



martin and martin, incorporated

37 south main street • suite A • chambersburg, pennsylvania • 17201-2251

(717) 264-6759
(717) 264-7339 (fax)
email: martinmartin@innernet.net

January 28, 2005

Mr. Kirit Shah
Pennsylvania Department of Environmental Protection
Southcentral Regional Office
909 Elmerton Avenue
Harrisburg, PA 17110

RE: TOWNSHIP OF ANTRIM MS4
Notice of Intent for Coverage under General Permit
MM File: 823.262

Dear Mr. Shah:

Attached please find the Notice of Intent (NOI) for coverage under NPDES General Permit for the Township of Antrim, Franklin County, Pennsylvania. A portion of this municipality is included in the Hagerstown, Maryland urbanized area.

In the event that you have any questions, or if additional information is required,, please do not hesitate to contact our office at your convenience.

Sincerely,

MARTIN AND MARTIN, INCORPORATED



William Kick, EIT

WMK
cc: Teresa Schnoor, Antrim Township Administrator (by fax)

MUNICIPAL • URBAN • REGIONAL • LAND DEVELOPMENT AND ENVIRONMENTAL PLANNERS
MUNICIPAL • CIVIL • SANITARY • SOLID WASTE AND ENVIRONMENTAL ENGINEERS



martin and martin, incorporated

37 South Main Street - Suite A - Chambersburg, Pennsylvania 17201-2251

Phone: (717) 264-6750
Fax: (717) 264-7339
email: martinmartin@innernet.net

DATE: 1/28/05 FILE NO.: 823.262

RE: **Antrim Township MS4**
Notice of Intent under General NPDES

TO:

KIRIT SHAH

Pennsylvania Dept. of Environmental Protection

Southcentral Region Office

909 Elmerton Avenue

Harrisburg, PA 17110

GENTLEMEN:

WE ARE SENDING YOU:

☒ ATTACHED

☐ UNDER SEPARATE COVER VIA _____

THE FOLLOWING ITEMS:

☐ PRINTS

☐ PLANS

☐ FORMS

☐ REPORT

☐ OTHER _____

NO. OF COPIES	DESCRIPTION
2	Notice of Intent (NOI) for Coverage Under NPDES General Permit [PAG-13]
1	Cover Letter
1	Permit Filing Fee - Check # 50621

THESE ARE TRANSMITTED AS CHECKED BELOW:

☐ FOR YOUR INFORMATION

☐ FOR YOUR SIGNATURE

☒ FOR APPROVAL

☐ AS REQUESTED

☒ FOR REVIEW & COMMENT

☐ _____

REMARKS

IN THE EVENT YOU HAVE ANY QUESTIONS CONCERNING THIS MATERIAL, PLEASE DO NOT HESITATE TO CONTACT US.

COPY(S) TO: Teresa Schnoor - Antrim Township

William Kick, EIT

MARTIN AND MARTIN, INCORPORATED



NOTICE OF INTENT (NOI)

**FOR COVERAGE UNDER NPDES GENERAL PERMIT
FOR STORMWATER DISCHARGES (PAG-13) FROM
SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS (MS4s)**

05 FEB 1967
WATER MANAGEMENT
OFFICIAL USE ONLY
PH 1:47
SOUTHERN REGIONAL RECORDS

- (1) Please read attached instructions carefully before completing this application.
- (2) If your MS4 discharges into "special protection waters" (or is otherwise ineligible for permit coverage under this General Permit) do not complete this NOI; contact your DEP regional office for an individual permit application.
- (3) Municipalities are encouraged to submit this application jointly in conjunction with existing or proposed implementation of an Act 167 watershed stormwater management plan

A. Stormwater Management Plan Under Act 167	
1.	Is this application being made jointly with other municipalities in conjunction with implementation of an existing or proposed Stormwater Management Plan (or plan update) under Act 167? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes", please complete the information in a – d below
a.	Name of Act 167 watershed(s):
b.	Name of County(ies):
c.	Status of existing Act 167 planning and implementation for the relevant watershed(s): <i>NOTE: MS4s must submit a "letter of intent" from the relevant county(ies) indicating the county commitment to proceed with Act 167 planning (or an update thereof) for the watershed</i>
d.	List of co-applicants (each co-applicant must complete an NOI):
B. Other Multi-Municipal Joint Application	
1.	Is this application being made jointly with other municipalities in a common watershed <u>other than</u> under an Act 167 approach? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes", please complete the information below
a.	Name of Watershed(s): (attach map) _____
b.	Status of joint municipal planning for the relevant watershed(s):

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- | | |
|----|--|
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If "Yes", please complete the information below |
| a. | Name of Watershed(s): (attach map) _____ |
| b. | Status of joint municipal planning for the relevant watershed(s): _____ |

c.	List of co-applicants and contact persons (each co-applicant must complete an NOI):
----	---

C. MS4 Operator Information

1.	Name of MS4 Operator: TOWNSHIP OF ANTRIM, FRANKLIN COUNTY, PENNSYLVANIA	
2.	Contact Person: TERESA SCHNOOR	
3.	Title/Role: TOWNSHIP ADMINISTRATOR	
4.	Division:	Department:
5.	Phone Number: 717-597-3818	Fax: 717-5974257
6.	E-mail: tschnoor@twp.antrim.pa.us	
7.	Mailing Address:	Address Line 1: 10655 ANTRIM CHURCH ROAD Address Line 2: P.O. BOX 130 City: GREENCASTLE, PA Zip Code: 17225

D. MS4 Location Information

1..	Urbanized Area Name: HAGERSTOWN, MD	UA #:
2..	Status of MS4 Operator: <input type="checkbox"/> FEDERAL <input type="checkbox"/> STATE <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE <input checked="" type="checkbox"/> OTHER If private or other, please include Name: LOCAL - TOWNSHIP OF ANTRIM	

E. Description of Receiving Waters (refer to the NOI instructions for more information).

List water bodies into which MS4(s) discharges, and their classification(s)

Name of Waterbody	Designated Uses	Existing Uses	303(d) Listed? (Y/N)	TMDL Parameter(s)
UNNAMED TRIBUTARIES TO CONOCOCHIEAGUE CREEK	WWF	WWF	No	NOT AVAILABLE
UNNAMED TRIBUTARIES TO MARSH RUN WEST BRANCH	WWF	WWF	No	NOT AVAILABLE
UNNAMED TRIBUTARIES TO MARSH RUN	WWF	WWF	No	NOT AVAILABLE

F. Interconnected MS4(s)

1.	List of Downstream MS4s - Name(s) of MS4(s) into which this MS4 directly discharges:	
	N/A	

2.	List of Upstream MS4s - Name(s) of MS4(s) which directly discharge into this MS4:	
	N/A	

G. Stormwater Management Program

MS4 operators must submit their plan with BMPs, measurable goals and a schedule, as part of their NOI. This General Permit allows two options—follow DEP's recommended approach, or develop an independent program which must be approved by DEP.

MS4 Operator's Plan for Each Minimum Control Measure For each Minimum Control Measure required to be developed and implemented under the General Permit, applicants may choose to implement each stormwater management program measure according to the DEP Stormwater Management Protocol ("*Protocol*"), or develop and (upon DEP approval) implement their own stormwater management program measures that meet the requirements of this General Permit.

Therefore, MS4 operators have the option to implement one or more of the Minimum Control Measures according to the *Protocol* and identify and implement the remaining Minimum Control Measures through their own proposed approach.

MS4 operators who elect to implement the approved stormwater management program entirely under the *Protocol* and in conjunction with the Pa. Stormwater Management Act (Act 167), can be eligible to receive up to 75 percent funding for the permit requirements (for more details, refer to Appendix 2 and the Fact Sheet.). In addition, their schedule is delayed 1 year in large part for each element in the *Protocol*.

Below, check the box(es) next to the Minimum Control Measure(s) for which the DEP *Protocol* will be followed, and check the box(es) next to the Minimum Control Measure(s) for which the MS4 operator will develop its own program. In addition, provide the names of the responsible person(s) for implementing the program for each Minimum Control Measure.

For any Minimum Control Measure in which the MS4 operator will not follow the DEP *Protocol*, the applicant is required to submit to DEP with this NOI its proposed stormwater management program, including BMPs, measurable goals and a schedule for DEP approval. See the NOI instructions for more detailed information. No documentation is required to be submitted with this NOI for those Minimum Control Measures in which the MS4 operator will be implementing the DEP *Protocol*.

The *Protocol* and/or the proposed program become part of the requirements of the permit upon approval by DEP, as applicable.

