

Illinois Environmental Protection Agency

Bureau of Water • 1021 North Grand Avenue East • P.O. Box 19276 • Springfield • Illinois • 62794-9276

Notice of Intent for New or Renewal of General Permit for Discharges from Small Municipal Separate Storm Sewer Systems - MS4's

Part I. General Information

	MS 4 Operator Name:				
2.	MS4 Mailing Address:				
	City:	State: IL	_		
3.	Operator Type:	Other:			
1.	Operator Status:	Other:			
5.	Name(s) of governmental entity(ies) in which MS4 is loca	ated:			
St	tate of Illinois				
С	ounty of Lake				
_					
_					
3.	Area of land that drains to your MS4 in square miles:				
7.	Latitude and Longitude at approximate geographical cen				— dischar
	Latitude and Longitude at approximate geographical cenatitude:				dischar
		ter of MS4 for which you			dischar
L	atitude:	ter of MS4 for which you Longitude:	ı are requestin	ng authorization to	dischar
L	_atitude:	ter of MS4 for which you Longitude: Degrees:	ı are requestin	ng authorization to Seconds:	dischar
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L	_atitude:	ter of MS4 for which you Longitude: Degrees:	u are requestin	ng authorization to Seconds:	dischar
7. L 33. —	_atitude:	ter of MS4 for which you Longitude: Degrees:	u are requestin	ng authorization to Seconds:	dischar

9. Persons responsible for implementation or coordination of Stormwater Management Program:				
Name:	Title:	Phone:		
Area of Responsibility:				
Name:				
Area of Responsibility: _				
	nent Practices (include shared responsi ented in the MS4 area:	ibilities) which have been implemented or are		
A. Public Education and Omeasurable Goals (include				
QLP MS4				
☐ A.1 Distributed	Paper Material			
A.2 Speaking I				
_	vice Announcement			
☐ A.4 Community	Event Education Material			
A.6 Other Publi				

Measurable Goals (include shared responsibilities)				
QLP MS4				
☐ B.2 Educational Volunteer				
☐ B.3 Stakeholder Meeting☐ B.4 Public Hearing				
☐ B.5 Volunteer Monitoring				
☐ B.6. Program Involvement				
☐ B.7 Other Public Involvement				

	C. Illicit Discharge Detection and Elimination Measurable Goals (include shared responsibilities)				
QLP M					
QLF IVI	C.1 Sewer Map Preparation				
[C.2 Regulatory Control Program				
[C.3 Detection/Elimination Prioritization Plan				
[C.4 Illicit Discharge Tracing Procedures				
[C.5 Illicit Source Removal Procedures				
[C.6 Program Evaluation and Assessment				
[C.7 Visual Dry Weather Screening				
[C.8 Pollutant Field Testing				
[C.9 Public Notification				
Г	C 10 Other Illicit Discharge Controls				

Measurable Goals (include shared responsibilities)

OLD MO4	
QLP MS4 D.1 Regulatory Control Program	
D.2 Erosion and Sediment Control BMPs	
D.3 Other Waste Control Program	
D.4 Site Plan Review Procedures	
☐ D.5 Public Information Handling Procedures	
☐ D.6 Site Inspection/Enforcement Procedures	
D.7 Other Construction Site Runoff Controls	

☐ E.7 Other Post-Construction Runoff Controls

QLP MS4
F.1 Employee Training Program
F.2 Inspection and Maintenance Program
F.3 Municipal Operations Storm Water Control
F.4 Municipal Operations Waste Disposal
F.5 Flood Management/Assess Guidelines
☐ F.6 Other Municipal Operations Controls

Part III. Certification

I certify under penalty of law that this document an all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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 knowingly submitting false information, including the possibility of fines and imprisonment.

Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony (415 ILCS 5/44 (h)).

Authorized Representative Name	Title	Date
Authorized Representative Signature		

Authorized Representative Signature

You may complete this form online and save a copy locally before printing and signing the form. It should then be sent to:

Illinois Environmental Protection Agency
Bureau of Water
Division of Water Pollution Control
Attn: Permit Section
P.O. Box 19276
1021 North Grand Avenue East
Springfield, IL 62794-9276

A. Public Education	and Outreach			
BMP Number				
See Attachments A	 & B.			
	Add Another BMP	Delete La	st Entry	

B. Public Participatio	n/Involvement			
BMP Number				
See Attachments A	& B.			
	Add Another BMP	Delete Last Entry		

C. Illicit Discharge Detection and Elimination

BMP Number						
See Attachments A & B.						
	Add Another BMP		Delete Last Entry			

D. Construction Site Runoff Control						
BMP Number						
See Attachments A	& B.					
	Add Another BMP	Delete Last Entry				

E. Post-Construction Runoff Control					
BMP Number					
See Attachments A	& B.				
	Add Another BMP	Delete Last Entry			

F. Pollution Prevention/Good Housekeeping

See Attachments A & B.

Add Another BMP

Delete Last Entry