittent Stream
- Public Surface Water Supply Protection Area (Zone A)
- DEP Approved Wellhead Protection Area (Zone I)
- DEP Approved Wellhead Protection Area (Zone II)
- DEP Interim Wellhead Protection Area (IWPA)
- Protected and Recreational Open Space
- Solid Waste Landfill
- Area of Critical Environmental Concern (ACEC)
- NHESP Priority Habitats for Rare Species
- NHESP Estimated Habitats for Rare Wildlife
- EPA Designated Sole Source Aquifer
- Major Drainage Basin
- Sub Drainage Basin
- Inland Wetlands
- Coastal Wetlands
- Public Surface Water Supply (PSWS)
- Water Bodies
- Non-Potential Drinking Water Source Area - High Yield
- Non-Potential Drinking Water Source Area - Medium Yield
- Potentially Productive Medium Yield Aquifer
- Potentially Productive High Yield Aquifer
- County Boundary
- Town Boundary
- USGS Quadrangle Sheet Boundary

1:24,000

0 1,000 2,000

Feet

N

FIGURE 2
PRIORITY RESOURCES

Bear Swamp Substation
Rowe, Massachusetts

Data source: Office of Geographic Information (MassGIS), Commonwealth of Massachusetts, MassIT) Executive Office of Environmental Affairs.
Circles indicate 500-foot and half-mile radii.
Data valid as of November 2016.

November 2016

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FIGURE 4
SITE PLAN

LEGEND

- Pipe Outlet
- Culvert
- Bank
- Wetland Boundary
- 100 ft Buffer Zone
- Wetland Area
- Possible Phase 2 Subsurface Drainage Location
- Proposed Subsurface Drainage (8" Diameter)
- 10' Contours
- Existing Fence Line
- Stream Center Line
- Soil Stabilization Area
- Direction of Flow

LOCUS MAP

N

0 50 100
Feet
1:1,200

NOTES

1. Based on MassGIS Color Orthophotography (2014)

Bear Swamp Substation
Rowe, Massachusetts

November 2016

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