

NPDES Small MS4 NOI

version 1.28

Form Input

**Please note that this paper template is to be used for data gathering purposes only. This paper form will not be accepted by the agency.*

General Information

MS4 Ownership Type *Select One

- City or Town County
- College or University Military Installation
- Other Public Agency

For a county government, indicate whether the figure below represent the entire county or only the urbanized area *Select One

**Please note that this control is conditionally displayed based on the answer to other question(s) and may not be available in the electronic form.*

- Entire County Urbanized Area Only

Area Served (in square miles) of Entire County

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Urban Area Served (in square miles)

**Please note that this control is conditionally displayed based on the answer to other question(s) and may not be available in the electronic form.*

Is your county implementing the program in urbanized areas only? *Select One

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- Yes No

Provide GIS services link of program area, if available:

**Please note that this control is conditionally displayed based on the answer to other question(s) and may not be available in the electronic form.*

Upload a PDF map of the urbanized area here:

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Multiple attachments are not allowed. Please be aware that files exceeding 500 MB in size are not recommended. The following file types are accepted:

.docx,.pdf,*.jpg,*.jpeg,*.png,*.tif,*.tiff,*.csv,*.txt,*.xlsx,*.xml,*.pptx,*.adi,*.ado,*.bpi,*.sfc,*.pfl,*.dta,*.lst,*.pip,*.ami,*.aml,*.inp,*.out,*.mov,*.kml,*.kmz,*.zip

Comment

What is the estimated population of the MS4

Name of Municipality or Organization

MS4 Responsible Official

Prefix

First Name

Last Name

Title

Name of MS4

Phone Type

*Only one phone number is accepted

Number

Extension

Other

Home

Business

Mobile

Email

Address Line 1

Address Line 2

City

State/Area

Postal Code

County *Select One

- Anderson Bedford
- Benton Bledsoe
- Blount Bradley
- Campbell Cannon
- Carroll Carter

... (More Options Available)

MS4 Program Manager

Prefix

First Name

Last Name

Title

Company/Organization Name

Phone Type *Only one phone number is accepted

Number

Extension

Other

Home

Business

Mobile

Email

Address Line 1

Address Line 2

City

State/Area

Postal Code

Are any other operators of MS4s seeking coverage under this Notice of Intent *Select One

Yes No

MS4 Co-Permittee

*Please note that this section is conditionally displayed based on the answer to other question(s) and may not be available in the electronic form.

Name of the Municipality or Organization

MS4 Responsible Official

Prefix

First Name

Last Name

Title

Name of MS4

Phone Type

*Only one phone number is accepted

Number

Extension

Other

Home

Business

Mobile

Email

Address Line 1

Address Line 2

City

State/Area

Postal Code

MS4 Program Manager

Prefix

First Name

Last Name

Title

Company/Organization Name

Phone Type

*Only one phone number is accepted

Number

Extension

Other

Home

Business

Mobile

Email

Address Line 1

Address Line 2

City

State/Area

Postal Code

Co-Permittees and Coordinated Programs

*Please note that this section is conditionally displayed based on the answer to other question(s) and may not be available in the electronic form.

Describe each co-permittee below and attach all existing signed agreements between the operator and any applicable parties where the operator has entered into an agreement in order to implement minimum control measures or portions of minimum control measures

Co-Permittee Name

Co-Permittee ID

Population

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Describe where (on which Co-Permittee) the accountability falls (whole or in part) for each portion of the Storm Water Management Program (SWMP). The description shall assign clear and distinct accountability to the co-permittees involved as to who is responsible for what permit compliance issues, who is to develop what portions of a SWMP, and who is to implement what portions of the SWMP

Description of Accountability

List all co-permittee signed regulatory mechanisms (e.g., ordinances) and other agreements, contracts, memorandum of understanding or other legal documents between Co-Permittees that govern the implementation and operations of the SWMP.

Legal Authority Documents

Attach a copy of each of the Legal Authority Documents listed above

Attach a copy each of the signed agreements among the co-permittees

Multiple attachments are not allowed. Please be aware that files exceeding 500 MB in size are not recommended. The following file types are accepted: *.jpeg,*.jpg,*.pdf,*.png

Comment

Is an electronic geospatial map of your system available? **Select One*

Yes No

If YES, provide a link to the REST Services

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If NO, attach map

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Comment

Description Of Storm Sewer System

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Enter your tracking number

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Urban Area Served (in square miles)

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Is an electronic geospatial map of your system available? **Select One*

Yes No

If YES, provide a link to the REST Services:

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If NO, attach map

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Comment

Summary Of Receiving Streams

Exceptional Tennessee

Use the divisions data viewer linked below to determine whether stormwater from any part of the MS4 discharges into Exceptional Tennessee Waters.

[TDEC Data viewer](#)

Streams with Unavailable Parameters

Use the most current EPA Approved List of Impaired and Threatened Waters linked below, along with the GIS mapping tool published on the division's web site, to determine whether stormwater from any part of the MS4 discharges into streams with unavailable parameters for nutrients, pathogens, siltation, or other.

[Water Quality Rules, Reports and Publications](#)

State or EPA Issued TMDL's

EPA-Approved TMDLs as well as EPA-Established TMDLs for Tennessee waters can be found on the division's web site at Tennessee's Total Maximum Daily Load (TMDL) Program (tn.gov). to determine whether stormwater from any part of the MS4 discharges into it.

[Tennessee's Total Maximum Daily Load \(TMDL\) Program \(tn.gov\)](#)

PLEASE LOOKUP WATERBODY USING MAPPING TOOL

Using the GIS mapping tool linked below to list the receiving waterbodies to which your MS4 discharges, the 12 Digit Hydrologic Unit Code and the number of MS4 outfalls discharging into it.

[DWR Waterbodies Spatial Tool](#)

List waters and parameters

Receiving Water (Enter Source_FeatureID Value)	Number of Outfalls	Nutrients	Pathogens	Siltation	Other	ETW	TMDL	MS4 Jurisdiction

MCM 1: Public Education and Outreach

Public Education

Target Audience	Management Measure	Delivery Method/Materials	MS4(s) Responsible for Implementation
General Public	Awareness of the impacts on water quality;		
General Public	Awareness of the importance of maintenance activities for operators of permanent BMPs/SCMs;		
General Public	Awareness on the proper storage, use, and disposal of pesticides, herbicides, fertilizers, oil and other automotive-related fluids;		
General Public	Awareness of identifying and reporting procedures for illicit connections/discharges, sanitary sewer seepage, spills, etc.;		
Engineering & Development Community	Awareness of the stormwater ordinances, regulations, and guidance materials related to long-term water quality impacts;		
Engineering & Development Community	Awareness of the stormwater ordinances, regulations, and guidance materials related to long-term water quality impacts:		
Public Employees	Awareness of water quality impacts from daily operations;		
Public Employees	Pollution Prevention and Good Housekeeping (see Permit sub-part 4.2.6.); and		
Public Employees	The awareness of identifying and reporting procedures for illicit connections/discharges, sanitary sewer diversions or seepages, spills, etc		

Are there additional education campaigns and audiences? **Select One*

Yes No

If yes, Explain:

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MCM 2: Public Involvement/Participation

Public Involvement

Participants	Management Measure	Delivery Method/Materials	MS4(s) Responsible for Implementation
General Public	Pollution Prevention;		
General Public	Impacts on water quality or local storm water management issues;		
General Public	Storage, use, and disposal of household hazardous waste, automotive-related fluids, pesticides, herbicides, and fertilizers use;		
General Public	Identifying and reporting procedures for illicit connections/discharges, sanitary sewer seepage, spills, etc.;		
Commercial & Development Community	Pollution Prevention; and		
Commercial & Development Community	Impacts on water quality or local storm water management issues.		

Have you implemented additional public involvement/participation activities? **Select One*

Yes No

If Yes, describe the additional activities, participants, management measures and MS4(s) responsible for implementation:

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MCM 3: Illicit Discharge Detection & Elimination (IDDE)

1. Has an ordinance or other regulatory mechanism been established prohibiting non-stormwater discharges? **Select One*

Yes No

If no, please explain

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1a. Name of ordinance or other regulatory mechanism

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1b. Title/Code/Citation

**Please note that this control is conditionally displayed based on the answer to other question(s) and may not be available in the electronic form.*

1c. Effective date of adoption

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2. Has a written plan to detect, identify, and eliminate non-stormwater discharges been established and implemented to include all components of the permit? **Select One*

Yes No

2a. If no, please explain

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2b. Effective date of adoption

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3. Has a storm sewer system map been developed to include the minimum mapping requirements? **Select One*

- Yes No

3a. If Yes, provide most recent date of mapping of MS4 outfalls & receiving streams

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3b. If no, explain:

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4. Does the MS4's PIE plan include procedures to inform public employees, businesses, and the general public of the hazards and damage to water quality associated with illegal dumping and connections to the storm sewer, and the improper disposal of waste?

- Yes No

4a. If no, explain:

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5. Has a mechanism been developed for the public to report suspected illicit discharges? **Select One*

- Yes No

If yes, list the mechanism (e.g., hotline number, website URL or other)

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If no, explain:

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List the MS4(s) responsible for implementing these requirements.

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MCM 4: Construction Site Stormwater Runoff Control

1. Has an ordinance or other regulatory mechanism been established to require erosion prevention and sediment controls (EPSCs) from construction activities that result in land disturbance of equal or greater than one acre or less than one acre if part of a larger common plan of development or sale, including sanctions to ensure compliance?

- Yes No
 Under Development

1a. If No, please describe

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1a. Name of enforcement authority or other mechanism

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1b. Title/Code/Citation

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1c. Effective date of adoption

**Please note that this control is conditionally displayed based on the answer to other question(s) and may not be available in the electronic form.*

1d. Estimation of completion date

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2. Have requirements for construction site operators to implement appropriate erosion and sediment control best management practices and control of waste at the construction site been established?

- Yes No

2a. If no, describe

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3. Have procedures for construction site plan (including erosion prevention and sediment controls) review and approval which incorporate consideration of potential water quality impacts been established?

- Yes No

3a. If no, describe

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4. Have mechanisms or plans for public access to information on projects and receiving and considering comments from the public on those projects been established?

- Yes No

4a. If Yes, describe

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4b. If No, Describe

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5. Have procedures to inspect construction sites and take enforcement actions to correct noncompliance been established? *Sel One

- Yes No

5a. If no, describe

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List the MS4(s) responsible for implementing these requirements.

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MCM 5: Post Construction/Permanent Stormwater Management in New Development and Redevelopment

1. Has an ordinance or other regulatory mechanism been established to address post construction runoff from new development and redevelopment projects that disturb one or more acres of land, or less than one acre if part of a larger common plan of development

- Yes No
 Under Development

1a. Please describe

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1b. Effective date of adoption

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1c. If Under Development provide estimated completion date

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2. Does the SWMP include requirements to ensure long-term operation and maintenance of SCMs for controlling runoff from new development and redevelopment projects?

- Yes No
 Under Development

2a. If no, describe

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2b. If yes, provide effective date of adoption

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2c. Estimation of completion date

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3. Does your program meet all the requirements of State Rule Chapter 0400-40-10? *Select One

Yes No

3a. If Yes, attach your implementation plan explaining how your program complies, identifying any new or modified elements of your program.

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Comment

4. If your program does not meet all the requirements of State Rule Chapter 0400-40-10 have you already developed an implementation plan that includes a compliance schedule with interim milestones?

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Yes No

4a. If Yes, attach your implementation plan

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Comment

List the MS4(s) responsible for implementing these requirements.

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MCM 6: Pollution Prevention/Good Housekeeping For Municipal Operations

1. Indicate if the MS4 has the municipal operations listed below

Municipal Operation	Yes or No	Responsible Department/Parties
Streets, roads, highways		
Parking lots		
Maintenance and storage yards		
Fleet or maintenance shops with outdoor storage areas		
Salt/sand storage locations		
Snow disposal areas operated by the permittee		
Waste disposal, storage, and transfer stations		

2. Has an employee training program for employees responsible for municipal operations at these facilities been developed? *Sel One
 Yes No

If No, explain

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3. Has an O&M Facility Plan developed and implemented for these facilities? *Select One
 Yes No

If No, please explain

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List the MS4(s) responsible for implementing these requirements.

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Enforcement Response Plan (ERP)

Has an Enforcement Response Plan for all required program elements been established? *Select One
 Yes No

Effective date of adoption

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If no, please describe

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ERP Attachment

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Attach a copy of the ERP.

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Comment

Stormwater Monitoring and Program Evaluation

Monitoring Program Type (see subpart 4.6 of the permit for details) **Select One*

- Option 1 Option 2

Have you developed your option 2 monitoring plan? **Select One*

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- Yes No

If Yes, add attachment

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Comment