

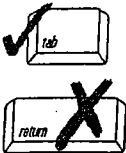
NOTICE OF INTENT

For Coverage Under the NPDES General Permit for Storm Water Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)



A. Instructions

Important:
When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.



Submission of this Notice of Intent constitutes notice that the entity named at item B1. of this form intends to be authorized by the NPDES General Permit issued by EPA for storm water discharges from the small municipal separate storm sewer system (MS4), in the location identified at item B2. of this form. Submission of the Notice of Intent also constitutes notice that the party identified at item B1. has read, understands and meets the eligibility conditions of Part I.B. of the NPDES Small MS4 General Permit, agrees to comply with all applicable terms and conditions of the NPDES Small MS4 General Permit, and understands that continued authorization to discharge is contingent on maintaining eligibility for coverage. **In order to be granted coverage, all of the information required on this Notice of Intent form and the separate Storm Water Management Program (SWMP) Implementation Schedule form (Excel Spreadsheet), must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a storm water management program.**

B. Applicant Information

1. Small MS4 Operator/Owner Information:

CITY OF PORTSMOUTH

Name

1 JUNKINS AVENUE

Mailing Address

PORTSMOUTH

City/Town

NH

State

603-431-2000

Telephone Number

Email (if available)

2. Municipality Name

CITY OF PORTSMOUTH

City/Town

3. Legal Status:

☐ Federal

☒ City/Town

☐ State

☐ County

☐ Private

☐ Other public entity:

Specify Public Entity

4. Other regulated MS4(s) within municipal boundaries:

Not Applicable

5. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for "listed species" and critical habitat been met?

☐ yes

☒ pending

☐ no

JUL 30 2003

MUNICIPAL ASSISTANCE UNIT

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B. Applicant Information (cont.)

6. Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for protection of historic properties been met?

☐ yes ☒ pending ☐ no

C. Names of (Presently Known) Receiving Waters

Note:
Section C may
be duplicated to
accommodate a
larger list of
receiving waters

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
<u>Piscataqua River</u> Name	<u>±78</u> Number	☒ Yes ☐ No	<u>Fecal Bacteria</u> Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify
_____ Name	_____ Number	☐ Yes ☐ No	_____ Specify

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D. Storm Water Management Program Summary

1. Public Education: See Attached Spreadsheet

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

2. Public Participation: See Attached Spreadsheet

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

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Responsible Dept./Person Name

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BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

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D. Storm Water Management Program Summary (Cont.)

3. Illicit Discharge Detection and Elimination: See Attached Spreadsheet

BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

4. Construction Site Runoff Control: See Attached Spreadsheet

BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID #		
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

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D. Storm Water Management Program Summary (Cont.)

5. Post Construction Runoff Control: See Attached Spreadsheet

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

6. Municipal Good Housekeeping: See Attached Spreadsheet

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

Responsible Dept./Person Name

Specify Measurable Goal

BMP ID #

Specify Best Management Practice

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D. Stormwater Management Program Summary (cont.)

7. BMPs for Meeting Requirements of Part I.C. (Discharges to Water Quality Impaired Waters) and Part I.D. (Total Maximum Daily Load Allocations): See Attached Spreadsheet

BMP ID # _____

Specify Best Management Practice _____

Responsible Dept./Person Name _____

Specify Measurable Goal _____

BMP ID # _____

Specify Best Management Practice _____

Responsible Dept./Person Name _____

Specify Measurable Goal _____

BMP ID # _____

Specify Best Management Practice _____

Responsible Dept./Person Name _____

Specify Measurable Goal _____

BMP ID # _____

Specify Best Management Practice _____

Responsible Dept./Person Name _____

Specify Measurable Goal _____

BMP ID # _____

Specify Best Management Practice _____

Responsible Dept./Person Name _____

Specify Measurable Goal _____

E. 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 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 am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

John P. Bohenko

Printed Name

Signature

John P. Bohenko
City Manager

7/28/03
Date

Stormwater Management Program Summary

Best Management Practice	Actions	Responsible Person	Measurable Goal
Public Education and Outreach:			
A Conduct Outreach Activities	Develop Web-based Annual Newsletter	DPW/Tom Richter	Post on City's Webpage
B	Present Annual Report to City Boards	Planning/Peter Britz	Televised on Local Cable Access
C	Continue to Support Stormwater Stenciling Initiatives through the School System and Community	DPW/Tom Richter	Report Number of Stenciled Structures
D	Develop Informational Video	DPW/Tom Richter	Televised on Local Cable Access
Public Participation:			
E Support Current and Future Public Input	Continue Supporting Neighborhood Cleanup Initiatives	DPW/Tom Richter	Increased Public Involvement
F	Continue Public Hearing Sessions at Land Use Boards	Planning/Peter Britz	Increased Public Involvement
G	Review Existing Committees	DPW/Tom Richter	Increased Public Involvement
Illicit Discharge Detection & Elimination:			
H Map Existing Drainage Systems & Outfalls	Create GIS Coverage	DPW/Jason Wise	Creation of Stormwater Maps
I Investigate Non-Stormwater Discharges	Investigate Outfalls During Dry Weather	DPW/Paula Anania	Identification of Potential Polluters
J Develop and Implement Plan to Detect and Address Non-Stormwater Discharges	Investigate Existing Regulatory Mechanisms	DPW/Jason Wise	List of Pertinent Ordinances
K	Develop Mapping, Training, and Reporting Protocols	DPW/Jason Wise	Creation of Detection Process
Construction Site Stormwater Runoff Control:			
L Develop Ordinance for Erosion & Sediment Controls	Review Existing Controls	Planning/Peter Britz	Creation of Stormwater Ordinances
M Creation of Standard Details for Erosion Controls	Review Existing Details	DPW/David Desjosses	AutoCAD Files
N Evaluate the Current Site Plan Review Procedure	Review Existing Ordinances	Planning/Peter Britz	Compare with Planning Board Rules
O	Enforce New Ordinance	Zoning/Jason Page	Demonstrated Compliance
Post-Construction Runoff Controls:			
P Develop Ordinance to Address Post-Construction Runoff	Review Existing Ordinances	Planning/Peter Britz	Enforcement of Post-Construction
Good Housekeeping:			
Q Employee Training in Stormwater BMPs	Conduct Training Sessions	DPW/Tom Richter	Log of Training Sessions
R Catch Basin Cleaning	Continue Clean Catch Basins	DPW/Everett Kern	Log of Cleaning Activities
S Sweep Streets	Continue Sweeping Streets	DPW/Everett Kern	Log of Streets Swept
T Hold HHW Collection Events Annually	Continue Holding Events	DPW/Silke Paula	Quantity Diverted Waste
U Calibrate Salt/Sand Spreaders	Continue Calibrations	DPW/Larry Forkum	Log of Calibrations
V Prepare Annual Stormwater Report	Prepare Report Once Per Year	DPW/Tom Richter	Send to USEPA & NHDES
BMPs for Meeting Requirements of Part 1.G. and Part 1.D.:			
W Storm/Sanitary Sewer Separation	Separation of Sanitary and Storm Sewers	DPW/Peter Rice	Linear Feet of Separated Sewers
X Upgrades to Sewage Pump Stations	Equipment and Operational Upgrades	DPW/Peter Rice	Increased Pumping and Treatment of Sewage

