



To: Prospective Applicants for a Small Municipal Separate Storm Sewer System General Permit

Attached is a **Small Municipal Separate Storm Sewer System (MS4) General Permit Notice of Intent (NOI) MS4-G**, for a Louisiana Pollutant Discharge Elimination System (LPDES) permit, authorized under EPA’s delegated NPDES program under the Clean Water Act. To be considered complete, every item on the form must be addressed and the last page signed by an authorized company agent. If an item does not apply, please enter "NA" (for *not applicable*) to show that the question was considered.

Two sets (one original and one copy) of your **completed NOI**, each with a marked **U.S.G.S. Quadrangle map** or equivalent attached, should be submitted to:

Mailing Address:
Department of Environmental Quality
Office of Environmental Services
Post Office Box 4313
Baton Rouge, LA 70821-4313
Attention: Water Permits Division

Physical Address:
Department of Environmental Quality
Office of Environmental Services
602 N. Fifth Street
Baton Rouge, LA 70821
Attention: Water Permits Division

NOIs delivered to the Physical Address above MUST be placed in the drop box specifically for in-person deliveries. A LDEQ date stamp is provided at the drop box location if an additional copy/receipt is needed for your records.

Please be advised that completion of this NOI may not fulfill all state, federal, or local requirements for this operation.

According to La. R.S. 48:385, any discharge to a state highway ditch, cross ditch, or right-of-way shall require approval from:

Louisiana DOTD
Office of Highways
Post Office Box 94245
Baton Rouge, LA 70804-9245
(225) 379-1927

AND

Louisiana DHH
Office of Public Health
Post Office Box 629
Baton Rouge, LA 70821-4489
(225) 342-8093

A copy of the LPDES regulations found in LAC Title 33:Part IX may be obtained from the Department’s website at <http://deq.louisiana.gov/page/rules-regulations> or from the Office of the Secretary, Regulations Development Section, Post Office Box 4301, Baton Rouge, LA 70821-4303, telephone (225) 219-3981.

After review of the NOI and public notice, this Office will issue written notification to those applicants who are accepted for coverage under this general permit.

For questions concerning this NOI, please contact the Water Permits Division at (225) 219-3590. For help regarding completion of this NOI, please contact DEQ Outreach and Small Business Assistance at 1-800-259-2890.

Date _____
Agency Interest No. AI _____
LPDES Permit No. LAR _____

Please check: Initial Permit
 Permit Renewal
 Permit Modification

STATE OF LOUISIANA
DEPARTMENT OF ENVIRONMENTAL QUALITY
Office of Environmental Services, Water Permits Division
Post Office Box 4313
Baton Rouge, LA 70821-4313
Telephone: (225) 219-9371

LPDES NOTICE OF INTENT (NOI) TO DISCHARGE STORMWATER
ASSOCIATED WITH SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS
(Attach additional pages if needed.)

Submittal of this Notice of Intent (NOI) constitutes notice that the entity identified in Section I of this form requests authorization by LDEQ's Small MS4 LPDES General Permit for storm water discharges from a small municipal separate storm sewer system (MS4) in Louisiana. Submittal of the NOI also constitutes notice that the party identified in Section I of this form has read, understands, and meets the eligibility conditions of Part I.B. of the permit; agrees to comply with all applicable terms and conditions of the permit; understands that continued authorization under the permit is contingent on maintaining eligibility for coverage; and understands that the permittee is required to implement a storm water management program. In order to be granted coverage, all information required on this form must be completed. **Two copies of the completed NOI** (one original and one copy) should be mailed to the Water Permits Division at the above address.

The applicant is the municipality or governmental entity for which coverage is requested. Adjoining municipalities or governmental entities may be co-permittees by submitting a joint NOI (please see below for check box) per LAC 33:IX.2521.B.1. If necessary, attach additional sheets to provide the information in Sections I-VII for each entity. You may submit individual NOI applications for each co-permittee.