Minimum Control Measures	The MS4 Operator will implement the minimum control measure as described in the DEP <i>Protocol</i>	The MS4 Operator will develop its own program for this minimum measure.	Name and telephone number of the principal person responsible for Implementation
(1) Public Education and Outreach	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)
(2) Public Participation and Involvement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)
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(6) Pollution Prevention and Good Housekeeping for Municipal Operations and Maintenance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)

H. Compliance History Review

Is/was applicant in violation of any of DEP's permits issued by DEP, or any orders, regulations or schedules of compliance?

Yes ☐ No ☒

If yes, list each permit, order, regulation or schedule that is/was in violation and provide compliance status of the permitted activity (use additional sheets to provide information on all permits).

Brief Description of Non-Compliance:

Steps Taken to Return to Compliance and Dates Compliance Achieved:

I. 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 submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name and official title: (Use corporate or professional seal as appropriate)

TERESA SCHNOOR, ANTRIM TOWNSHIP ADMINISTRATOR

Signature: *Teresa Schnoor* Date Signed: 01-27-05

Sworn and subscribed to before me, this 27th day of January, 2005.

Charles F. [Signature]
Notary Public

My commission expires

COMMONWEALTH OF PENNSYLVANIA
Charles F. [Signature] Notary Public
Hamilton County
My Commission Expires 12/31/2007

Member, Pennsylvania Association of Notaries

(Notary Public Seal and Stamp)

TOWNSHIP OF ANTRIM

FRANKLIN COUNTY

PENNSYLVANIA

NOTICE OF INTENT (NOI)

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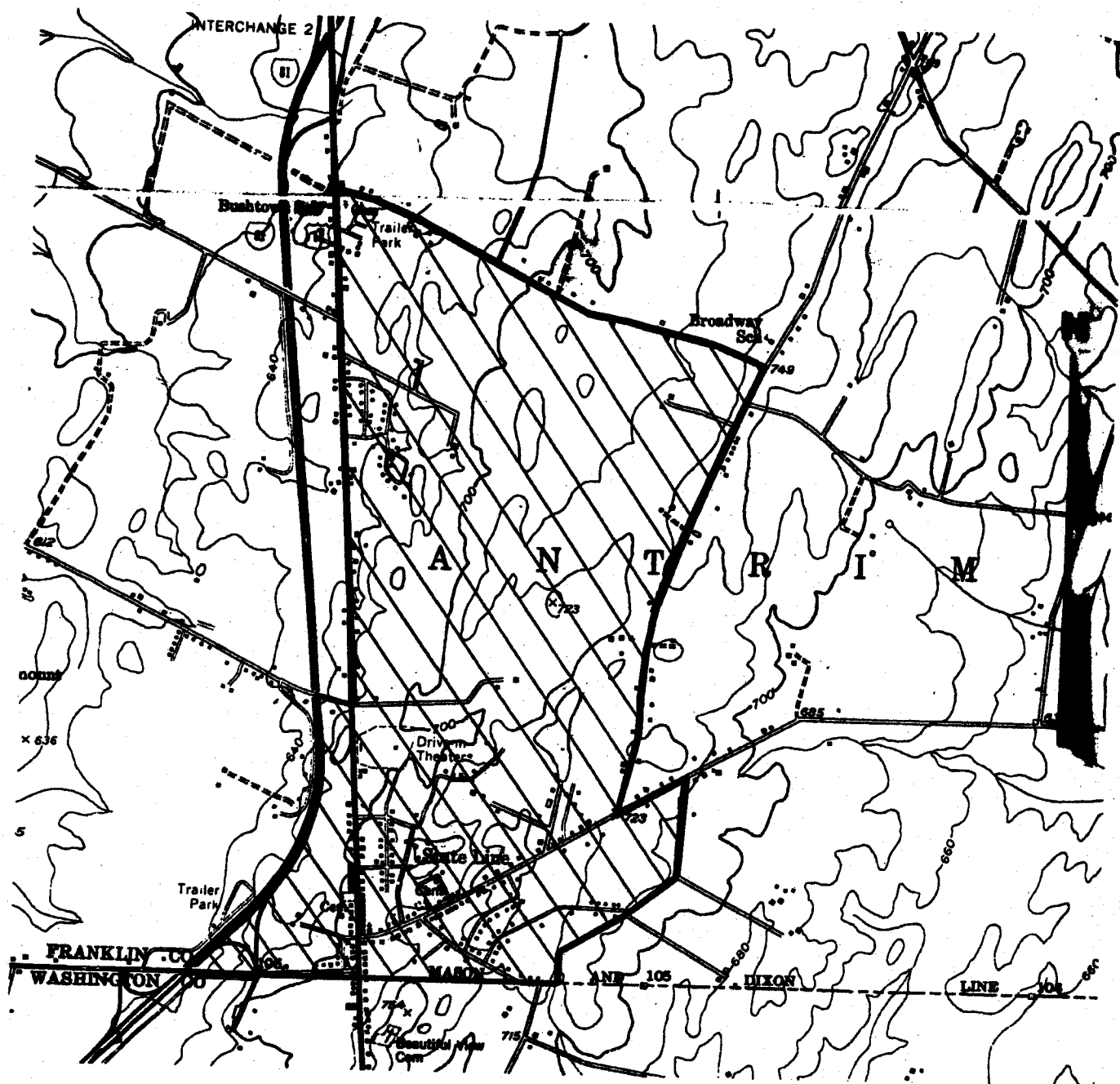
NOI ATTACHMENTS

USGS URBANIZED AREA MAP

2000 U.S. CENSUS URBANIZED AREAS MAPS

**ANTRIM TOWNSHIP BASE MAP WITH HAGERSTOWN, MD URBANIZED
AREA BOUNDARY**

USGS URBAINIZED AREA MAP



URBANIZED AREA MAP

ANTRIM TOWNSHIP, FRANKLIN COUNTY
PENNSYLVANIA



URBANIZED AREA NAME: HAGERSTOWN, MD





SCALE: 1"=2,000'

2000 U.S. CENSUS URBANIZED AREAS MAPS

Hagerstown, MD - WV - PA Urbanized Area Storm Water Entities as Defined by the 2000 Census

2000 Census Urbanized Areas

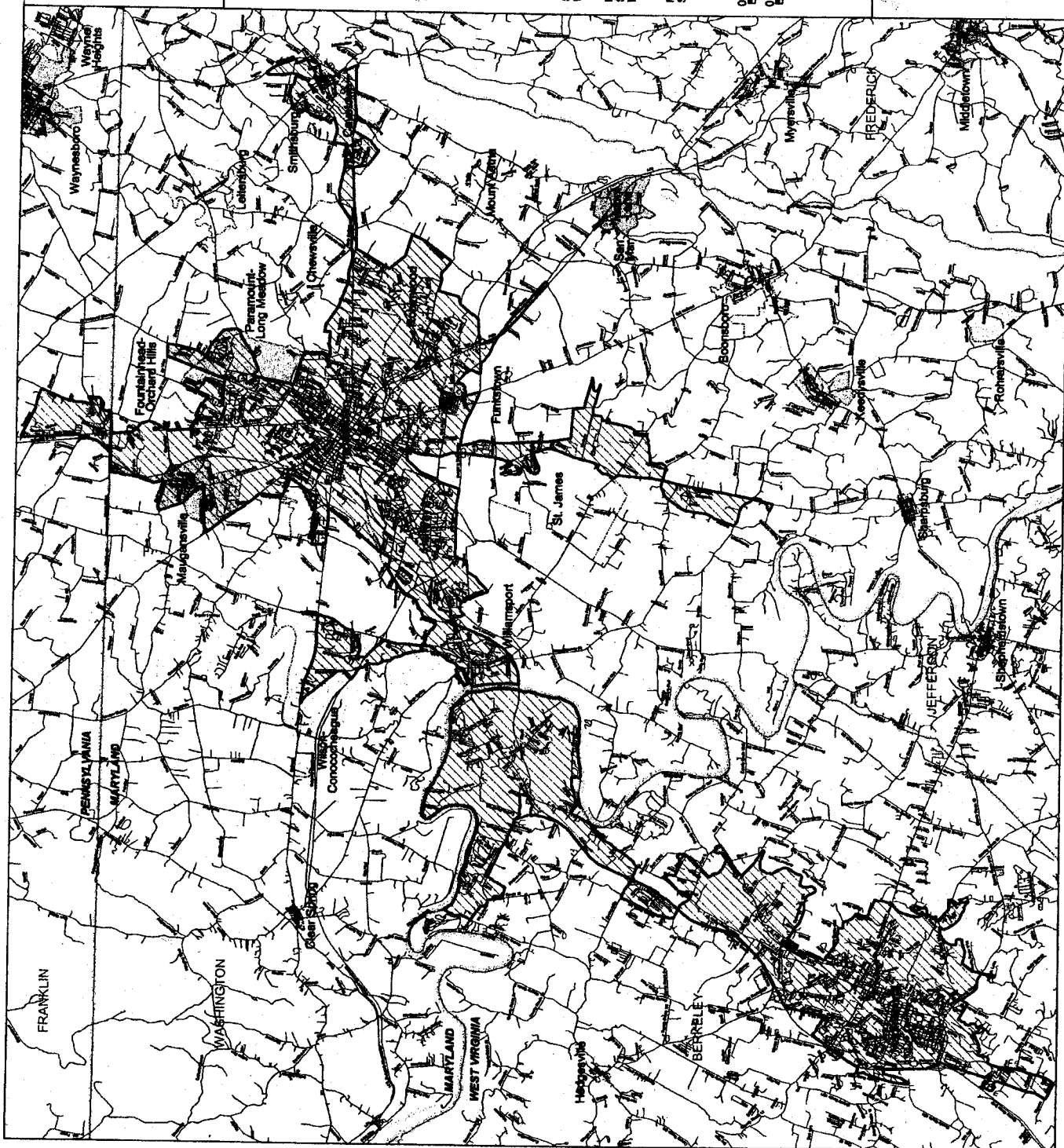
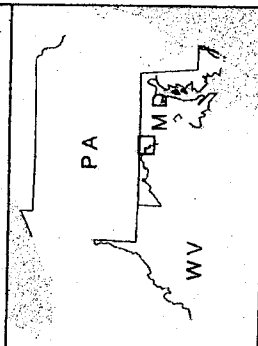
-  Hagerstown, MD - WV - PA
-  Frederick, MD

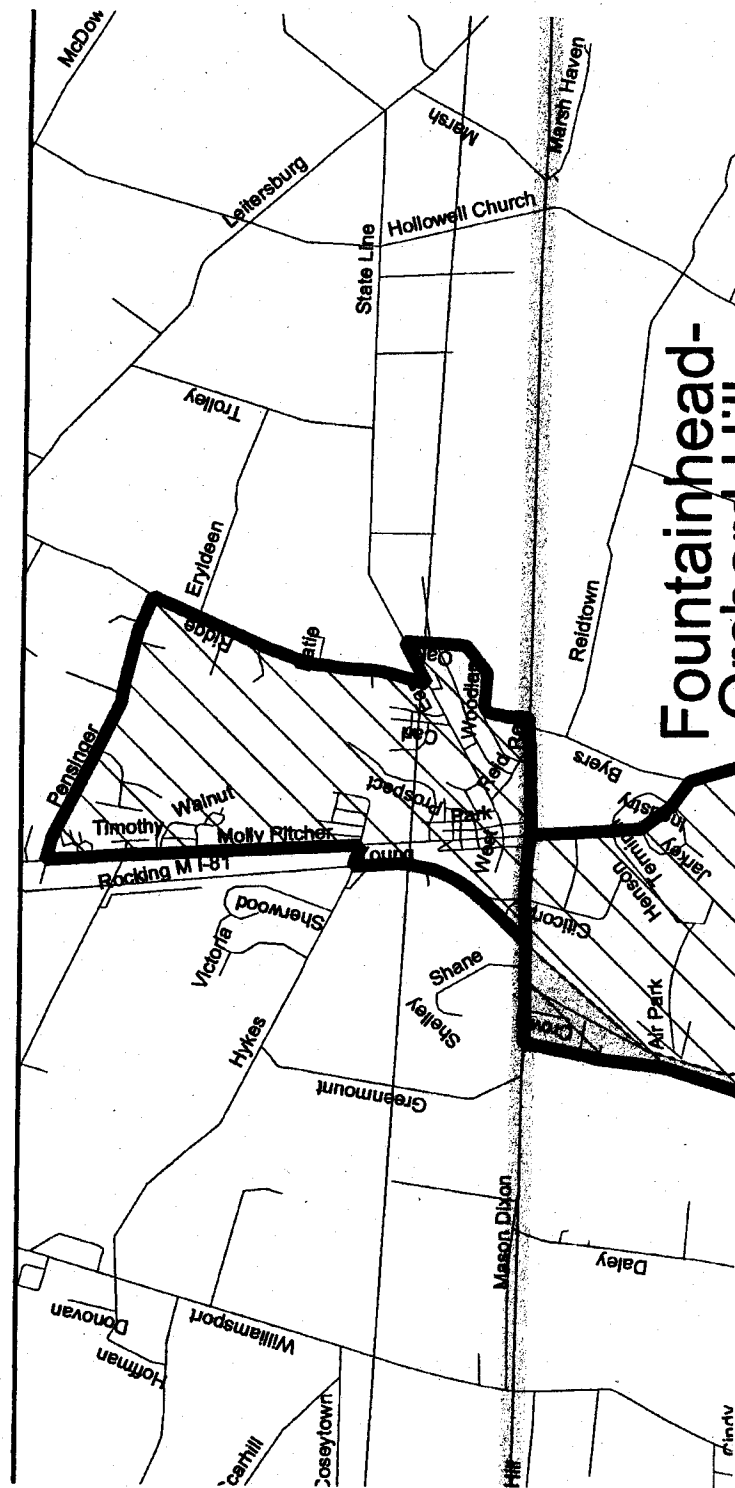
-  Municipal Boundaries
-  County Boundaries
-  Major Waterbodies
-  Roads

SOURCE:
US Census Bureau TIGER data, 2000 Census

PROJECTION:
State Plane Coordinate System - Maryland
Horizontal datum - NAD83

MAP DESIGN:
September 23, 2002





Fountainhead- North Carolina

**ANTRIM TOWNSHIP BASE MAP WITH HAGERSTOWN, MD
URBANIZED AREA BOUNDARY**



NOTICE OF INTENT (NOI)

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SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS (MS4s)**

RECEIVED
SOUTHERN DISTRICT
05 FEB 71
OFFICIAL USE ONLY
PH 1-48
MANAGEMENT

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Name and official title: (Use corporate or professional seal as appropriate)

TERESA SCHNOOR, ANTRIM TOWNSHIP ADMINISTRATOR

Signature: *Teresa Schnoor* Date Signed: 01-27-05

Sworn and subscribed to before me, this 27th day of JANUARY, 2005

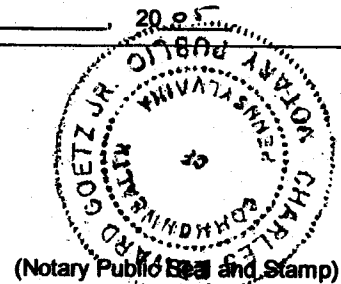
Charles F. Goetz Jr.
Notary Public

My commission expires

COMMONWEALTH OF PENNSYLVANIA

Charles F. Goetz Jr., Notary Public
Harrisburg, Pennsylvania
My Commission Expires 01-22-2007

Member, Pennsylvania Association of Notaries



TOWNSHIP OF ANTRIM

FRANKLIN COUNTY

PENNSYLVANIA

**NOTICE OF INTENT (NOI)
FOR COVERAGE UNDER NPDES GENERAL PERMIT
FOR STORMWATER DISCHARGES (PAG-13) FROM
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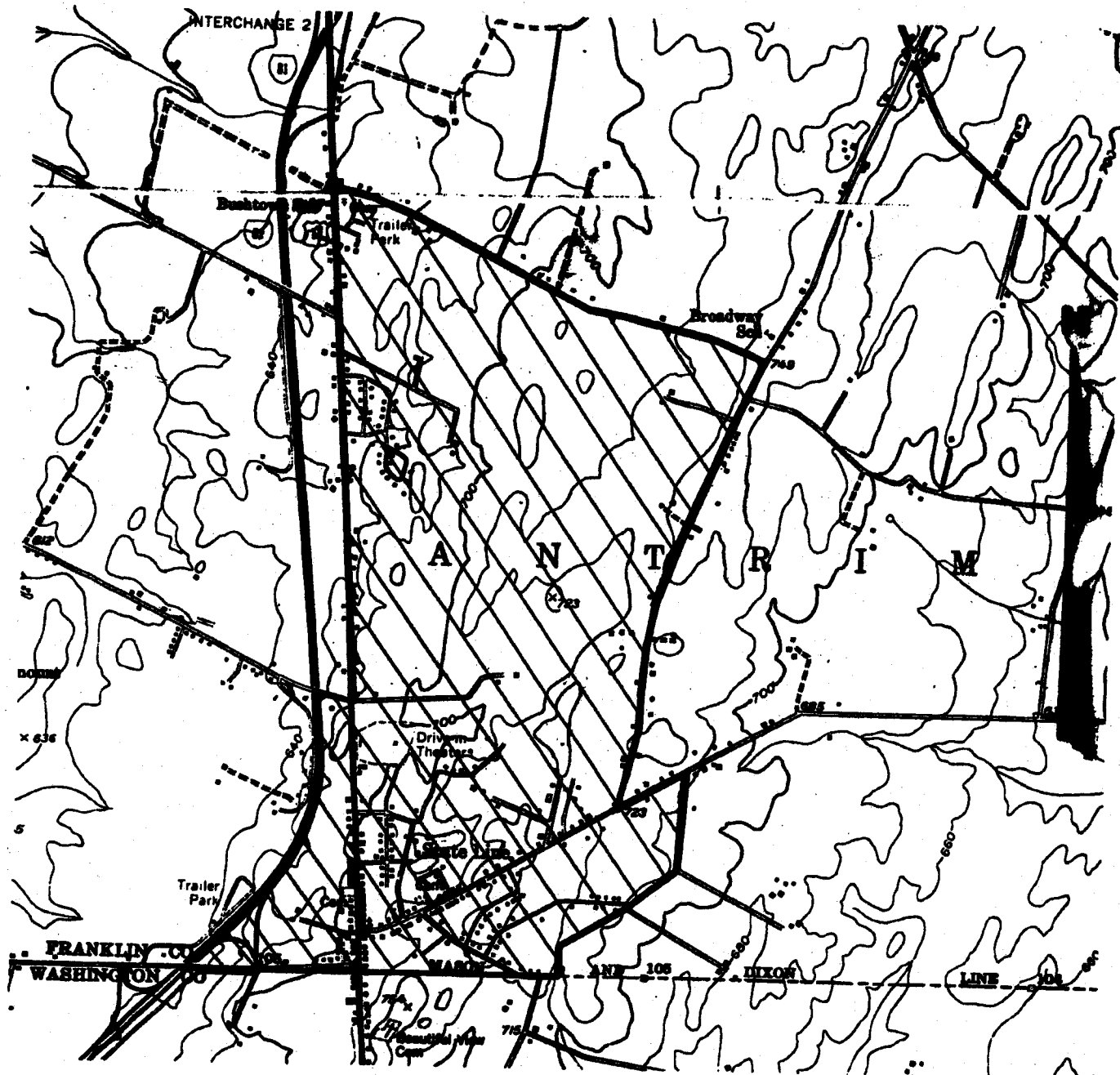
NOI ATTACHMENTS

USGS URBANIZED AREA MAP

2000 U.S. CENSUS URBANIZED AREAS MAPS

**ANTRIM TOWNSHIP BASE MAP WITH HAGERSTOWN, MD URBANIZED
AREA BOUNDARY**

USGS URBAINIZED AREA MAP



URBANIZED AREA MAP

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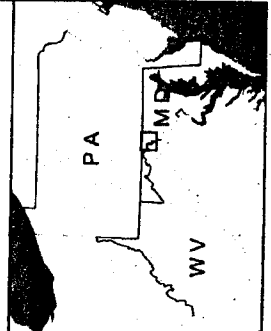
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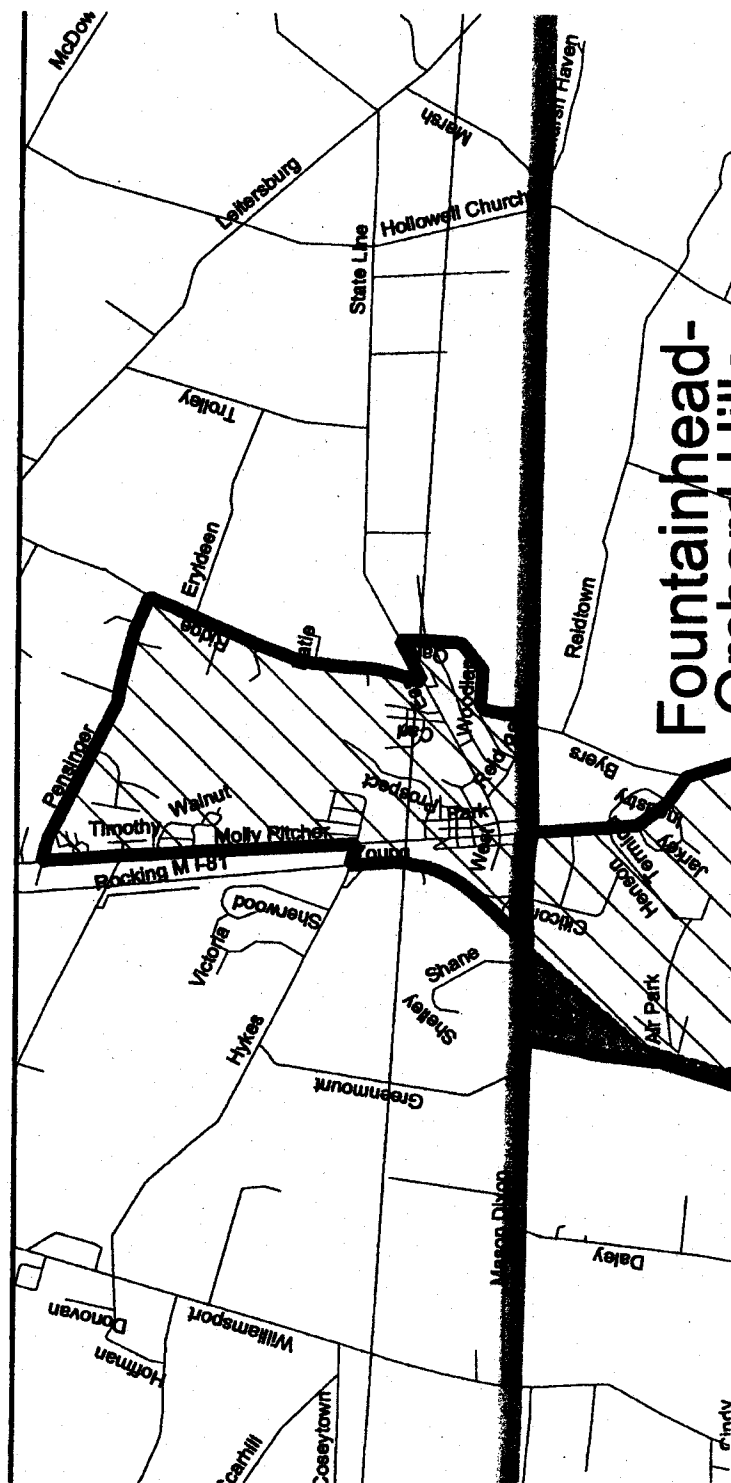
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SOURCE:
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PROJECTION:
State Plane Coordinate System - Maryland
Horizontal datum - NAD83

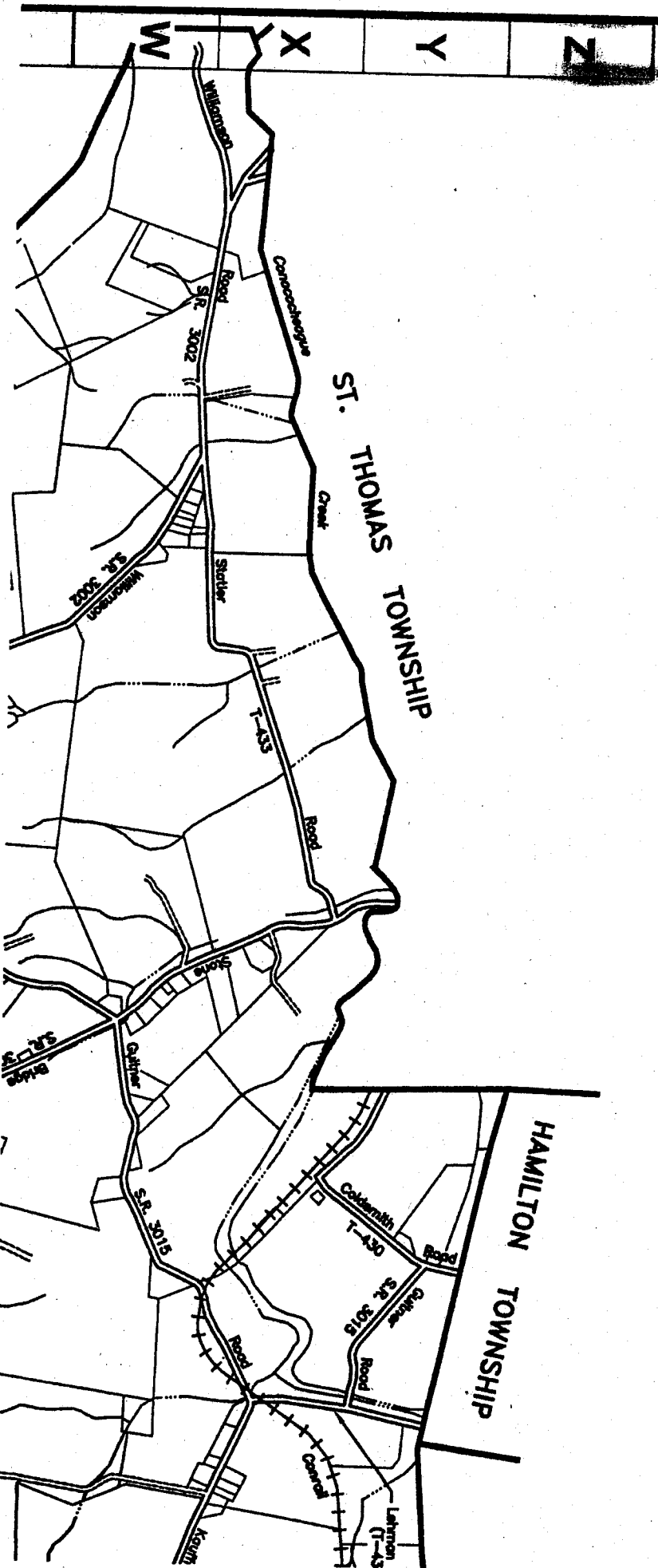
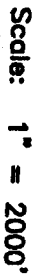
MAP DESIGN:
September 23, 2002





**ANTRIM TOWNSHIP BASE MAP WITH HAGERSTOWN, MD
URBANIZED AREA BOUNDARY**

BASE MAP WITH HAGERST





martin and martin, incorporated

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January 28, 2005

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WMK
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KIRIT SHAH

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05 FEB 11 PM 1:47

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c.	Status of existing Act 167 planning and implementation for the relevant watershed(s):
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NOTE: MS4s must submit a "letter of intent" from the relevant county(ies) indicating the county commitment to proceed with Act 167 planning (or an update thereof) for the watershed

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----	---

B. Other Multi-Municipal Joint Application

1. Is this application being made jointly with other municipalities in a common watershed other than under an Act 167 approach? ☐ Yes ☒ No

If "Yes", please complete the information below

a.	Name of Watershed(s): (attach map)
----	------------------------------------

b.	Status of joint municipal planning for the relevant watershed(s):
----	---

c. List of co-applicants and contact persons (each co-applicant must complete an NOI):

C. MS4 Operator Information

1. Name of MS4 Operator: **TOWNSHIP OF ANTRIM, FRANKLIN COUNTY, PENNSYLVANIA**

2. Contact Person: **TERESA SCHNOOR**

3. Title/Role: **TOWNSHIP ADMINISTRATOR**

4. Division:

Department:

5. Phone Number: **717-597-3818**

Fax: **717-5974257**

6. E-mail: **tschnoor@twp.antrim.pa.us**

7. Mailing Address:

Address Line 1: **10655 ANTRIM CHURCH ROAD**

Address Line 2: **P.O. BOX 130**

City: **GREENCASTLE, PA**

Zip Code: **17225**

D. MS4 Location Information

1.. Urbanized Area Name: **HAGERSTOWN, MD**

UA #:

2.. Status of MS4 Operator: ☐ FEDERAL ☐ STATE ☐ PUBLIC ☐ PRIVATE ☒ OTHER
If private or other, please include Name: **LOCAL - TOWNSHIP OF ANTRIM**

E. Description of Receiving Waters (refer to the NOI instructions for more information).

List water bodies into which MS4(s) discharges, and their classification(s)

Name of Waterbody	Designated Uses	Existing Uses	303(d) Listed? (Y/N)	TMDL Parameter(s)
UNNAMED TRIBUTARIES TO CONOCOCHIEAGUE CREEK	WWF	WWF	No	NOT AVAILABLE
UNNAMED TRIBUTARIES TO MARSH RUN WEST BRANCH	WWF	WWF	No	NOT AVAILABLE
UNNAMED TRIBUTARIES TO MARSH RUN	WWF	WWF	No	NOT AVAILABLE

F. Interconnected MS4(s)

1. List of Downstream MS4s - Name(s) of MS4(s) into which this MS4 directly discharges:

N/A

2.	List of Upstream MS4s - Name(s) of MS4(s) which directly discharge into this MS4:	
	N/A	

G. Stormwater Management Program

MS4 operators must submit their plan with BMPs, measurable goals and a schedule, as part of their NOI. This General Permit allows two options—follow DEP's recommended approach, or develop an independent program which must be approved by DEP.

MS4 Operator's Plan for Each Minimum Control Measure For each Minimum Control Measure required to be developed and implemented under the General Permit, applicants may choose to implement each stormwater management program measure according to the DEP Stormwater Management Protocol ("*Protocol*"), or develop and (upon DEP approval) implement their own stormwater management program measures that meet the requirements of this General Permit.

Therefore, MS4 operators have the option to implement one or more of the Minimum Control Measures according to the *Protocol* and identify and implement the remaining Minimum Control Measures through their own proposed approach.

MS4 operators who elect to implement the approved stormwater management program entirely under the *Protocol* and in conjunction with the Pa. Stormwater Management Act (Act 167), can be eligible to receive up to 75 percent funding for the permit requirements (for more details, refer to Appendix 2 and the Fact Sheet.). In addition, their schedule is delayed 1 year in large part for each element in the *Protocol*.

Below, check the box(es) next to the Minimum Control Measure(s) for which the DEP *Protocol* will be followed, and check the box(es) next to the Minimum Control Measure(s) for which the MS4 operator will develop its own program. In addition, provide the names of the responsible person(s) for implementing the program for each Minimum Control Measure.

For any Minimum Control Measure in which the MS4 operator will not follow the DEP *Protocol*, the applicant is required to submit to DEP with this NOI its proposed stormwater management program, including BMPs, measurable goals and a schedule for DEP approval. See the NOI instructions for more detailed information. No documentation is required to be submitted with this NOI for those Minimum Control Measures in which the MS4 operator will be implementing the DEP *Protocol*.

The *Protocol* and/or the proposed program become part of the requirements of the permit upon approval by DEP, as applicable.

Minimum Control Measures	The MS4 Operator will implement the minimum control measure as described in the DEP <i>Protocol</i>	The MS4 Operator will develop its own program for this minimum measure.	Name and telephone number of the principal person responsible for Implementation
(1) Public Education and Outreach	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)
(2) Public Participation and Involvement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)
(3) Illicit Discharge Detection and Elimination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)
(4) Construction Site Stormwater Runoff Control	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)

(5) Post-Construction Stormwater Management in New Development and Redevelopment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)
(6) Pollution Prevention and Good Housekeeping for Municipal Operations and Maintenance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TERESA SCHNOOR (717-597-3818)

H. Compliance History Review

Is/was applicant in violation of any of DEP's permits issued by DEP, or any orders, regulations or schedules of compliance?

Yes ☐ No ☒

If yes, list each permit, order, regulation or schedule that is/was in violation and provide compliance status of the permitted activity (use additional sheets to provide information on all permits).

Brief Description of Non-Compliance:

Steps Taken to Return to Compliance and Dates Compliance Achieved:

I. 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 submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name and official title: (Use corporate or professional seal as appropriate)

TERESA SCHNOOR, ANTRIM TOWNSHIP ADMINISTRATOR

Signature: *Teresa Schnoor* Date Signed: 01-27-05

Sworn and subscribed to before me, this 27th day of JANUARY, 2005.

Charles F. [Signature]
Notary Public

My commission expires

COMMONWEALTH OF PENNSYLVANIA
Charles F. [Signature] Notary Public
Harrisburg, Pennsylvania
My Commission Expires 02/22/2007

Member, Pennsylvania Association of Notaries

(Notary Public Seal and Stamp)

TOWNSHIP OF ANTRIM

FRANKLIN COUNTY

PENNSYLVANIA

NOTICE OF INTENT (NOI)

**FOR COVERAGE UNDER NPDES GENERAL PERMIT
FOR STORMWATER DISCHARGES (PAG-13) FROM
SMALL MUNICIPAL SEWERAGE STORM SEWER SYSTEMS (MS4s)**

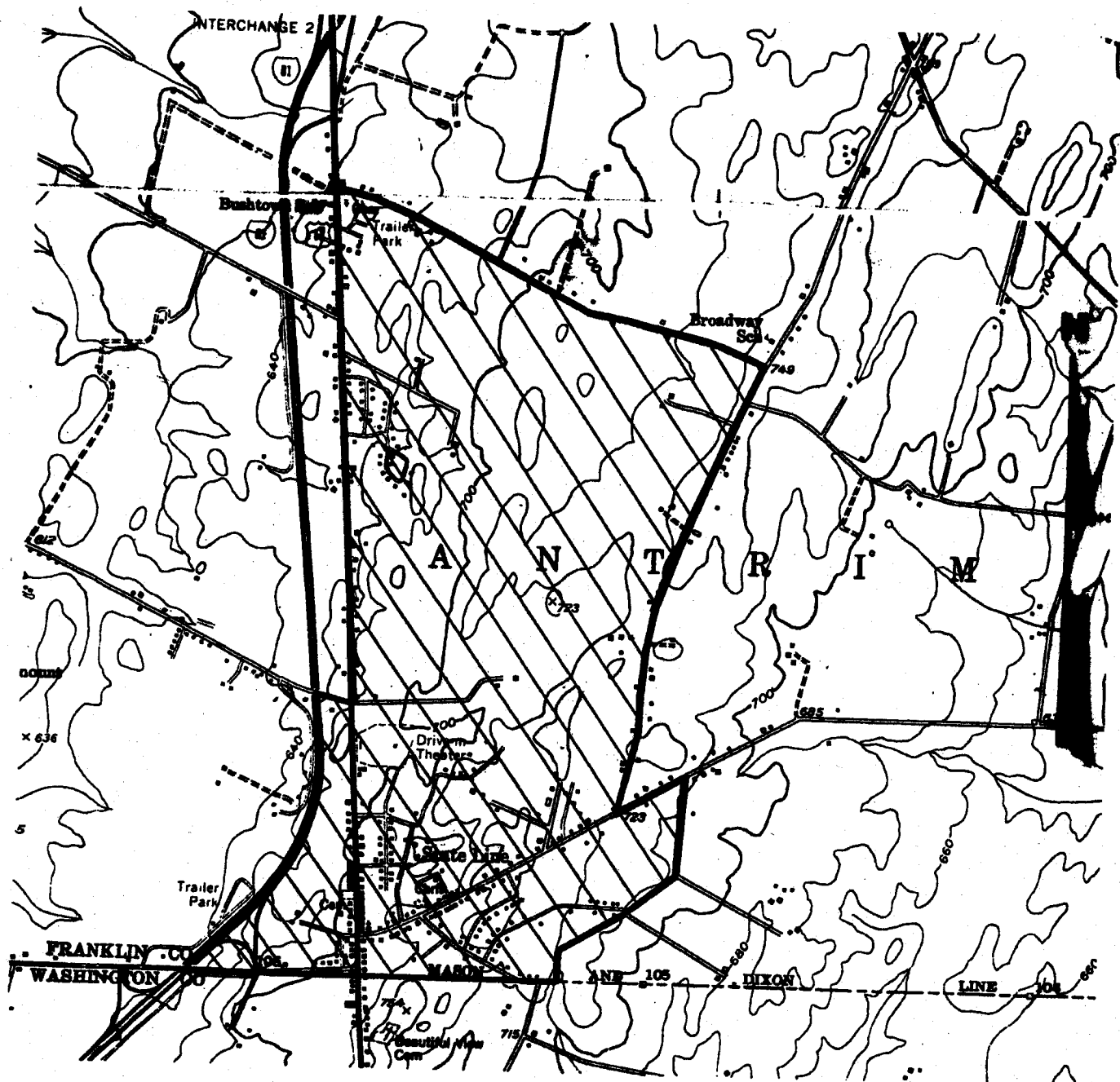
NOI ATTACHMENTS

USGS URBANIZED AREA MAP

2000 U.S. CENSUS URBANIZED AREAS MAPS

**ANTRIM TOWNSHIP BASE MAP WITH HAGERSTOWN, MD URBANIZED
AREA BOUNDARY**

USGS URBAINIZED AREA MAP



URBANIZED AREA MAP

ANTRIM TOWNSHIP, FRANKLIN COUNTY
PENNSYLVANIA



URBANIZED AREA NAME: HAGERSTOWN, MD

SCALE: 1"=2,000'

2000 U.S. CENSUS URBANIZED AREAS MAPS


Hagerstown, MD - WV - PA Urbanized Area Storm Water Entities as Defined by the 2000 Census

2000 Census Urbanized Areas

-  Hagerstown, MD - WV - PA
-  Frederick, MD

 Municipal Boundaries

 County Boundaries

 Major Waterbodies

 Roads

SOURCE:

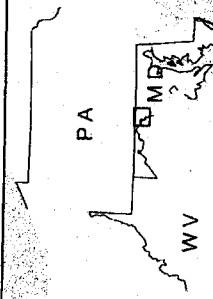
US Census Bureau TIGER data, 2000 Census

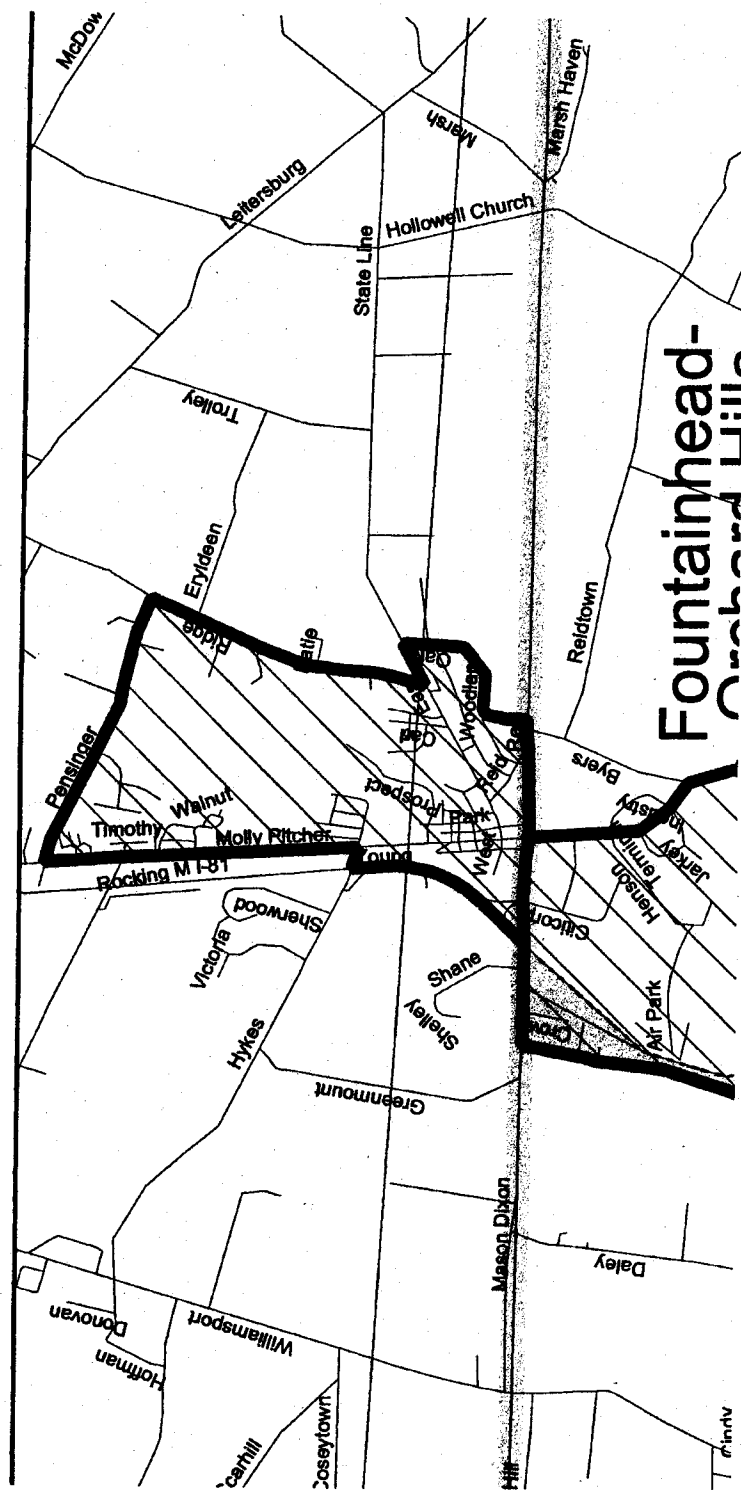
PROJECTION:

State Plane Coordinate System - Maryland
Horizontal datum - NAD83

MAP DESIGN:

