

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

OWNER INFORMATION

COMPANY/ OWNER NAME:	City of Washington	OWNER TYPE: SELECT ONE City MS4 Community <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
MAILING ADDRESS:	115 W. Jefferson Street, Washington, IL 61571	PHONE: Area Code (309) Number 444-1136 ext. 1136			
CITY:	Washington	STATE: IL	ZIP CODE: 61571	FAX: Area Code (309) Number 444-9779 <input type="checkbox"/>	
CONTACT PERSON: Kenneth B. Newman			EMAIL: knewman@ci.washington.il.us		

CONTRACTOR INFORMATION

CONTRACTOR NAME:	Stark Excavating, Inc.				
MAILING ADDRESS:	1805 W. Washington St.	PHONE: Area Code (309) Number 828-5034 ext. 5034			
CITY:	Bloomington	STATE: IL	ZIP CODE: 61701		

CONSTRUCTION SITE INFORMATION

SELECT ONE:	<input checked="" type="checkbox"/> NEW SITE <input type="checkbox"/> CHANGE OF INFORMATION FOR: ILR10									
PROJECT NAME:	Business Route 24 Drainage Improvements							COUNTY: Tazewell		
STREET ADDRESS/ LOCATION	Business Route 24					CITY: Washington			IL	ZIP CODE: 61571
LATITUDE:	DEG. 40	MIN. 42	SEC. 19	LONGITUDE:	DEG. 89	MIN. 26N	SEC. 19	SECTION: 15	TOWNSHIP: 26N	RANGE: 3W
APPROX CONST START DATE 05 / 11 / 09	APPROX CONST END DATE 07 / 17 / 09			TOTAL SIZE OF CONSTRUCTION SITE IN ACRES: <u>1.5</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.constitlr10swppp@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: 115 W. Jefferson St.		city: Washington
SWPPP CONTACT INFORMATION: NAME: Kenneth Newman		INSPECTOR QUALIFICATIONS: SELECT ONE P.E.
PHONE: (309) 444-1136	FAX: (309) 444-9779	EMAIL: knewman@ci.washington.il.us
PROJECT INSPECTOR, IF DIFFERENT THAN ABOVE: NAME:		INSPECTOR QUALIFICATIONS: SELECT ONE Other
PHONE: ()	FAX: ()	EMAIL:

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TYPE OF CONSTRUCTION (SELECT ALL THAT APPLY)

SELECT ONE Other
TYPE DETAILED DESCRIPTION OF PROJECT: Construct about 2,272 feet of storm sewer and 14,015 S.F. of concrete sidewalk.

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 type="checkbox"/> YES <input checked="" type="checkbox"/> NO http://www.illinoishistory.gov/PS/rcdocument.htm
ENDANGERED SPECIES	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO http://dnrecocat.state.il.us/ecopublic/

RECEIVING WATER INFORMATION

DOES YOUR STORM WATER DISCHARGE DIRECTLY TO: <input checked="" type="checkbox"/> WATERS OF THE STATE OR <input type="checkbox"/> STORM SEWER
OWNER TO STORM SEWER SYSTEMS: City of Washington
NAME OF CLOSEST RECEIVING WATERBODY TO WHICH YOU DISCHARGE: Unnamed tributary to Farm 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: Kenneth B. Neuma

DATE: 4/6/09

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

SUBMIT ELECTRONICALLY TO:
epa.constit10swppp@illinois.gov

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