### Dear Applicant:

Section 46-12-15(b) of the Rhode Island General laws of 1956, Title 46, Chapter 12 entitled Water Pollution, as amended, prohibits the discharge of pollutants into waters of the State. The only exceptions are discharges in compliance with the terms and conditions of a Rhode Island Pollutant Discharge Elimination System (RIPDES) Permit issued in accordance with State Regulations.

Rule 31 of the RIPDES Regulation, as amended on February 5, 2003, requires all discharges of Storm Water from regulated Small Municipal Separate Storm Sewer Systems (MS4s) and municipal owned facilities with associated Industrial Activity to obtain permit coverage. To request authorization under the General Permit for Storm Water Discharge from Small Municipal Separate Storm Sewer Systems (MS4s) and from Industrial Activity at Eligible Facilities Operated by Regulated Small MS4s, applicants must follow the submission requirements under Part I.C of the permit.

Enclosed with this letter is a copy of the General Permit, NOI form and NOI instructions and implementation scheduling guidance. The complete NOI package can be downloaded at: http://www.state.ri.us/dem/programs/benviron/water/permits/ripdes/stwater/index.htm. Provided all the required information is submitted and it is determined that a General Permit is appropriate, authorization will be granted in accordance with Part 1.C.3 of this permit. The General Permit expires at midnight December 19, 2008.

Return the completed NOI form and Storm Water Management Program Plan (SWMPP) or SWMPP amendments to:

RIDEM - Office of Water Resources RIPDES Program - Permitting Section 235 Promenade Street Providence, RI 02908

Any questions about the General Permit or the NOI form should be directed to the RIPDES Program Staff, Permitting Section at (401) 222-4700 ext. 7605 or 7265.

Sincerely,

Eric A. Beck, P.E. Supervising Engineer RIPDES Program

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# RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Office of Water Resources

DEM USE ONLY				
Date NOI Rece	eived			
Date Fee Received				
RIPDES#	RIR040			

## RI POLLUTANT DISCHARGE ELIMINATION SYSTEM (RIPDES) NOTICE OF INTENT (NOI)

STORM WATER GENERAL PERMIT FOR SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS AND INDUSTRIAL ACTIVITY AT ELIGIBLE FACILITIES OPERATED BY REGULATED SMALL MS4s (Revised 11/03)

MARK ONLY ONE ITEM	☐ New Application		☐ Change of Information		
I. COORDINAT	TOR OF STORM WATER MANAGE	EMENT PROGRAM	vi		
Name:					
Mailing Addres	SS:				
City:		State:	Zip:	Phone: ( )	
Fax : ( )		E-mail address	S:		
Contact Perso	n:	Title:	Title:		
		<u> </u>			
II. OPERATOR	OF MS4				
Name:					
Mailing Addre	ess:				
City:		State:	Zip:	Phone: ( )	
Contact Perso	n:	Title:			
Legal status (p PRI - Private Other (please		PP - Public/Private	STA - State	e FED - Federal	
··· • • • • • • • • • • • • • • • • • •					
	F MS4 (if different from OPERATO	)R)			
Name:					
Mailing Addres	38:			,	
City:		State:	Zip:	Phone: ( )	
Contact Perso	n:	Title:			

### IV. DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY - FACILITY INFORMATION

Facility Name:					
Street Address:					
City:		State:	Zip:	Phone:	
Facility Operator Name:					
Mailing Address:					
City:		State:	Zip:	Phone: ( )	
Primary 4-Digit Standard Industrial Class	ification (SI	C) code:			
Receiving Water Information:					
☐ Surface Water Body	Name:			_	
☐ Separate Storm Sewer System	Name:				
Ultimate Receiving Water I	Name:				
*NOTE- For each facility seeking coverage under the RIPDES Storm Water General Permit, a separate "Facility Information" (Section IV) must be completed. Additional sections are provided in NOI Addendum A. Though, only one "Facility Information" should be completed for coverage of all activities at each facility.  V. CERTIFICATION					
I certify under penalty of law that this document and all attachments were prepared under the 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.  Print Name					
Print Title					
Signature				Date	

### NOTICE OF INTENT (NOI): ADDENDUM A

STORM WATER GENERAL PERMIT FOR SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS AND INDUSTRIAL ACTIVITY AT ELIGIBLE FACILITIES OPERATED BY REGULATED SMALL MS4s