September 23, 2002

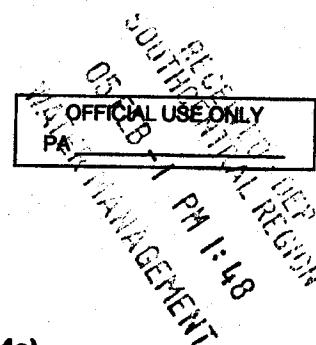




**ANTRIM TOWNSHIP BASE MAP WITH HAGERSTOWN, MD
URBANIZED AREA BOUNDARY**



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF WATERSHED MANAGEMENT



NOTICE OF INTENT (NOI)

FOR COVERAGE UNDER NPDES GENERAL PERMIT
FOR STORMWATER DISCHARGES (PAG-13) FROM
SMALL MUNICIPAL SEPARATE STORM SEWER SYSTEMS (MS4s)

- (1) Please read attached instructions carefully before completing this application.
- (2) If your MS4 discharges into "special protection waters" (or is otherwise ineligible for permit coverage under this General Permit) do not complete this NOI; contact your DEP regional office for an individual permit application.
- (3) Municipalities are encouraged to submit this application jointly in conjunction with existing or proposed implementation of an Act 167 watershed stormwater management plan

A. Stormwater Management Plan Under Act 167

1.	Is this application being made jointly with other municipalities in conjunction with implementation of an existing or proposed Stormwater Management Plan (or plan update) under Act 167? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes", please complete the information in a - d below
a.	Name of Act 167 watershed(s):
b.	Name of County(ies):
c.	Status of existing Act 167 planning and implementation for the relevant watershed(s):
NOTE: MS4s must submit a "letter of intent" from the relevant county(ies) indicating the county commitment to proceed with Act 167 planning (or an update thereof) for the watershed	
d.	List of co-applicants (each co-applicant must complete an NOI):

B. Other Multi-Municipal Joint Application

1.	Is this application being made jointly with other municipalities in a common watershed <u>other than</u> under an Act 167 approach? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes", please complete the information below
a.	Name of Watershed(s): (attach map) _____
b.	Status of joint municipal planning for the relevant watershed(s):

c.	List of co-applicants and contact persons (each co-applicant must complete an NOI):
----	---

C. MS4 Operator Information

1.	Name of MS4 Operator: TOWNSHIP OF ANTRIM, FRANKLIN COUNTY, PENNSYLVANIA	
2.	Contact Person: TERESA SCHNOOR	
3.	Title/Role: TOWNSHIP ADMINISTRATOR	
4.	Division:	Department:
5.	Phone Number: 717-597-3818	Fax: 717-5974257
6.	E-mail: tschnoor@twp.antrim.pa.us	
7.	Mailing Address:	Address Line 1: 10655 ANTRIM CHURCH ROAD Address Line 2: P.O. BOX 130 City: GREENCASTLE, PA Zip Code: 17225

D. MS4 Location Information

1..	Urbanized Area Name: HAGERSTOWN, MD	UA #:
2..	Status of MS4 Operator: <input type="checkbox"/> FEDERAL <input type="checkbox"/> STATE <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE <input checked="" type="checkbox"/> OTHER If private or other, please include Name: LOCAL - TOWNSHIP OF ANTRIM	

E. Description of Receiving Waters (refer to the NOI instructions for more information).

List water bodies into which MS4(s) discharges, and their classification(s)

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F. Interconnected MS4(s)

1.	List of Downstream MS4s - Name(s) of MS4(s) into which this MS4 directly discharges:	
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G. Stormwater Management Program

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Name and official title: (Use corporate or professional seal as appropriate)

TERESA SCHNOOR, ANTRIM TOWNSHIP ADMINISTRATOR

Signature: *Teresa Schnoor*

Date Signed: 01-27-05

Sworn and subscribed to before me, this 27th day of JANUARY, 2005

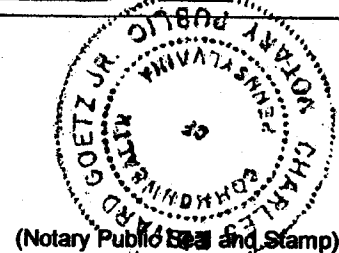
Charles E. Goetz Jr.
Notary Public

My commission expires

COMMONWEALTH OF PENNSYLVANIA

Charles E. Goetz Jr., Notary Public
Harrisburg, Berks County
My Commission Expires 12/22/2007

Member, Pennsylvania Association of Notaries



TOWNSHIP OF ANTRIM

FRANKLIN COUNTY

PENNSYLVANIA

NOTICE OF INTENT (NOI)

**FOR COVERAGE UNDER NPDES GENERAL PERMIT
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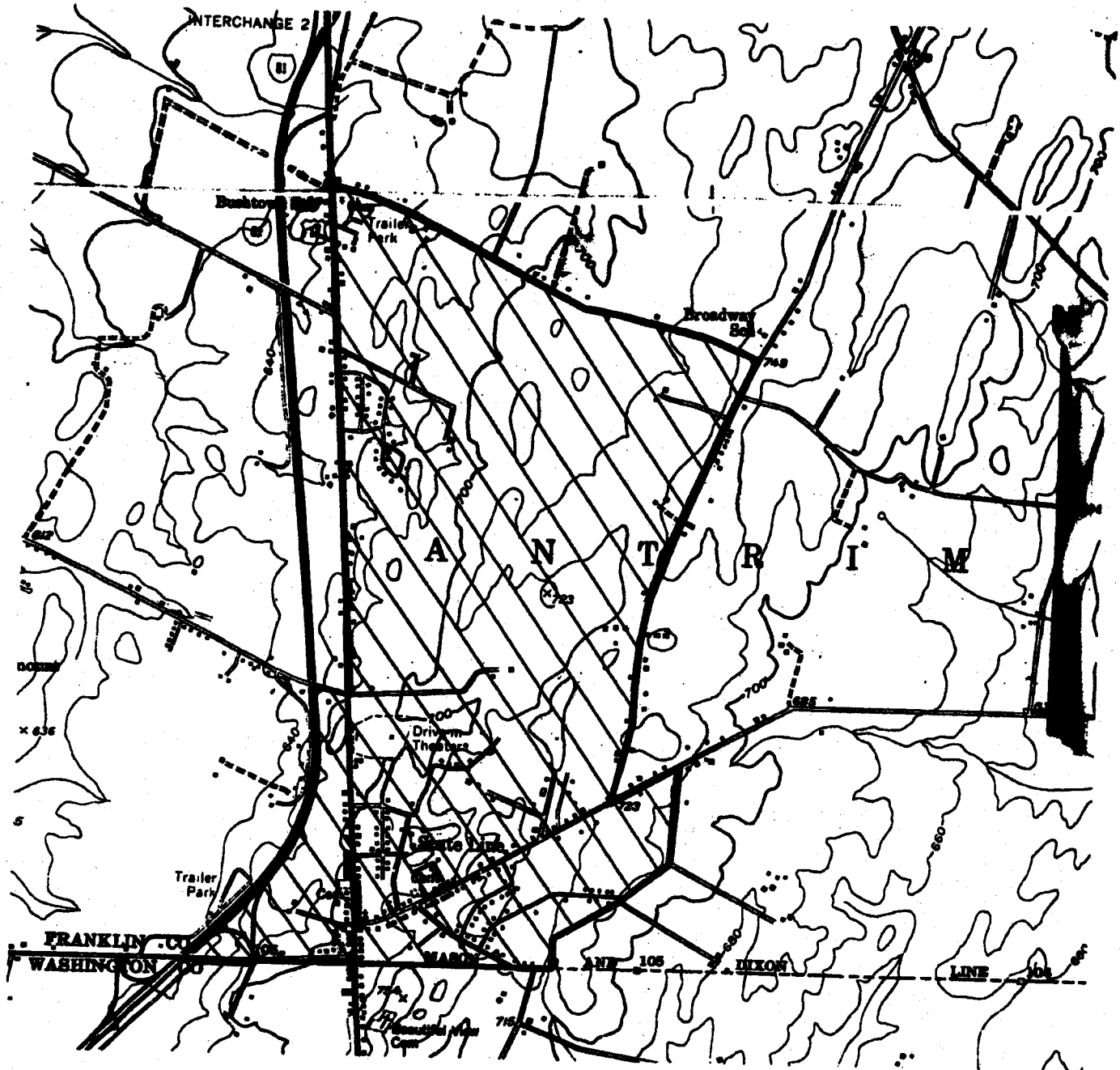
NOI ATTACHMENTS

USGS URBANIZED AREA MAP

2000 U.S. CENSUS URBANIZED AREAS MAPS

**ANTRIM TOWNSHIP BASE MAP WITH HAGERSTOWN, MD URBANIZED
AREA BOUNDARY**

USGS URBAINIZED AREA MAP



URBANIZED AREA MAP



ANTRIM TOWNSHIP, FRANKLIN COUNTY
PENNSYLVANIA

URBANIZED AREA NAME: HAGERSTOWN, MD

SCALE: 1"=2,000'

