

ILLINOIS ENVIRONMENTAL PROTECTION AGENCY
NOTICE OF INTENT (NOI)
GENERAL PERMIT TO DISCHARGE STORM WATER
CONSTRUCTION SITE ACTIVITIES

OWNER INFORMATION

COMPANY/ OWNER NAME:	City of Bloomington	OWNER TYPE: SELECT ONE <small>State</small> MS4 Community <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
MAILING ADDRESS:	P.O. Box 3157	PHONE:		Area Code (309) Number 434-2225 ext. 2625	
CITY:	Bloomington	STATE:	IL	ZIP CODE:	61702
CONTACT PERSON: Ryan L. Otto, P.E.			EMAIL: rotto@cityblm.org		

CONTRACTOR INFORMATION

CONTRACTOR NAME:					
MAILING ADDRESS:				PHONE:	
CITY:				Area Code ()	Number ext.
			STATE:	ZIP CODE:	

CONSTRUCTION SITE INFORMATION

SELECT ONE:	<input checked="" type="checkbox"/> NEW SITE <input type="checkbox"/> CHANGE OF INFORMATION FOR: ILR10									
PROJECT NAME:	Hamilton Road - Timberlake to Main							COUNTY: McLean		
STREET ADDRESS/ LOCATION	West Hamilton Road and Main Street					CITY: Bloomington			IL	ZIP CODE: 61701
LATITUDE:	DEG. 40.46	MIN. -	SEC. -	LONGITUDE:	DEG. 88.99	MIN. -	SEC. -	SECTION: 16	TOWNSHIP: 23N	RANGE: 2E
APPROX CONST START DATE 12 / 13 / 09	APPROX CONST END DATE 6 / 30 / 11			TOTAL SIZE OF CONSTRUCTION SITE IN ACRES: <u>6.0</u> If less than 1 acre, is site part of larger common plan of development? <input type="checkbox"/> YES <input type="checkbox"/> NO						

STORM WATER POLLUTION PREVENTION PLAN INFORMATION

HAS STORM WATER POLLUTION PREVENTION PLAN BEEN SUBMITTED TO AGENCY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (SUBMIT SWPPP ELECTRONICALLY TO: epa.constilr10swppp@illinois.gov)									
WILL STORM WATER POLLUTION PREVENTION PLAN BE AVAILABLE AT SITE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO									
LOCATION OF SWPPP FOR VIEWING: ADDRESS: 2401 S. Main Street							CITY: Bloomington		
SWPPP CONTACT INFORMATION: NAME: Ryan L. Otto							INSPECTOR QUALIFICATIONS: SELECT ONE <small>P.E.</small>		
PHONE: (309) 434-2225			FAX: (309) 434-2201			EMAIL: rotto@cityblm.org			
PROJECT INSPECTOR, IF DIFFERENT THAN ABOVE: NAME: Joshua J. Ftacek							INSPECTOR QUALIFICATIONS: SELECT ONE <small>Other</small>		
PHONE: (309) 434-2225			FAX: (309) 434-2201			EMAIL: jftacek@cityblm.org			

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TYPE OF CONSTRUCTION (SELECT ALL THAT APPLY)

SELECT ONE Reconstruction	SIC Code:
TYPE DETAILED DESCRIPTION OF PROJECT: Reconstruction of Hamilton Road including new pavement, curb and gutter, sidewalk, bikeway, drainage system, traffic signals, sanitary sewer, water main. Widening and Resurfacing of Main Street including new curb and gutter, drainage system, and traffic signals.	

HISTORIC PRESERVATION AND ENDANGERED SPECIES COMPLIANCE

HAS THIS PROJECT BEEN SUBMITTED TO THE FOLLOWING STATE AGENCIES TO SATISFY APPLICABLE REQUIREMENTS FOR COMPLIANCE WITH ILLINOIS LAW ON:	
HISTORIC PRESERVATION	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO http://www.illinoishistory.gov/PS/rcdocument.htm
ENDANGERED SPECIES	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO http://dnrecocat.state.il.us/ecopublic/

RECEIVING WATER INFORMATION

DOES YOUR STORM WATER DISCHARGE DIRECTLY TO: <input type="checkbox"/> WATERS OF THE STATE OR <input checked="" type="checkbox"/> STORM SEWER
OWNER TO STORM SEWER SYSTEMS: City of Bloomington
NAME OF CLOSEST RECEIVING WATERBODY TO WHICH YOU DISCHARGE: Sugar Creek

I certify under penalty of law that this document and all attachments were prepared under my direction and 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 this 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. In addition, I certify that the provisions of the permit, including the development and implementation of a storm water pollution prevention plan and a monitoring program plan, will be complied with.

OWNER SIGNATURE: _____ DATE: _____

SUBMIT ELECTRONICALLY TO:
epa.constilr10swppp@illinois.gov

OR MAIL COMPLETED FROM TO:
ILLINOIS ENVIRONMENTAL PROTECTION AGENCY
DIVISION OF WATER POLLUTION CONTROL
ATTN: PERMIT SECTION
POST OFFICE BOX 19276
SPRINGFIELD, ILLINOIS 62794-9276
www.epa.state.il.us

FOR OFFICE USE ONLY
LOG:
PERMIT NO. ILR10 _____
DATE:

Information required by this form must be provided to comply with 415 ILCS 5/39 (1996). Failure to do so may prevent this form from being processed and could result in your application being denied. This form has been approved by the Forms Management Center.

IL 532 2104
WPC 623 Rev. 8/08

Submit form

INSTRUCTIONS FOR COMPLETION OF CONSTRUCTION ACTIVITY NOTICE OF INTENT (NOI) FORM

Please adhere to the following instructions:

Submit original, electronic or facsimile copies. Facsimile and/or electronic copies should be followed-up with an original signature copy as soon as possible. Please write "copy" under the "For Office Use Only" box in the lower right hand corner.

< **Submit completed forms to:**

Illinois Environmental Protection Agency
Division of Water Pollution Control
Permit Section
Post Office Box 19276
Springfield, Illinois 62794-9276
or call (217)782-0610
www.epa.state.il.us

< **Reports must be typed or printed legibly and signed.**

< Any facility that is not presently covered by the General NPDES Permit for Storm Water Discharges From Construction Site Activities is considered a new facility.

< **If this is a change in your facility information, renewal, etc., please fill in your permit number on the appropriate line, changes of information or permit renewal notifications do not require a fee.**

< **NOTE: FACILITY LOCATION IS NOT NECESSARILY THE FACILITY MAILING ADDRESS, BUT SHOULD DESCRIBE WHERE THE FACILITY IS LOCATED.**

< **Use the formats given in the following examples for correct form completion.**

	<u>Example</u>	<u>Format</u>
SECTION	12	1 or 2 numerical digits
TOWNSHIP	12N	1 or 2 numerical digits followed by "N" or "S"
RANGE	12W	1 or 2 numerical digits followed by "E" or "W"

< **For the Name of Closest Receiving Waters, do not use terms such as ditch or channel. For unnamed tributaries, use terms which include at least a named main tributary such as "Unnamed Tributary to Sugar Creek to Sangamon River."**

< **Submit a fee of \$500 and the Storm Water Pollution Plan (SWPPP) for initial permit prior to the Notice of Intent being considered complete for coverage by the ILR10 General Permits. Please make checks payable to: Illinois EPA.**

< **SWPPP should be submitted electronically to: epa.constilr10swppp@illinois.gov When submitting electronically, use Project Name and City as indicated on NOI form.**