MA6910332

B. Suggested Form for Notice of Intent (NOI) for the Remediation General Permit

1. General site information. Please provide the following information about the site:

a) Name of **facility/site**: Channel Center		**Facility/site** address: 10,20, and 30 Channel Center Street		
Location of **facility/site**: longitude: 42.2 latitude: 71.3	Facility SIC code(s):	Street: 10, 20, and 30 Channel Center Street		
b) Name of **facility/site owner:** Channel Center Holdings, VAF, LLC		Town: Boston		
Email address of owner: cfleatherbee@aol.com		State: MA	Zip: 02210	County: Suffolk
Telephone no.of facility/site **owner**: (617) 423-6723				
Fax no. of facility/site **owner**: (617) 423-6270		**Owner** is (check one): 1. Federal____ 2. State/Tribal____ 3. Private ✓ 4. other, if so, describe:		
Address of **owner** (if different from site):				
Street: 134 Old Post Road				
Town: Southport	State: CT	Zip: 06890	County: Fairfield	
c) Legal name of **operator**: Gilbane Building Company	**Operator** telephone no: (617) 478-3307			
	Operator fax no.: (617) 478-3357	**Operator** email: rhutchins@gibaneco.com		
Operator contact name and title: Ryan E. Hutchins, Senior Project Exective				

Address of **operator** (if different from owner):	Street: 155 Federal Street Suite 400		
Town: Boston	State: MA	Zip: 02110	County: Suffolk

d) Check "yes" or "no" for the following:
1. Has a prior NPDES permit exclusion been granted for the discharge? Yes___ No✓, if "yes," number:
2. Has a prior NPDES application (Form 1 & 2C) ever been filed for the discharge? Yes___ No✓, if "yes," date and tracking #:
3. Is the discharge a "new discharge"as defined by 40 CFR 122.2? Yes___ No✓
4. For sites in Massachusetts, is the discharge covered under the MA Contingency Plan (MCP) and exempt from state permitting? Yes✓ No__

e) Is site/facility subject to any State permitting or other action which is causing the generation of discharge? Yes___ No✓ If "yes," please list: 1. site identification # assigned by the state of NH or MA: 2. permit or license # assigned: 3. state agency contact information: name, location, and telephone number:	f) Is the site/facility covered by any other EPA permit, including: 1. multi-sector storm water general permit? Y___ N✓, if Y, number: 2. phase I or II construction storm water general permit? Y___ N✓, if Y, number: 3. individual NPDES permit? Y___ N✓, if Y, number: 4. any other water quality related permit? Y___ N✓, if Y, number:

2. Discharge information. Please provide information about the discharge, (attaching additional sheets as needed) including:

a) Describe the discharge activities for which the owner/applicant is seeking coverage:
Temporary construction dewatering in support of supplemental foundation installation, new elevator pits, and tank removal.

b) Provide the following information about each discharge:	1) Number of discharge points: 1	2) What is the **maximum** and **average flow rate** of discharge (in cubic feet per second, ft^3/s)? Max. flow 0.17 Average flow 0.06 Is maximum flow a **design value**? Y___ N✓ For average flow, include the units and appropriate notation if this value is a design value or estimate if not available.

3) Latitude and longitude of each discharge within 100 feet: pt.1:long. 42.2 lat. 71.3; pt.2: long._____ lat._____; pt.3: long._____ lat._____; pt.4:long._____ lat._____; pt.5: long._____ lat._____; pt.6:long._____ lat._____; pt.7: long._____ lat._____; pt.8:long._____ lat._____; etc.

4) If hydrostatic testing, total volume of the discharge (gals):	5) Is the discharge intermittent ✓ or seasonal ____? Is discharge ongoing Yes ____ No ✓ ?
c) Expected dates of discharge (mm/dd/yy): start 12/01/07 end 12/01/08	
d) Please attach a line drawing or flow schematic showing water flow through the facility including: 1. sources of intake water, 2. contributing flow from the operation, 3. treatment units, and 4. discharge points and receiving waters(s).	

3. Contaminant information. In order to complete this section, the applicant will need to take a minimum of one sample of the untreated water and have it analyzed for **all** of the parameters listed in Appendix III. Historical data, (i.e., data taken no more than 2 years prior to the effective date of the permit) may be used if obtained pursuant to: i. Massachusetts' regulations 310 CMR 40.0000, the Massachusetts Contingency Plan ("Chapter 21E"); ii. New Hampshire's Title 50 RSA 485-A: Water Pollution and Waste Disposal or Title 50 RSA 485-C: Groundwater Protection Act; or iii. an EPA permit exclusion letter issued pursuant to 40 CFR 122.3, provided the data was analyzed with test methods that meet the requirements of this permit. Otherwise, a new sample shall be taken and analyzed.

a) Based on the analysis of the sample(s) of the untreated influent, the applicant must check the box of the sub-categories that the potential discharge falls within.

Gasoline Only	VOC Only	Primarily Metals	Urban Fill Sites ✓	Contaminated Sumps	Mixed Contaminants	Aquifer Testing
Fuel Oils (and Other Oils) only	VOC with Other Contaminants	Petroleum with Other Contaminants	Listed Contaminated Sites	Contaminated Dredge Condensates	Hydrostatic Testing of Pipelines/Tanks	Well Development or Rehabilitation

b) Based on the analysis of the untreated influent, the applicant must indicate whether each listed chemical is **believed present** or **believed absent** in the potential discharge. Attach additional sheets as needed.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min-imum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
1. Total Suspended Solids		✓	1	Grab	160.2	5,000	44,00			
2. Total Residual Chlorine	✓		1	Grab	330.1	20	XXXX			
3. Total Petroleum Hydrocarbons	✓		1	Grab	1664	4000	ND			
4. Cyanide	✓		1	Grab	335.2	5	ND			
5. Benzene	✓		1	Grab	624	1	ND			
6. Toluene	✓		1	Grab	624	1	ND			
7. Ethylbenzene	✓		1	Grab	624	1	ND			
8. (m,p,o) Xylenes	✓		1	Grab	624	2	ND			
9. Total BTEX[4]	✓		1	Grab	624	1	ND			

[4] BTEX = Sum of Benzene, Toluene, Ethylbenzene, total Xylenes.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min-imum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
10. Ethylene Dibromide (1,2- Dibromo-methane)	✓		1	Grab	504	0.02	ND			
11. Methyl-tert-Butyl Ether (MtBE)	✓		1	Grab	624	20	ND			
12. tert-Butyl Alcohol (TBA)	✓		1	Grab	624	100	ND			
13. tert-Amyl Methyl Ether (TAME)	✓		1	Grab	624	20	ND			
14. Naphthalene	✓		1	Grab	624	5	ND			
15. Carbon Tetra-chloride	✓		1	Grab	624	1	ND			
16. 1,4 Dichlorobenzene	✓		1	Grab	624	5	ND			
17. 1,2 Dichlorobenzene	✓		1	Grab	624	5	ND			
18. 1,3 Dichlorobenzene	✓		1	Grab	624	5	ND			
19. 1,1 Dichloroethane	✓		1	Grab	624	1.5	ND			
20. 1,2 Dichloroethane	✓		1	Grab	624	1.5	ND			
21. 1,1 Dichloroethylene	✓		1	Grab	624	1	ND			
22. cis-1,2 Dichloro-ethylene	✓		1	Grab	624	1	ND			
23. Dichloromethane (Methylene Chloride)	✓		1	Grab	624	5	ND			
24. Tetrachloroethylene	✓		1	Grab	624	1.5	ND			

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min-imum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily Value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
25. 1,1,1 Trichloroethane	✓		1	Grab	624	2	ND			
26. 1,1,2 Trichloroethane	✓		1	Grab	624	1.5	ND			
27. Trichloroethylene	✓		1	Grab	624	1	ND			
28. Vinyl Chloride	✓		1	Grab	624	2	ND			
29. Acetone	✓		1	Grab	624	10	ND			
30. 1,4 Dioxane	✓		1	Grab	624	2000	ND			
31. Total Phenols	✓		1	Grab	420	30	ND			
32. Pentachlorophenol	✓		1	Grab	8270	10	ND			
33. Total Phthalates [5] (Phthalate esthers)	✓		1	Grab	8270	5	ND			
34. Bis (2-Ethylhexyl) Phthalate [Di-(ethylhexyl) Phthalate]	✓		1	Grab	8270	5	ND			
35. Total Group I Polycyclic Aromatic Hydrocarbons (PAH)										
a. Benzo(a) Anthracene	✓		1	Grab	8270	0.2	ND			
b. Benzo(a) Pyrene	✓		1	Grab	8270	0.2	ND			
c. Benzo(b)Fluoranthene	✓		1	Grab	8270	0.2	ND			
d. Benzo(k) Fluoranthene	✓		1	Grab	8270	0.2	ND			
e. Chrysene	✓		1	Grab	8270	0.2	ND			

[5] The sum of individual phthalate compounds.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min-imum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Average daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
f. Dibenzo(a,h) anthracene	✓		1	Grab	8270	0.2	ND			
g. Indeno(1,2,3-cd) Pyrene	✓		1	Grab	8270	0.2	ND			
36. Total Group II Polycyclic Aromatic Hydrocarbons (PAH)										
h. Acenaphthene	✓		1	Grab	8270	0.2	ND			
i. Acenaphthylene	✓		1	Grab	8270	0.2	ND			
j. Anthracene	✓		1	Grab	8270	0.2	ND			
k. Benzo(ghi) Perylene	✓		1	Grab	8270	0.2	ND			
l. Fluoranthene	✓		1	Grab	8270	0.2	ND			
m. Fluorene	✓		1	Grab	8270	0.2	ND			
n. Naphthalene-	✓		1	Grab	8270	0.2	ND			
o. Phenanthrene	✓		1	Grab	8270	0.2	ND			
p. Pyrene	✓		1	Grab	8270	0.2	ND			
37. Total Polychlorinated Biphenyls (PCBs)	✓		1	Grab	3510	0.25	ND			
38. Antimony	✓		1	Grab	6020	0.5	ND			
39. Arsenic		✓	1	Grab	6020	0.5	30			
40. Cadmium	✓		1	Grab	6020	0.2	ND			
41. Chromium III	✓		1	Grab	6020	0.5	ND			
42. