



INDIANA DEPARTMENT OF TRANSPORTATION

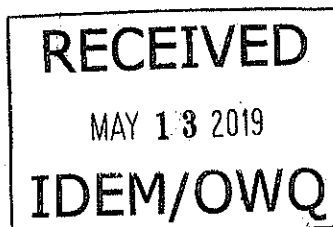
100 North Senate Avenue
Room N642
Indianapolis, Indiana 46204

PHONE: (317) 232-5348
FAX: (317) 232-4929

Michael R. Pence, Governor
Karl B. Browning, Commissioner

May 13, 2019

Randy Braun
Office of Water Quality
100 North Senate Avenue, Room 1255
Indianapolis, Indiana 46204



Dear Mr. Braun:

Enclosed is the resubmittal of the Notice of Intent (NOI) and Storm Water Quality Management Plan (SWQMP) indicating our intention to comply with the terms of the general permit 327-IAC-15-13 (Storm Water Run-Off Associated with Municipal Separate Storm Sewer System Conveyances). As a significant contributor of pollutants, the Indiana Department of Transportation is required to develop and implement minimum control measures within designated urbanized areas.

The initial individual permit application was submitted in 2003. The enclosed SWQMP is intended to comply with the general permit, rather than an individual permit, for the 5-year permit term effective immediately. The enclosed is the original SWQMP describes all minimum control measures, responsible parties and measurable goals for tracking and reporting progress.

If you have any questions, please contact Michele Meyer in the Environmental Services Division at (317) 232-5114 or michelemeyer@indot.in.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Roland Fegan".

Roland Fegan
Deputy Commissioner, INDOT Construction

Cc: File



RULE 13 NOTICE OF INTENT (NOI) LETTER

State Form 51270 (R4 / 4-08)
Form Approved by State Board of Accounts, 2003
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

For questions regarding this form, contact:
IDEM – Rule 13 Coordinator
100 North Senate Avenue, Rm 1255
MC 65-42
Indianapolis, IN 46204-2251
Phone: (317) 234-1601 or
(800) 451-6027, ext. 41601 (within Indiana)
Web Access:
<http://www.in.gov/idem> (Search for Stormwater)

NOTE:

- This form must be used to apply for a general NPDES permit pursuant to 327 IAC 15-13.
- Please type or print in ink.
- This completed form must be submitted with the Rule 13 Storm Water Quality Management Plan (SWQMP) – Part A: Initial Application Certification Submittal and Checklist, and proof of publication.
- Return this form, required addenda, and payment by mail to the IDEM Rule 13 Coordinator at the address listed in the box on the upper-right.

RECEIVED
MAY 13 2019
IDEM/OWQ

APPLICABILITY

Permit coverage under 327 IAC 15-13 applies to all entities that:

1. are not required to obtain an individual NPDES permit under 327 IAC 15-2-9(b);
2. meet the general permit rule applicability requirements under 327 IAC 15-2-3;
3. do not have coverage under an individual MS4 permit; and
4. operate, maintain, or otherwise have responsibility for an MS4 conveyance within a designated MS4 area.

APPLICATION TYPE (check one)

Initial NOI letter

Renewal NOI letter

PART A: GENERAL INFORMATION FOR MS4 OPERATOR

1. Operator Name:	Roland Fegan		
2. Operator Title:	Deputy Commissioner of Construction		
3. Represented Entity ¹ :	Indiana Department of Transportation		
4. Mailing Address	Address: INDOT 100 North Senate Ave Indianapolis, IN 46204		
<input type="checkbox"/> City <input type="checkbox"/> Town	Of: Indianapolis	Zip: IN	County: 46204
5. Phone Number:	317-234-8384		
6. Facsimile Number (if applicable):			
7. E-mail Address (if applicable):	d30FEGAN@indot.in.gov		

PART B: GENERAL INFORMATION FOR PRIMARY CONTACT PERSON FOR THE MS4 AREA

8. Is the primary contact person for the MS4 area the same as the operator listed in Part A?	<input type="checkbox"/> Yes* <input checked="" type="checkbox"/> No** * If yes, omit items #9-15 below and skip to Part C. ** If no, fill out items #9-15 below.		
9. Contact Person Name:	Sandy Bowman		
10. Contact Person Title:	Manager of Ecology and Waterway Permitting		
11. Represented Entity ¹ :	INDOT		
12. Mailing Address	Address: 100 North Senate Ave Room 641 ES		
<input type="checkbox"/> City <input type="checkbox"/> Town	Of: Indianapolis	Zip: IN	County: 46204
13. Phone Number:	317-233-5568		
14. Facsimile Number (if applicable):			
15. E-mail Address (if applicable):	sbowman@indot.in.gov		

¹ The "Represented Entity" is the name of the facility and/or organization that you are representing for purposes of this application. This can be a business

PART C: GENERAL INFORMATION FOR MS4 ENTITIES

16. Receiving Water: List all separate storm water outfall receiving waters for all entities seeking coverage under this NOI submittal and corresponding outfall designations. Attach separate sheets as necessary. If all receiving waters and outfalls are not known at the time of the NOI letter submittal, state known ones and provide the information in the corresponding annual report.