Please check box if this NOI is part of a joint application:

Please list co-permittees if any: _____

SECTION I - FACILITY INFORMATION

A. Permit is to be issued to the following:

1. Legal Name of Applicant/Owner _____
Mailing Address _____
Zip Code: _____
2. Name & Title of Contact Person _____
Phone _____ Fax _____ Email _____

B. Name and address of responsible representative who completed the NOI:

Name & Title _____

Company _____
Phone _____ Fax _____ Email _____
Address _____

SECTION II – LAC 33.I.1701 REQUIREMENTS

- A. Does the company or owner have federal or state environmental permits in other states that are identical to, or of a similar nature to, the permit for which you are applying? (This requirement applies to all individuals, partnerships, corporations, or other entities who own a controlling interest of 50% or more in your company, or who participate in the environmental management of the facility for an entity applying for the permit or an ownership interest in the permit.)
- Permits in Louisiana. List Permit Numbers: _____
- Permits in other states (list states): _____
- No other environmental permits.
- B. Do you owe any outstanding fees or final penalties to the Department? Yes No
- If yes, please explain. _____
- C. Is your company a corporation or limited liability company? Yes No
- If yes, is the corporation or LLC registered with the Secretary of State? Yes* No
- *If yes, attach a copy of your company’s Certificate of Registration and/or Certificate of Good Standing from the Secretary of State.**

SECTION III – SMALL MS4 SYSTEM INFORMATION

1. MS4 Name: _____
2. Regulated City(ies), Town(s) or unincorporated area(s): _____
- Coordinates: (provide the coordinates of the City Hall or municipal business office for the MS4)
- Latitude: ____deg. ____min. ____sec. Longitude: ____deg. ____min. ____sec.
- Method of Coordinate Determination: _____
(Quad Map, Previous Permit, website, GPS)
3. Population served by the MS4 System: _____
4. Indicate all water bodies to which the storm sewer system will discharge, to the extent currently known. Estimate the square miles of the MS4 service area. **Attach a USGS 7.5 minute topographic map (or equivalent) and identify all known discharge points (outfalls), receiving waters, and major control structures.** If all discharge points have not yet been identified, this information will become available when the MS4 mapping is complete. At that time, all discharge points must be identified in the Storm Water Management Plan.
- _____
- _____
- _____

SECTION IV – STORM WATER MANAGEMENT PLAN

Phase II MS4

**LDEQ Office of Environmental Services
Water Permits Division**

Required Information

Responsible Official(s):	Name and title of person or persons responsible for implementing or coordinating your storm water management program: Click here to enter text.
Telephone:	Click here to enter text.
Fax:	Click here to enter text.
Email:	Click here to enter text.
Presence of Co-permittee(s):	Are you relying on another governmental entity to satisfy any of your permit obligations? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list and describe: Click here to enter text.

If you are an existing permittee, please attach your SWMP; you will not need to complete Sections V and VI of this document. If you are a new applicant, you may either submit your SWMP or complete Sections V and VI on the following pages for each of the 6 Minimum Control Measures. You may provide the response to items V and VI in a separate document as an attachment to this NOI provided that the attachment fully addresses the 6 Minimum Control Measures and the Measurable Goals. Helpful information and a list of potential best management practices (BMPs) can be found at the EPA website <http://www.epa.gov/npdes/stormwater-discharges-municipal-sources> and the document Measurable Goals Guidance for Phase II Small MS4s is available for review at https://www.epa.gov/sites/production/files/2015-11/documents/measurablegoals_0.pdf.

SECTION V – BMPs USED TO FULFILL EACH MINIMUM CONTROL MEASURE

Select BMPs used in your program for each Minimum Control Measure by checking boxes in second column:

Minimum Control Measure 1. Public Education and Outreach on Storm Water Impacts

Citizen educator volunteers to staff a public education task force	<input type="checkbox"/>
Classroom education on storm water	<input type="checkbox"/>
Educational displays, pamphlets, booklets, and utility stuffers	<input type="checkbox"/>
Education on low-impact lawn and garden activities	<input type="checkbox"/>
Education on proper disposal of campground/recreational vehicle/marina waste	<input type="checkbox"/>
Education on proper disposal of household hazardous wastes	<input type="checkbox"/>
Education/outreach for commercial activities	<input type="checkbox"/>
Event participation (festivals, etc.) and distribution of educational materials	<input type="checkbox"/>
Low impact development (LID)	<input type="checkbox"/>
Pollution prevention education for businesses	<input type="checkbox"/>
Promotional giveaways	<input type="checkbox"/>