2000 U.S. CENSUS URBANIZED AREAS MAPS

Hagerstown, MD - WV - PA Urbanized Area Storm Water Entities as Defined by the 2000 Census

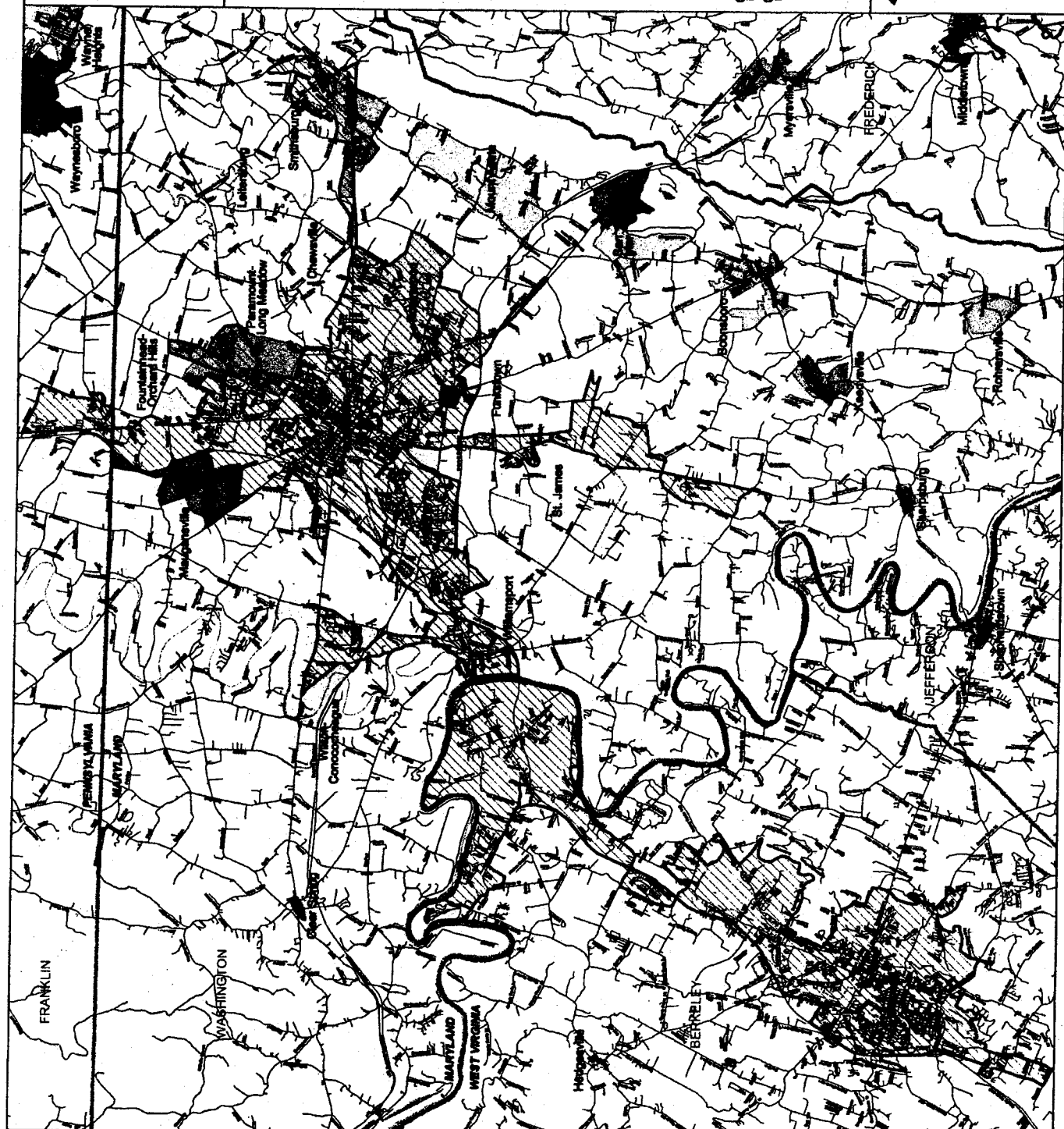
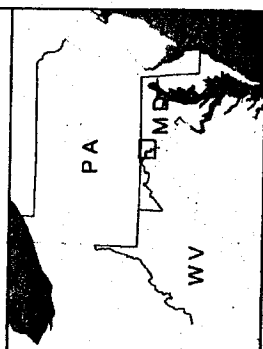
2000 Census Urbanized Areas
 Hagerstown, MD - WV - PA
 Frederick, MD

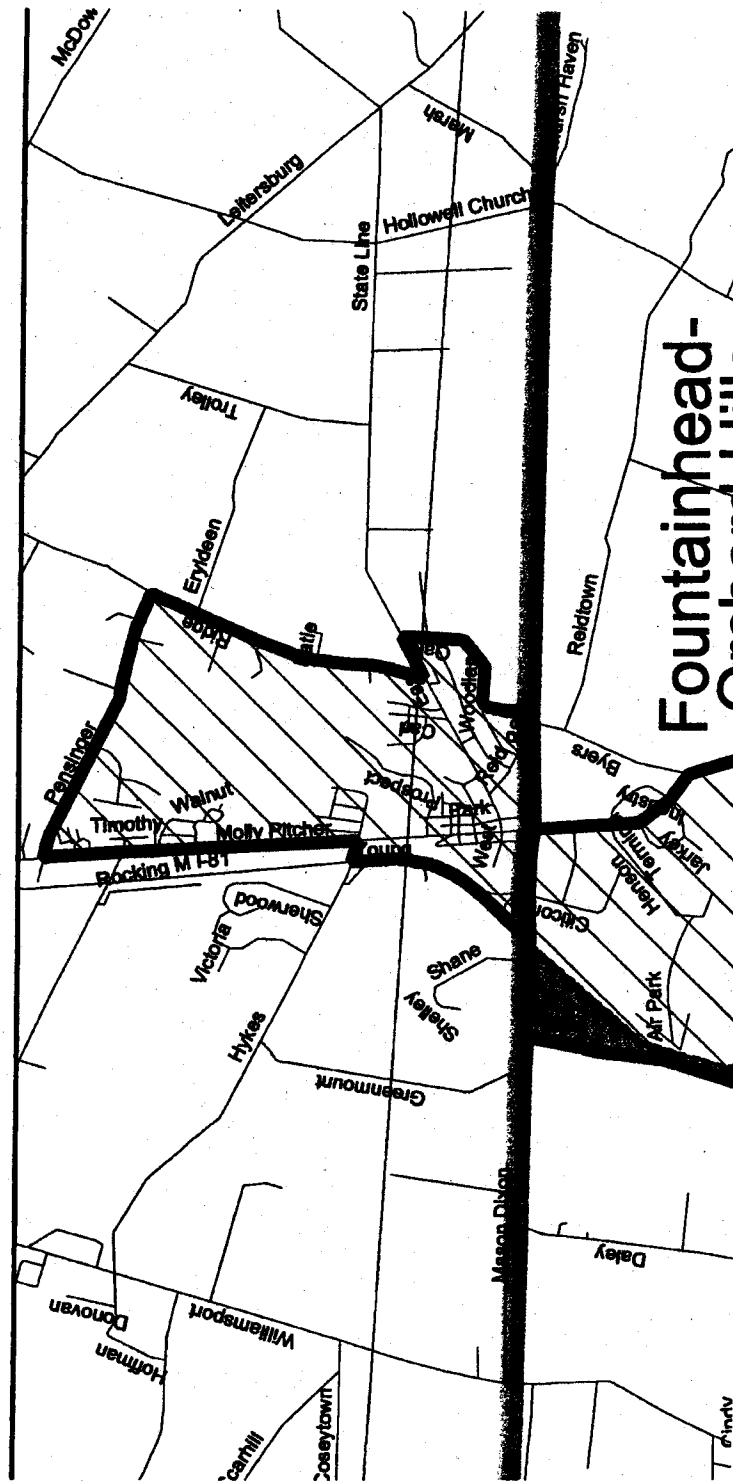
 Municipal Boundaries
 County Boundaries
 Major Waterbodies
 Roads

SOURCE:
US Census Bureau TIGER data, 2000 Census

PROJECTION:
State Plane Coordinate System - Maryland
Horizontal datum - NAD83

MAP DESIGN:
September 23, 2002





**ANTRIM TOWNSHIP BASE MAP WITH HAGERSTOWN, MD
URBANIZED AREA BOUNDARY**



Scale: 1" = 2000'

ANTRIM FRANK PEN

BASE MAP WITH HAGERST

