



**PAG-13**  
**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)**  
**GENERAL PERMIT FOR STORMWATER DISCHARGES FROM**  
**SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS**  
**NOTICE OF INTENT (NOI)**

Before completing this form, read the step-by-step instructions provided in this NOI package.

Related ID#s (If Known)		DEP USE ONLY	
Client ID# _____	APS ID# _____	Date Received _____	
Site ID# _____	Auth ID# _____		
Facility ID# _____		PAG _____	PDG? _____

**GENERAL INFORMATION**

Type of Permit:     New Coverage     Renewal of Coverage    Permit No.: PAG-133618

Is a waiver of coverage being requested and is a waiver application attached to this NOI?     Yes     No

Is PAG-13 General Permit coverage requested for more than one MS4 applicant?     Yes     No

If Yes, submit this NOI for each co-applicant and complete the information below (see instructions):

Joint Client Name: \_\_\_\_\_ Joint Client Phone: \_\_\_\_\_

Joint Client Address: \_\_\_\_\_ Joint Client Contact: \_\_\_\_\_

Joint Client City, State, Zip: \_\_\_\_\_

**MS4 CLIENT/OPERATOR INFORMATION**

DEP Client ID# <b>614652</b>	Client Type/Code <b>MUNI</b>		
Organization Name or Registered Fictitious Name <b>Providence Township</b>	Employer ID# (EIN)	Dun & Bradstreet ID#	
Mailing Address Line 1 <b>200 Mount Airy Road</b>	Mailing Address Line 2		
Address Last Line – City <b>New Providence</b>	State <b>PA</b>	ZIP+4 <b>17560</b>	Country <b>United States of America</b>
Client Contact Last Name <b>Eldridge</b>	First Name <b>Vicki</b>	MI	Suffix
Client Contact Title <b>Township Manager</b>	Phone <b>717-786-7596</b>	Ext	
Email Address <b>vicki@providencetownship.com</b>	FAX <b>717-786-2565</b>		

**MS4 SITE INFORMATION**

DEP Site ID# <b>69721</b>	Site Name <b>Providence Township MS4</b>			
Urbanized Area (UA) Name(s) <b>Lancaster, PA</b> <b>GEOID/UACE10: 47530</b>	UA Area (specify acres or mi <sup>2</sup> ) <b>1,648 acres</b>			
County Name <b>Lancaster County</b>	Municipality Name <b>Providence</b>	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input checked="" type="checkbox"/>
County Name	Municipality Name	City <input type="checkbox"/>	Boro <input type="checkbox"/>	Twp <input type="checkbox"/>
Site Location Address Line 1	Site Location Address Line 2			

Site Location City State ZIP+4

Detailed Written Directions to Site  
**From Lancaster City, head south on US-222S for 3.7 miles. Continue straight onto PA-272S/Willow Street for 5.4 miles, turn left on Mount Airy Road and approximately 1.0 miles down the road the Township Municipal Office is on the right**

Site Contact Last Name <b>Prunoske</b>	First Name <b>Jennifer</b>	MI <b>A.</b>	Suffix
Site Contact Title <b>MS4 Engineer</b>	Site Contact Firm <b>Hanover Engineering Associates, Inc.</b>		
Mailing Address Line 1 <b>20 C Snyder Lane</b>		Mailing Address Line 2	
Address Last Line – City <b>Ephrata</b>		State <b>PA</b>	ZIP+4 <b>17522</b>
Phone <b>717-721-7444</b>	Ext	FAX <b>717-721-7447</b>	Email Address <b>jprunoske@hanovereng.com</b>
SIC Code(s) (List All That Apply)		NAICS Code(s)	

Site-to-Client Relationship  
**AGENT**

**STORMWATER DISCHARGE INFORMATION**

**Map(s).** Attach a map(s) to the NOI that identifies all stormwater discharge points (outfalls) from the MS4 to surface waters. For MS4s with existing permit coverage (that did not receive a waiver from DEP during the latest permit term), the map must include all elements required by MCM #3 in the NPDES permit. See instructions.