IV. DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY - ADDITIONAL FACILITY INFORMATION

Facility Name:				
Street Address:				
City:		State:	Zip:	Phone:
Facility Operator Name:				
Mailing Address:				
City:		State:	Zip:	Phone: ( )
Primary 4-Digit Standard Industrial Cla	ssification (S	IC) code:		
Receiving Water Information:				
☐ Surface Water Body	Name:			
☐ Separate Storm Sewer System	Name:			
Ultimate Receiving Water	Name:			<del></del>
W DISCHARCES ASSOCIATED WITH		I ACTIVITY A	DDITIONAL FACIL	ITY INCORMATION
V. DISCHARGES ASSOCIATED WITH	I INDUSTRIA	AL ACTIVITY - A	DDITIONAL FACIL	LITY INFORMATION
Facility Name:	INDUSTRIA	AL ACTIVITY - A	DDITIONAL FACIL	LITY INFORMATION
	I INDUSTRI <i>A</i>	AL ACTIVITY - A	DDITIONAL FACIL	LITY INFORMATION
Facility Name:	I INDUSTRI <i>A</i>	State:	Zip:	Phone:
Facility Name: Street Address:	I INDUSTRI <i>A</i>		T	
Facility Name: Street Address: City:	1 INDUSTRIA		T	
Facility Name: Street Address: City: Facility Operator Name:	I INDUSTRIA		T	
Facility Name: Street Address: City: Facility Operator Name: Mailing Address:		State:	Zip:	Phone:
Facility Name: Street Address: City: Facility Operator Name: Mailing Address: City:		State:	Zip:	Phone:
Facility Name: Street Address: City: Facility Operator Name: Mailing Address: City: Primary 4-Digit Standard Industrial Cla	assification (S	State: State:	Zip:	Phone: Phone: ( )
Facility Name: Street Address: City: Facility Operator Name: Mailing Address: City: Primary 4-Digit Standard Industrial Cla	ssification (S	State: State:	Zip:	Phone:  Phone: ( )



#### RHODE ISLAND DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Office of Water Resources



INSTRUCTIONS FOR THE RHODE ISLAND POLLUTANT DISCHARGE ELIMINATION SYSTEM (RIPDES)

NOTICE OF INTENT (NOI) - STORM WATER GENERAL PERMIT FOR SMALL MUNICIPAL SEPARATE STORM
SEWER SYSTEMS AND INDUSTRIAL ACTIVITY AT ELIGIBLE FACILITIES OPERATED BY
REGULATED SMALL MS4s

## Who Must submit a Notice of Intent (NOI) Form and a Storm Water Management Program Plan (SWMPP)

Discharges of storm water from small municipal separate storm sewer systems and industrial activities at eligible facilities operated by regulated small MS4s to a water body of the State of Rhode Island are prohibited without a Rhode Island Pollutant Discharge Elimination System (RIPDES) permit. If you have questions about whether you need a permit under the RIPDES Storm Water program contact the Rhode Island Department of Environmental Management (RIDEM), Office of Water Resources, Permitting Section at (401) 222-4700.

A completed NOI form and a SWMPP must be submitted in accordance with Part I.C.2 of the General Permit. The NOI and SWMPP must be sent to:

RIDEM - Office of Water Resources RIPDES Program - Permitting Section 235 Promenade Street Providence, RI 02908

#### **Completing the Form**

You must type or print in the appropriate areas only. Abbreviate if necessary to save space. Please be sure to keep a copy for your files.

## Section I – Coordinator of Storm Water Management Program

Provide the name and enter the complete mailing address, phone and fax numbers, and e-mail address of the person responsible for the overall coordination of the storm water management program.

#### Section II - Operator of MS4

Give the legal name of the person, firm, public (municipal) organization, or any other entity that has day-to-day operations of the MS4 described in this application (RIPDES Rules 3 & 12). Enter the complete address and telephone number of the operator. Circle the appropriate choice to indicate the legal status of the operator of the MS4.

#### Section III - Owner of MS4

If the owner is the same as the operator do not complete this section. Give the legal name of the person, firm, public (municipal) organization, or any other entity that owns the MS4 described in this application (RIPDES Rules 3 & 12). Do not use a colloquial name. Enter the complete address and telephone number of the owner.

#### Section IV - Facility Information

Enter the official or legal name of the facility, the complete address, and telephone number. Also include the facility operators name, mailing address and telephone number. List the primary 4-digit Standard Industrial Classification (SIC) code that best describes the principal products/service provided at the facility indicated in this section. If the facility discharges storm water directly to a surface water body check the box and enter the name of the receiving water. If the storm water discharges to a separate storm sewer system check the box and enter the name of the ultimate receiving water.

#### Section V - Certification

State and federal statutes provide for severe penalties for submitting false information on this application form. State and federal regulations require this application to be signed as follows (RIPDES Rule 12):

For a corporation: by a responsible corporate officer, which means: (i) president, secretary, treasurer, or vicepresident of the corporation in charge of a principal business function, or any other person who performs similar policy or decision making functions, or (ii) the manager of one or more manufacturing, production, or operating facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility including having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken to gather complete and accurate information or permit application requirements; and where authority to sign documentation has been assigned or delegated to the manager in accordance with cooperate procedures;

For a partnership or sole proprietorship: by a general partner or the proprietor;

For a Municipality, State, Federal or other public site: by either a principal executive officer or ranking elected official.

#### Addendum A – Additional Facility Information

For each facility seeking coverage under the RIPDES Storm Water General Permit, a separate "Facility Information" (Section IV) must be completed in Addendum A.