Proper pet waste management (for example: information, ordinances, signage)	<input type="checkbox"/>
Storm water educational materials	<input type="checkbox"/>
Tailoring outreach programs to target specific audiences and communities (for example: restaurants, garages, or individual home septic systems)	<input type="checkbox"/>
Trash management	<input type="checkbox"/>
Tributary signage to increase public awareness of local water resources	<input type="checkbox"/>
Using the media to get the message out (for example: public service announcements)	<input type="checkbox"/>
Water conservation practices for homeowners	<input type="checkbox"/>
Others (add text as needed): Click here to enter text.	<input type="checkbox"/>
<u>Minimum Control Measure 2. Public Involvement/Participation in Development and Implementation of Storm Water Program</u>	
Adopt-a-Road programs	<input type="checkbox"/>
Adopt-a-Storm Drain programs	<input type="checkbox"/>
Adopt-a-Stream programs or other volunteer organizations educating the public	<input type="checkbox"/>
Attitude surveys	<input type="checkbox"/>
Citizen complaint hotlines	<input type="checkbox"/>
Citizen panel meetings	<input type="checkbox"/>
Community cleanups	<input type="checkbox"/>
Educational programs conducted by volunteers	<input type="checkbox"/>
Reforestation programs	<input type="checkbox"/>
Stakeholder meetings	<input type="checkbox"/>
Storm drain stenciling	<input type="checkbox"/>
Stream cleanup and monitoring	<input type="checkbox"/>
Volunteer water quality monitoring	<input type="checkbox"/>
Watershed organization meetings	<input type="checkbox"/>
Wetland plantings	<input type="checkbox"/>
Others (add text as needed): Click here to enter text.	<input type="checkbox"/>
<u>Minimum Control Measure 3. Illicit Discharge Detection and Elimination</u>	
Citizen complaint hotline	<input type="checkbox"/>
Illegal dumping/illicit discharge hotline	<input type="checkbox"/>
Inspection and/or database tracking identifying failing septic systems	<input type="checkbox"/>
Inspection to identify industrial/business/household illicit connections of wastewater to the storm water drainage system	<input type="checkbox"/>
Recycling programs for commonly dumped wastes such as motor oil, antifreeze, pesticides	<input type="checkbox"/>
Sanitary sewer overflows	<input type="checkbox"/>

System to inform general public of hazards associated with illegal dischargers and improper disposal of waste	<input type="checkbox"/>
Others (add text as needed): Click here to enter text.	<input type="checkbox"/>
<u>Minimum Control Measure 4. Construction Site Storm Water Runoff Control</u>	
BMP inspection and maintenance	<input type="checkbox"/>
Brush barrier	<input type="checkbox"/>
Check dams	<input type="checkbox"/>
Chemical stabilization	<input type="checkbox"/>
Concrete washout areas	<input type="checkbox"/>
Construction entrance stabilization to prevent vehicle tracking	<input type="checkbox"/>
Construction sequencing	<input type="checkbox"/>
Construction site inspection by municipal inspectors	<input type="checkbox"/>
Contractor certification	<input type="checkbox"/>
Dust control	<input type="checkbox"/>
Erosion control blankets and anchoring devices	<input type="checkbox"/>
Filter berms	<input type="checkbox"/>
General construction site waste management	<input type="checkbox"/>
Geotextiles	<input type="checkbox"/>
Gradient terraces	<input type="checkbox"/>
Grass-lined channels	<input type="checkbox"/>
Land grading	<input type="checkbox"/>
Model ordinances	<input type="checkbox"/>
Mulching	<input type="checkbox"/>
Plan to prioritize construction sites for inspection by municipal inspectors	<input type="checkbox"/>
Requiring erosion/sediment control plans	<input type="checkbox"/>
Riprap	<input type="checkbox"/>
Sediment basins and rock dams	<input type="checkbox"/>
Sediment filters and sediment chambers	<input type="checkbox"/>
Sediment traps	<input type="checkbox"/>
Silt fence perimeter control	<input type="checkbox"/>
Sodding	<input type="checkbox"/>
Soil retention and stabilization	<input type="checkbox"/>
Soil roughening	<input type="checkbox"/>
Spill prevention and control plan	<input type="checkbox"/>