**Surface Water Information.** For each surface water body that receives stormwater discharges from the MS4, list the surface water, the furthest downstream outfall ID number, and the surface water’s existing use, impairment and TMDL/WLA information in the table below. See instructions. **NOTE** – If the MS4 discharges to any surface water whose existing use is HQ or EV, the MS4 must apply for an individual permit.

Surface Water Name	Outfall No.	Ch. 93 Existing Use	Impaired?	Approved TMDL?	WLA?
Pequea Creek					
Climbers Run					
Huber Run	3-4				
Big Beaver Creek	4-12				



**STORMWATER MANAGEMENT PROGRAM**

Minimum Control Measure (MCM)	BMP #	BMP Summary	Responsible Party	Contact Name	Contact Phone No.	MOU or Agreement?
#1 – Public Education and Outreach	1	Develop, implement and maintain a written Public Education and Outreach Program.	Providence Township		717-786-7596	<input type="checkbox"/>
	2	Develop and maintain lists of target audience groups that are present within the areas served by the permittee's regulated small MS4.	Providence Township			<input type="checkbox"/>
	3	The permittee shall annually publish at least one issue of a newsletter, a pamphlet, a flyer, or a website that includes general stormwater educational information, a general description of the permittee's SWMP, and/or information about the permittee's stormwater management activities.	Providence Township			<input type="checkbox"/>
	4	Distribute stormwater educational materials and/or information to the target audiences using two methods annually.	Providence Township			<input type="checkbox"/>
#2 – Public Participation and Involvement	1	Develop, implement and maintain a written Public Involvement and Participation Program (PIPP).	Providence Township			<input type="checkbox"/>
	2	Provide adequate public notice and opportunities for public review, input, and feedback prior to adoption of any ordinance, SOP or plan required by the General Permit.	Providence Township			<input type="checkbox"/>
	3	Regularly solicit public involvement and participation from the target audience groups using available distribution and outreach methods.	Providence Township			<input type="checkbox"/>
#3 – Illicit Discharge Detection and Elimination	1	Develop and implement a written program for the detection, elimination, and prevention of illicit discharges into the regulated MS4.	Providence Township			<input type="checkbox"/>
	2	Develop and maintain a map of the regulated small MS4's outfalls and surface waters.	Providence Township			<input type="checkbox"/>
	3	In conjunction with the map(s) created under BMP #2 (either on the same map or on a different map), new permittees shall show, and existing permittees shall update, the entire storm sewer collection system, including roads, inlets, piping, swales, catch basins, channels, basins, and any other features of the permittee's storm sewer system including municipal boundaries and/or watershed boundaries.	Providence Township			<input type="checkbox"/>
	4	The permittee shall conduct outfall field screening, identify the source of any illicit discharges, and remove or correct any illicit discharges.	Providence Township			<input type="checkbox"/>

