

DRAFT

MUNICIPAL SEPARATE STORM SEWER SYSTEMS NOTICE OF INTENT (MS4 NOI)

FOR COVERAGE UNDER THE STATE OF MISSISSIPPI'S GENERAL STORM WATER PERMIT FOR DISCHARGES ASSOCIATED WITH SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS (MS4s)

This Notice of Intent (NOI) covers regulated Small Municipal Separate Storm Sewer Systems (MS4s). The Mississippi Department of Environmental Quality (MDEQ) in accordance with federal regulations has identified the regulated MS4s. **Do not apply for coverage under the Phase II Municipal Permit unless you have been notified by MDEQ.**

Submission of this application constitutes notice that the entity identified in Item 1 of this form agrees to comply with all applicable terms and conditions of the Small MS4 General Permit (MSRMS4). Furthermore, the applicant understands that implementation of the storm water management program areas as described in the application is required to begin as soon as permit coverage is issued by MDEQ.

NOI Due Dates: For those MS4s automatically designated pursuant to 40 CFR 122.32(a)(1), the owner or operator of the MS4 shall submit a NOI by March 10, 2003. For those MS4s designated by MDEQ pursuant to 40 CFR 122.32(a)(2) the owner or operator of the MS4 shall submit a NOI within 180 days of MDEQ notification, or March 10, 2003, whichever is later.

NOI Completeness: All items of the NOI, including attachments, must be completed **accurately and in their entirety** or the NOI will be deemed incomplete, and processing of the NOI will not begin until all information is received. One original copy of the completed NOI (no faxes) shall be submitted to:

Chief, Environmental Permits Division
Mississippi Department of Environmental Quality, Office of Pollution Control
P.O. Box 2261
Jackson, Mississippi 39225-2261

Joint NOIs: Submit one copy. The final submittal package should also include one copy of the joint attachments per applicant.

If you have questions about this NOI, please contact the MDEQ at (601) 961-5171.

INSTRUCTIONS

- Item 1. **MS4 Identification:** Provide the name and address of the MS4 (the city, town, county or district), local contact, and mailing address. Indicate the status as a city, county or other public entity. If available, include the email addresses of the local contact, and the legally responsible person (the person who signs the application – see Item 8).
- Item 2. **Location Description:** Provide a narrative description of the geographical location of the MS4, including city or town (this is especially important for systems at military bases and large education, hospital or prison complexes, and special districts and associations).
- Item 3. **Location Map:** A location map for the MS4 (hard copy only) must be submitted. The boundaries of permit coverage must be indicated. (This information is also necessary in order to complete Items 4 and 6.) For enforcement purposes, the map must be of sufficient detail so that the exact boundaries, by street or other demarcation, can be determined. This information is available from the US Census Bureau.

The map must show the city, town, county, district boundaries or service area, as applicable. Counties must also indicate the unincorporated area boundaries. For any MS4s that are partially within an urbanized area, the location map must show the urbanized area boundaries.

It is recommended to start with the portion of the USGS (U.S. Geological Survey) quadrangle map showing the MS4 area. These are available and easily obtainable for the entire state (call the Office of Geology 601-961-5523). Although not particularly current, they do provide a large amount of information for very little effort. You can then use the USGS map as a guide for preparing your location map, which will probably be more detailed. If alternative maps are used, they must be of sufficient scale so that individual property locations can be determined in relation to the urbanized area and the municipal boundaries. For MS4s such as universities and military bases the map should be of an appropriate scale to clearly indicate the property boundaries. Maps should be folded to 8½ x 11 inches.

- Item 4. **Receiving Waters:** Identify the named receiving waters within the MS4 permitted boundaries. Receiving waters are any waters of the State of Mississippi. These can also be obtained from USGS quad maps. In addition, list all 303(d) listed impaired waterbodies.
- Item 5. **Joint NOIs:** Two or more applicants may submit a joint application, i.e., a single submittal that addresses all program areas for each applicant. Each joint applicant must complete and submit their own MS4 NOI form. Each joint applicant will receive permit coverage and will be responsible and liable for program implementation in their area.
- Item 6. **Population:** Indicate the resident number of people living within the permitted area. For special districts such as hospitals, universities, military bases etc., indicate the average overnight population (i.e., how many people is the facility/entity designed for overnight accommodations?) If your permitted area is less than the total area of your MS4 you may estimate the population.

- Item 7. **Attachments:** A Storm Water Management Plan as required by Part IV of the General Permit for Small MS4s must be submitted. (If you are submitting a joint application, refer to Appendix A for additional requirements.) You should use the document entitled “Mississippi’s Phase II Small Municipal Separate Storm Sewer System (MS4) Guidance Manual” as a basis for program development, although using additional sources is strongly encouraged. The Guide is available at <http://www.deq.state.ms.us> or by calling 601-961-5171. MS4s for the three coastal counties should use the “Mississippi Gulf Coast Storm Water Management Toolbox” as well.
- Item 8. **NOI Certification:** The NOI must be signed to be considered complete. In all cases, it shall be signed as follows: in the case of a municipal, state, or other public agency, by either a principal executive officer, or ranking elected official.

APPENDIX A - JOINT MS4 NOI INSTRUCTIONS

Two or more MS4s may submit a joint NOI, i.e., a single submittal that addresses all program areas for each applicant. Program areas or sections of program areas may be performed jointly with another entity, or solely by another entity. Each applicant must fill out a MS4 NOI. The attachments may be jointly prepared, and the entire package jointly submitted. For filing purposes, one copy of the attachments is required per applicant.

- Item A. Indicate all of the entities that are applying jointly. Include your own agency on the first line.
- Item B. Indicate, for your MS4 only, which entities are responsible for carrying out which storm water program areas. If more than one entity is responsible (for either part of or the entire program area listed), check all boxes that are applicable. The numbers assigned to the entities in Item A correspond to the numbers along the top of the table.
- Item C. An Interlocal Agreement or the equivalent must be submitted, covering all program areas that will be implemented partly or entirely by another entity.

Program areas or sections of program areas that will be performed jointly with another entity, or solely by another entity, must be clearly indicated. For example, under the Public Education measure, it may state that “City A and City B will perform this program area jointly.” Or, “City A will perform this program area on behalf of Special District B and as per the attached Interlocal Agreement.”

**GENERAL PERMIT APPLICATION
STORMWATER DISCHARGES
ASSOCIATED WITH SMALL
MUNICIPAL SEPARATE STORM
SEWER SYSTEMS (MS4s)
(Permit No. MSRMS4)**



Please print or type. All items must be completed accurately and in their entirety or the application will be deemed incomplete and processing of the permit will not begin until all information is received. Please refer to the instructions for information about the required items. An original signature of the applicant is **required**.

1. Name and address of the MS4 applicant:

Name _____

Mailing Address _____

City, State and Zip Code _____

County _____

Phone Number (____) _____

Entity Type: County ☐ City/Town ☐ Other: _____

Local Contact (responsible for program implementation) _____

Title _____ Phone Number (____) _____

Email address (local contact) _____

Email address (legally responsible person) _____

2. Location of the MS4:

Location Description (narrative) _____

3. Location Map/Boundaries:

a. Where will the SWMP will be implemented?:

☐ Urbanized Area Only, or ☐ Entire Jurisdiction.

b. All entities except counties

Location map must be attached showing city, town, or district boundaries, and urbanized area (UA) boundaries, if part(s) of the MS4 is within a UA.

c. Counties only

Location map must be attached showing county boundaries, unincorporated area boundaries within the county, and urbanized area (UA) boundaries.

4. **Major receiving waters (state waters) within the permitted area:**

All 303(d) listed impaired waterbodies within the permitted area (cities and counties):

5. **Part of a Joint NOI?** No ☐ Yes ☐ If Yes, complete and attach Appendix A.

6. **Population:** _____

7. **Attachments.** Storm Water Management Plan as required by Part IV of the General Permit for Small MS4s. (See Appendix A for additional requirements for Joint Applicants.)

8. **Signature of Legally Responsible Person**

"I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment."

Signature of Applicant

Date Signed

Name (printed)¹

Title

¹ This NOI shall be signed according to the General Permit Part VI.E.

APPENDIX A – NOTICE OF INTENTS

A. Joint NOI

List all entities implementing entire control measures. Entities implementing a component of a control measure should be identified in the SWMP and not on the NOI (use additional pages as needed):

1. (Responsible Entity, MS4 in Item 1, page 2) _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

B. Entity Implementing Control Measure – Table 1

Storm Water Program Areas for MS4	Entities Implementing Control Measures (use numbers from Item A, above)							
	1	2	3	4	5	6	7	8
a. Public Education and Outreach								
b. Public Participation and Involvement								
c. Illicit Discharge Detection and Elimination								
d. Construction Site Storm Water Runoff Control								
e. Post-Construction Storm Water Management								
f. Pollution Prevention and Good Housekeeping for Municipal Operations								
g. Other _____								

- C. **Legal Agreement.** Attach a copy of the interlocal agreement, or equivalent, between the regulated MS4 identified in A. 1. above and the entity or entities responsible for implementing the control measure(s).