	Entity	Receiving Water	Outfall(s)
a.	See map at (https://www.in.gov/indot/2892.htm)		
b.			
c.			
d.			
e.			
f.			
g.			
h.			
i.			
j.			
k.			
l.			
m.			
n.			
o.			
p.			

17. Do any outfalls discharge to another MS4 conveyance? (These conveyances may either be regulated or non-regulated under Rule 13.) If yes, provide the name of the responsible individual for the storm sewer and provide the name of the initial receiving water.

- Yes* No** * If yes, fill in items #18-22 below.
** If no, omit items #18-22, and advance to item #23 below.

18. Responsible Individual Name: See list at (<https://www.in.gov/indot/2892.htm>)

19. Responsible Individual Title:

20. Responsible MS4 Entity
(e.g. municipality):

21. Phone Number:

22. Initial Receiving Water(s): _____

23. Has a TMDL study been completed on any of the receiving water(s)? (To determine if a TMDL study has been completed, you may contact IDEM's TMDL program area by phone at 1-317-308-3173.) If yes, note which outfall(s) is subject to effluent limitations and identify the impairment parameter(s) in the table provided below. (attach separate sheets as necessary)

- Yes* No** * If yes, fill in items a.-m. below.
** If no, omit items a.-m. and advance to Part D.

	Receiving Water	Outfall(s)	Parameter(s)
a.	See map at (https://www.in.gov/indot/2892.htm)		
b.			
c.			
d.			
e.			
f.			
g.			
h.			
i.			
j.			
k.			
l.			
m.			

PART D: MATERIALS TO BE SUBMITTED WITH THIS NOI LETTER

► In addition to the information in Parts A, B, and C, an MS4 operator must provide the following.
(Check when completed, or check "NA" if an item is not applicable. For the first of the numbered items below, the requirement must be met and "not applicable" is not provided as an option.):

X	NA	ITEM
1) <input checked="" type="checkbox"/>	----	A copy of the Storm Water Quality Management Plan – Part A: Initial Application Certification Submittal and Checklist.
2) <input type="checkbox"/>	----	Proof of publication in a newspaper of largest circulation in the affected area ¹ .
3) <input type="checkbox"/>	<input checked="" type="checkbox"/>	Certification that appropriate legally-binding agreements or contracts between MS4 entities have been obtained (see APPENDIX A).

PART E: APPLICATION FEE

- Upon submission of this NOI letter, the MS4 Operator shall pay a fee in the amount of fifty dollars (\$50). Make all checks and money orders payable to "IDEM".
- Pursuant to 327 IAC 15, the fee is NOT:
 - Transferable from one (1) MS4 operator to another;
 - Transferable from one (1) person to another;
 - Transferable to any other type of permit issued by IDEM; or
 - Refundable.

Unless requested by the MS4 operator and approved by IDEM within three (3) days of submittal to IDEM or prior to the NOI letter processing by IDEM, whichever is earlier.

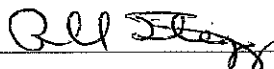
PART F: CERTIFICATION AND SIGNATURE

- Allow a minimum of four (4) weeks for processing the NOI letter information and receipt of your Notice of Sufficiency.
- Make sure you have completed all appropriate sections of this NOI letter and have included all required addenda. Sign and date the NOI letter and return it to the address shown on page one (1) of this NOI letter. Incomplete or incorrect NOI letters may result in a delay in processing and issuance of your Notice of Sufficiency.
- All information requested in this NOI letter is MANDATORY for the administration and processing of your permit pursuant to 327 IAC 15-13. All data received will be regarded as a public record subject to disclosure in accordance with IC 5-14-3 and 327 IAC 12.1.

► The Operator listed in "Part A: GENERAL INFORMATION FOR MS4 OPERATOR" must sign the following certification statement:

"By signing this NOI letter, I hereby 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 gather and evaluate 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 submitting false information, including the possibility of fine and imprisonment for knowing violations."

Type or print Operator Name: ROLAND L. FEGAN, JR.