Minimum Control Measure (MCM)	BMP #	BMP Summary	Responsible Party	Contact Name	Contact Phone No.	MOU or Agreement?
#3 – Illicit Discharge Detection and Elimination (continued)	5	Enact a Stormwater Management Ordinance (municipal permittees) or SOP (non-municipal permittees) to implement and enforce a stormwater management program that includes prohibition of non-stormwater discharges to the regulated small MS4.	Providence Township			<input type="checkbox"/>
	6	Provide educational outreach to public employees, business owners and employees, property owners, the general public and elected officials (i.e., target audiences) about the program to detect and eliminate illicit discharges.	Providence Township			<input type="checkbox"/>
#4 – Construction Site Stormwater Runoff Control	1	If an NPDES permit is required for earth disturbance activities, do not issue a building permit or approval until confirmation that a valid NPDES permit is obtained.	Providence Township			<input type="checkbox"/>
	2	Notify DEP or CCD within 5 days of the receipt of an application for a permit involving an earth disturbance activity consisting of one acre or more.	Township Engineer	Mark Deimler - Solanco Engineering Assoc.	717-786-355	<input type="checkbox"/>
	3	Enact, implement, and enforce an ordinance to require the implementation of erosion and sediment control BMPs, as well as sanctions to ensure compliance.	Township Engineer	Mark Deimler - Solanco Engineering Assoc.		<input type="checkbox"/>
#5, Post-Construction Stormwater Management in New Development and Redevelopment	1	Enact, implement, and enforce an ordinance or other regulatory mechanism to address post-construction stormwater runoff from new development and redevelopment projects, as well as sanctions and penalties associated with non-compliance.	Lancaster County Conservation District			<input type="checkbox"/>
	2	Develop and implement measures to encourage and expand the use of Low Impact Development (LID) in new development and redevelopment.	Providence Township			<input type="checkbox"/>
	3	Ensure adequate operation and maintenance of all post-construction stormwater management BMPs installed at all development or redevelopment projects that disturb greater than or equal to one acre.	Providence Township			<input type="checkbox"/>
#6 – Pollution Prevention / Good Housekeeping	1	Identify and document all operations that are owned or operated by the permittee and have the potential for generating stormwater runoff to the regulated small MS4.	Providence Township			<input type="checkbox"/>
	2	Develop, implement and maintain a written O&M program for all operations that could contribute to the discharge of pollutants from the regulated small MS4.	Providence Township			<input type="checkbox"/>
	3	Develop and implement an employee training program that addresses appropriate topics to further the goal of preventing or reducing the discharge of pollutants from operations to the regulated small MS4.	Providence Township			<input type="checkbox"/>



**STORMWATER MANAGEMENT PROGRAM**

**MOU or Agreement.** Attach any Memorandum of Understanding (MOU) or other written agreement that describes the BMP(s) identified above as being the responsibility of another party or a shared responsibility with another party.

**Stormwater Management Ordinance.** For municipal applicants that are renewing permit coverage, complete the information below and attach the applicant's Stormwater Management Ordinance to the NOI. The box for "Yes" must be checked for one of the three options below. Applicants that lack the authority to enact ordinances and are renewing permit coverage must attach their stormwater management SOP(s).

1.	Has a Stormwater Management Ordinance been enacted that is consistent with either the 2013 or 2022 DEP Model Ordinances?	<input type="checkbox"/> Yes	Date:	<input type="checkbox"/> No
2.	Has a Stormwater Management Ordinance been enacted that is consistent with an Act 167 Plan approved by DEP in 2005 or later?	<input type="checkbox"/> Yes	Date:	<input type="checkbox"/> No
3.	Has a Stormwater Management Ordinance been enacted that meets the requirements of the Stormwater Management Ordinance Checklist (for either 2013 or 2022)? If Yes, attach Checklist (3800-PM-BCW0100g).	<input checked="" type="checkbox"/> Yes	Date:	<input type="checkbox"/> No

**COMPLIANCE HISTORY**

**Existing Permits** – Identify all existing environmental permits issued by DEP or EPA to the applicant in the past five years.

Type of Permit	Permit No.	Date Issued	Issued By

Was/Is the facility owner or operator in violation of any DEP regulation, permit, order or schedule of compliance at this or any other facility?  Yes  No

If "Yes," list each permit, order or schedule of compliance and provide current compliance status. Use additional sheets to provide information on all permits.

Permit Program: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Brief Description of Non-Compliance: \_\_\_\_\_

Steps Taken to Achieve Compliance	Date(s) Compliance Achieved

Current Compliance Status:  In Compliance  In Non-Compliance

**CERTIFICATION**

I certify under penalty of law and subject to the penalties of 18 Pa. C.S.A. Section 4904 (relating to unsworn falsification to authorities) 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 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 further acknowledge that the MS4 and operator described herein is eligible for coverage under DEP's PAG-13 General Permit, and will operate in compliance with the General Permit. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

\_\_\_\_\_  
**Name** (type or print legibly)

\_\_\_\_\_  
**Official Title**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date Signed**