



# 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

1. MS 4 Operator Name: Village of Hillside

2. MS4 Mailing Address: 425 Hillside Avenue

City: Hillside

State: IL

3. Operator Type: Village

Other: \_\_\_\_\_

4. Operator Status: Local

Other: \_\_\_\_\_

5. Name(s) of governmental entity(ies) in which MS4 is located:

Cook County

\_\_\_\_\_  
\_\_\_\_\_

6. Area of land that drains to your MS4 in square miles: 3.15

7. Latitude and Longitude at approximate geographical center of MS4 for which you are requesting authorization to discharge:

Latitude:

39

Degrees

38

Minutes:

47

Seconds:

Longitude:

85

Degrees:

05

Minutes:

34

Seconds:

8. Name(s) of known receiving waters

Addison Creek

Salt Creek

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Persons responsible for implementation or coordination of Stormwater Management Program:

Name: Joseph Pisano Title: Public Works Director Phone: 7082023452

Area of Responsibility: See attached revised SWMP

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Area of Responsibility: \_\_\_\_\_

Part II. Best Management Practices (include shared responsibilities) which have been implemented or are proposed to be implemented in the MS4 area:

**A. Public Education and Outreach**

Qualifying Local Programs:

See attached revised Storm Water Management Plan

Measurable Goals (include shared responsibilities)

- A.1 Distributed Paper Material
- A.2 Speaking Engagement
- A.3 Public Service Announcement
- A.4 Community Event
- A.5 Classroom Education Material
- A.6 Other Public Education

**B. Public Participation/Involvement**

Measurable Goals (include shared responsibilities)

Qualifying Local Programs:

See attached revised Storm Water Management Plan

- 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**

Qualifying Local Programs:

See attached revised Storm Water Management Plan

Measurable Goals (include shared responsibilities)

- 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
- C.10 Other Illicit Discharge Controls

**D. Construction Site Runoff Control**

Measurable Goals (include shared responsibilities)

Qualifying Local Programs:

See attached revised Storm Water Management Plan

- 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. Post-Construction Runoff Control**

Qualifying Local Programs:

See attached revised Storm Water Management Plan

Measurable Goals (include shared responsibilities)

- E.1 Community Control Strategy
- E.2 Regulatory Control Program
- E.3 Long Term O & M Procedures
- E.4 Pre-Construction Review of BMP Designs
- E.5 Site Inspections During Construction
- E.6 Post-Construction Inspections
- E.7 Other Post-Construction Runoff Controls

**F. Pollution Prevention/Good Housekeeping**

Measurable Goals (include shared responsibilities)

Qualifying Local Programs:

See attached revised Storm Water Management Plan

- 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 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 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)).

Joseph Pisano

Director of Public Works

5/28/13

Authorized Representative Name

Title

Date

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