Signature of Operator: 

Date: 5/13/19
(mm/dd/year)

¹ The notice must be published one (1) time in at least one (1) newspaper of general circulation in each of the counties comprising the MS4 area represented by the notice seeking approval under this NOI letter submittal. The publication of notice must, at a minimum, include the language specified in 327 IAC 15-13.

APPENDIX A: LEGALLY-BINDING AGREEMENT/CONTRACT CERTIFICATION FOR IMPLEMENTATION OF A SWQMP

On _____ (date),

- | | |
|-----------|-----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |
| 9. _____ | 10. _____ |
| 11. _____ | 12. _____ |

(List entity names above)

Entered into an agreement or contract to satisfy the implementation requirements in Parts B and C of the Storm Water Quality Management Plan (SWQMP).

As stated in the agreement or contract, entities agree to the following responsibilities

Please check the boxes corresponding with responsibilities, or portions thereof, of each entity (entity numbers correspond to entity name numbers listed above) entering into this agreement in the table below.

RESPONSIBILITY	ENTITY											
	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
a. Public Education and Outreach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Public Involvement and Participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Illicit Discharge Detection and Elimination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Construction Site Storm Water Run-off Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Postconstruction Storm Water Management in New Development and Redevelopment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Pollution Prevention and Good Housekeeping for Municipal Operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Baseline Characterization and On-Going Monitoring Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

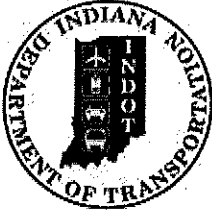
Specify:

If any entity(s) is agreeing to accomplish only a portion of an aforementioned responsibility in the table, please elaborate below on the exact responsibility portion (e.g. entity 1 is responsible for storm drain marking in the MS4 area, entity 2 is responsible for conducting behavioral phone surveys for item (a) in the table). Attach separate sheets as needed.

The following statement and the accompanying signatures serve as the required certification that an agreement or contract has been developed and agreed upon per the requirements of 327 IAC 15-13.

"By signing this certification, I hereby certify under penalty of law that this document and all attachments are, to the best of my knowledge, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Entity	Authorized Signature	Date	Entity	Authorized Signature	Date
1.	_____	_____	2.	_____	_____
3.	_____	_____	4.	_____	_____
5.	_____	_____	6.	_____	_____
7.	_____	_____	8.	_____	_____
9.	_____	_____	10.	_____	_____
11.	_____	_____	12.	_____	_____



INDIANA DEPARTMENT OF TRANSPORTATION

Driving Indiana's Economic Growth

100 North Senate Avenue
Room N642
Indianapolis, Indiana 46204

PHONE: (317)232-5114

Eric Holcomb, Governor
Joe McGuinness, Commissioner

May 15, 2019

The Indianapolis Star
PO Box 145
Indianapolis, IN 46225

To Whom It May Concern:

Please insert the enclosed legal advertisement of Notice of Construction Activity in the above newspaper, issue of:

As Soon as Possible

This Public Notice only needs to run for a duration of one circulation. For necessary payment, you are to complete **two (2) copies** of the Publisher's Claim Forms prescribed by the State Board of Accounts (General Form No. 99P (Rev 1967), be sure to include on all claim requests with your full address and Federal I.D. Number (F.I.N.) in the upper right hand corner of the form, and send to:

Richard Phillabaum
Indiana Department of Transportation
Indiana Government Center Room N642
100 North Senate Avenue
Indianapolis, IN 46204

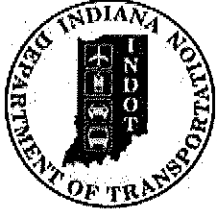
In addition please include on all correspondence and claim requests the seven digit project Designation Number located at the bottom of the advertisement.

If there should be any questions regarding this mailing, please contact Michele Meyer, Storm Water Specialist at (317) 232-5114, or me at (317) 233-5151.

Sincerely,

Richard Phillabaum
Storm Water Team Lead

Enclosure



INDIANA DEPARTMENT OF TRANSPORTATION

Driving Indiana's Economic Growth

100 North Senate Avenue
Room N642
Indianapolis, Indiana 46204

PHONE: (317)232-5114

Eric Holcomb, Governor
Joe McGuinness, Commissioner

Public Notice of Construction Activity

The Indiana Department of Transportation (INDOT) intends to discharge storm water into Urban Area Watersheds (MS4 permitted communities) listed on this website <http://www.in.gov/indot/2892.htm>. INDOT is submitting a Notice of Intent to notify the Indiana Department of Environmental Management of their intent to comply with the requirements under 327 IAC 15-13 to discharge storm water run-off associate with municipal separate storm sewer systems.