Storm drain inlet protection	<input type="checkbox"/>
Temporary diversion dikes	<input type="checkbox"/>
Temporary slope drain	<input type="checkbox"/>
Temporary stream crossings	<input type="checkbox"/>
Vegetated buffers	<input type="checkbox"/>
Wind fences and sand fences	<input type="checkbox"/>
Educational and training measures for construction site operators	<input type="checkbox"/>
Others (add text as needed): Click here to enter text.	<input type="checkbox"/>
<u>Minimum Control Measure 5. Post-construction Storm Water Management in New Development and Redevelopment</u>	
Alternative pavers	<input type="checkbox"/>
Alternative turnarounds	<input type="checkbox"/>
Alum injection	<input type="checkbox"/>
Bioretention	<input type="checkbox"/>
BMP inspection and maintenance	<input type="checkbox"/>
Buffer zones	<input type="checkbox"/>
Catch basins	<input type="checkbox"/>
Conservation easements	<input type="checkbox"/>
Dry extended-detention ponds	<input type="checkbox"/>
Elimination of curbs and gutters	<input type="checkbox"/>
Grassed filter strips	<input type="checkbox"/>
Grassed swales	<input type="checkbox"/>
Green parking	<input type="checkbox"/>
Infiltration basin	<input type="checkbox"/>
Infiltration trench	<input type="checkbox"/>
Infrastructure planning	<input type="checkbox"/>
In-line storage	<input type="checkbox"/>
Manufactured products for storm water inlets	<input type="checkbox"/>
Narrower residential streets	<input type="checkbox"/>
On-lot treatment of storm water	<input type="checkbox"/>
Open space design	<input type="checkbox"/>
Ordinances for post-construction runoff	<input type="checkbox"/>
Porous pavement	<input type="checkbox"/>
Sand and organic filters	<input type="checkbox"/>

Storm water wetland	<input type="checkbox"/>
Urban forestry	<input type="checkbox"/>
Wet ponds	<input type="checkbox"/>
Zoning: a planning process that identifies storm water program goals, strategies, operation and maintenance (O&M) policies and procedures, and/or enforcement strategies	<input type="checkbox"/>
Others (add text as needed): Click here to enter text.	<input type="checkbox"/>
<u>Minimum Control Measure 6. Pollution Prevention/Good Housekeeping for Municipal Operations</u>	
Alternative discharge options for chlorinated water	<input type="checkbox"/>
Alternative products	<input type="checkbox"/>
Animal carcass collection from roadways	<input type="checkbox"/>
Automobile maintenance	<input type="checkbox"/>
Hazardous materials storage	<input type="checkbox"/>
Illegal dumping control	<input type="checkbox"/>
Low impact landscaping and lawn care	<input type="checkbox"/>
Materials management	<input type="checkbox"/>
Parking lot and street cleaning	<input type="checkbox"/>
Pest control	<input type="checkbox"/>
Pet waste collection in public areas	<input type="checkbox"/>
Road salt application and storage	<input type="checkbox"/>
Roadway and bridge maintenance	<input type="checkbox"/>
Septic system controls	<input type="checkbox"/>
Spill response and prevention plans for municipal facilities	<input type="checkbox"/>
Storm drain system cleaning	<input type="checkbox"/>
Training program for grounds maintenance and landscaping crews	<input type="checkbox"/>
Used oil recycling	<input type="checkbox"/>
Vehicle washing	<input type="checkbox"/>
Operation and maintenance (O&M) program that has a goal of preventing or reducing pollutant runoff from municipal operations	<input type="checkbox"/>
Others (add text as needed): Click here to enter text.	<input type="checkbox"/>
<u>SECTION VI – MEASURABLE GOALS AND BMPs FOR IMPLEMENTATION OF EACH MINIMUM CONTROL MEASURE</u>	
For each BMP chosen, list clear and specific measurable goals with starting and ending dates (month and year) in which the MS4 operator began or will begin full implementation of each of the minimum control measures, list the interim milestones (timeframe and quantity to measure, if quantifiable), and provide the frequency of the action (add text as needed or attach separate sheet):	
<u>Minimum Control Measure 1. Public Education and Outreach on Storm Water Impacts</u>	

List measurable goals for each BMP with start and end dates, interim milestones, and frequency (add text as needed):

BMP PE1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PE2. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PE3. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PE4. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PE5. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PE6. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PE7. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PE8. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

Others (add text as needed):

Minimum Control Measure 2. Public Involvement and Participation in Development and Implementation of Storm Water Program

List measurable goals for each BMP with start and end dates, interim milestones, and frequency (add text as needed):

BMP PI1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PI2. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PI3. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PI4. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PI5. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PI6. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PI7. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

BMP PI8. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.

Others (add text as needed): Click here to enter text.

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

List measurable goals for each BMP with start and end dates, interim milestones, frequency, and maintenance activities with schedules (add text as needed):

BMP IDDE1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP IDDE2. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP IDDE3. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP IDDE4. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP IDDE5. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP IDDE6. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP IDDE7. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP IDDE8. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

Others (add text as needed): Click here to enter text.

Minimum Control Measure 4. Construction Site Storm Water Runoff Control

List measurable goals for each BMP with start and end dates, interim milestones, frequency, and maintenance activities with schedules (add text as needed):

BMP CONS1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP CONS2. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP CONS3. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP CONS4. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP CONS5. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP CONS6. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP CONS7. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP CONS8. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

Others (add text as needed): Click here to enter text.

Minimum Control Measure 5. Post-construction Storm Water Management in New Development and Redevelopment

List measurable goals for each BMP with start and end dates, interim milestones, frequency, and maintenance activities with schedules (add text as needed):

BMP POST1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP POST2. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP POST3. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP POST4. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP POST5. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP POST6. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP POST7. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP POST8. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

Others (add text as needed): Click here to enter text.

Minimum Control Measure 6. Pollution Prevention/Good Housekeeping for Municipal Operations

List measurable goals for each BMP with start and end dates, interim milestones, frequency, and maintenance activities with schedules (add text as needed):

BMP PP1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP PP1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP PP1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP PP1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP PP1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP PP1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP PP1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

BMP PP1. Insert BMP description: Click here to enter text.
Measurable Goal: Click here to enter text.
Person(s) or department(s) responsible: Click here to enter text.
Timeframe/milestones for implementation: Click here to enter text.
BMP maintenance activities and schedule: Click here to enter text.

Others (add text as needed): Click here to enter text.

**SECTION VI.A – IMPAIRED WATERBODIES AND TMDL INFORMATION
(Permit Part III)**

1. Does any subsegment within your MS4 boundaries fall under the most recent Integrated Report classification of 4a or 5 (see list at <https://www.deq.louisiana.gov/page/louisiana-water-quality-integrated-report>)? Yes No

2. If any of your MS4 subsegments are classified as Integrated Report Category 4a (*Impaired but TMDL Completed*) or 5 (*Impaired and requires a TMDL*) and if the Suspected Sources of Impairment (see Appendix A of the most recent Integrated Report) are municipal in origin (for example, *Sanitary Sewer Overflows, Discharges from Municipal Separate Storm Sewer Systems, Forced Drainage Pumping, Municipal (Urbanized High Density Area), Urban Runoff/Storm Sewers, Site Clearance, Construction, Wet Weather Discharge, Rural (Residential Areas) and Residential Districts*) you must document in your SWMP how the BMPs and other controls implemented will control the discharge of these pollutants (see Permit Part III.B; you may add text as needed).

2.a. MS4 Suspected Source of Impairment from Appendix A of Integrated Report:

Subsegment _____; BMP name and function: Click here to enter text.

Subsegment _____; BMP name and function: Click here to enter text.

Subsegment _____; BMP name and function: Click here to enter text.

<p>2.b. MS4 Suspected Source of Impairment from Appendix A of Integrated Report: Subsegment ____; BMP name and function: Click here to enter text. Subsegment ____; BMP name and function: Click here to enter text. Subsegment ____; BMP name and function: Click here to enter text.</p>
<p>2.c. MS4 Suspected Source of Impairment from Appendix A of Integrated Report: Subsegment ____; BMP name and function: Click here to enter text. Subsegment ____; BMP name and function: Click here to enter text. Subsegment ____; BMP name and function: Click here to enter text.</p>
<p>2.d. MS4 Suspected Source of Impairment from Appendix A of Integrated Report: Subsegment ____; BMP name and function: Click here to enter text. Subsegment ____; BMP name and function: Click here to enter text. Subsegment ____; BMP name and function: Click here to enter text.</p>
<p>2.e. MS4 Suspected Source of Impairment from Appendix A of Integrated Report: Subsegment ____; BMP name and function: Click here to enter text. Subsegment ____; BMP name and function: Click here to enter text. Subsegment ____; BMP name and function: Click here to enter text.</p>
<p>3. Has a TMDL been approved for any subsegment(s) in your MS4 (Integrated Report Cat. 4a)? Yes <input type="checkbox"/> No <input type="checkbox"/> If <u>Yes</u>, you must list any TMDL requirements (see 3.a below) in the SWMP that are applicable to MS4 discharges into the subsegments where TMDLs have been established (see Permit Parts III.B and IV.H 1-6; you may add text as needed). If there are none, please check this box: <input type="checkbox"/></p>
<p>3.a. Subsegment ____; TMDL requirements: Click here to enter text. Subsegment ____; TMDL requirements: Click here to enter text. Subsegment ____; TMDL requirements: Click here to enter text.</p>

SECTION VII – TOPOGRAPHIC MAP

Attach to this NOI a USGS 7.5 minute (1:24,000 scale) topographic map, or equivalent, of the MS4 service area with the known municipal storm sewer outfalls and any major control structures (retention or detention basins, infiltration devices, etc.) identified. Include on the map the area extending at least one mile beyond your service boundaries. The map must be attached to BOTH NOIs that are submitted to LDEQ (i.e., the original NOI and the copy of the NOI). Waterways and streets/highways must be clearly identified by name on the map. Appropriate maps can be obtained from local government agencies such as DOTD or the Office of Public Works. Maps can also be obtained online at deq.louisiana.gov/resources/category/make-a-map or www.topozone.com. Private map companies can also supply you with these maps. If you cannot locate a map through these sources you can contact the Louisiana Department of Transportation and Development at:

1201 Capitol Access Road
Baton Rouge, LA 70802
(225) 379-1107
maps@dotd.louisiana.gov

Alternatively, permit applicants may submit a drive containing the appropriate GIS layers, created using ESRI software, such as ArcMap.

SECTION VIII – DISCHARGE CHARACTERIZATION

Attach any existing quantitative data that characterizes the discharge. Depending upon availability, you should include:

1. Monthly mean rainfall estimates;
2. Measured or estimated volume of the discharges from the municipal storm sewer per inches of rain;
3. Quantitative data describing the quality of discharges from the municipal storm sewer, including the outfalls sampled, sampling procedures and analytical methods used; and
4. The results of any visual or analytical field screening at identified outfalls, including wet and dry weather screenings.

SECTION IX - SIGNATURE

According to the Louisiana Water Quality Regulations, LAC 33:IX.2503, the following requirements shall apply to the signatory page in this application:

Chapter 25. Permit Application and Special LPDES Program Requirements

2503. Signatories to permit applications and reports

A. All permit applications shall be signed as follows:

1. For a corporation - by a responsible corporate officer. For the purpose of this Section responsible corporate officer means:
 - (a) A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or
 - (b) The manager of one or more manufacturing, production, or operating facilities provided: the manager is authorized to make management decisions that 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 ensure long term environmental compliance with environmental laws and regulations; the manager can ensure that the necessary systems are established or actions taken together complete and accurate information for permit application requirements; and the authority to sign documents has been assigned or delegated to the manager in accordance with corporation procedures.

NOTE: LDEQ does not require specific assignments or delegations of authority to responsible corporate officers identified in the Permit **Standard Conditions, Section D.10.a.(1)(a)**. The agency will presume that these responsible corporate officers have the requisite authority to sign permit applications unless the corporation has notified the state administrative authority to the contrary. Corporate procedures governing authority to sign permit applications may provide for assignment or delegation to applicable corporate positions under Permit **Standard Conditions, Section D.10.a.(1)(b)** rather than to specific individuals.

2. For a partnership or sole proprietorship - by a general partner or the proprietor, respectively; or

3. For a municipality, state, federal or other public agency – by either a principal executive officer or ranking elected official. For the purposes of this section a principal executive officer of a federal agency includes:
 - (a) The chief executive officer of the agency, or
 - (b) A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrators of EPA).
- B. All reports required by permits and other information requested by the state administrative authority shall be signed by a person described in Permit **Standard Conditions, Section D.10.a.**, or by a duly authorized representative of that person. A person is a duly authorized representative only if:
 1. The authorization is made in writing by a person described in Permit **Standard Conditions, Section D.10.a.**
 2. The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity such as the position of plant manager, operator of a well or well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the company, (a duly authorized representative may thus be either a named individual or any individual occupying a named position); and
 3. The written authorization is submitted to the state administrative authority.
- C. Changes to authorization. If an authorization under Permit **Standard Conditions, Section D.10.b** is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, a new authorization satisfying the requirements of **Section D.10.b** must be submitted to the state administrative authority prior to or together with any reports, information, or applications to be signed by an authorized representative.
- D. Any person signing any document under Permit **Standard Conditions, Section D.10.a or b** shall make the following 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, 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."

Signatory Requirements

All storm water management plans, storm water pollution prevention plans, reports, certifications, or information either submitted to the state administrative authority or that this permit requires be maintained by the permittee, shall be signed by a person described in LAC 33:IX.2503.A, or by a duly authorized representative of that person. A person is a duly authorized representative only if:

1. ALL questions and requested information have been answered (N/A **only** if the question or information was not applicable).
2. The authorization is made in writing by a person described in LAC 33:IX.2503.A.3,
3. The authorization specifies either a principal executive officer or ranking elected official. (A duly authorized representative may thus be a named individual or any individual occupying a named position), and
4. The written authorization is submitted to the state administrative authority.

Pursuant to the Water Quality Regulations (specifically LAC 33:IX.2503) promulgated September 1995, the state NOI must be signed by a responsible individual as described in LAC 33:IX.2503 and that person shall make the following 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, 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."

Signature _____
Printed Name _____
Title _____
City/Town _____
Date _____
Telephone _____
Email _____

CHECKLIST

To prevent any unnecessary delay in the processing of your notice of intent to be covered under the general permit, please take a moment and check to be certain that the following items have been addressed and enclosed:

1. ALL questions and requested information have been answered (N/A if the question or information was not applicable).
2. The appropriate person has signed the signatory page.
3. Please forward the original and one copy of this NOI and all attachments.

ANY NOI THAT DOES NOT CONTAIN ALL OF THE REQUESTED INFORMATION WILL BE CONSIDERED INCOMPLETE. NOI PROCESSING WILL NOT PROCEED UNTIL ALL REQUESTED INFORMATION HAS BEEN SUBMITTED.

NOTE: UPON RECEIPT AND SUBSEQUENT REVIEW OF THE NOI BY THE WATER PERMITS DIVISION, YOU MAY BE REQUESTED TO FURNISH ADDITIONAL INFORMATION IN ORDER TO COMPLETE THE PROCESSING OF THE NOI.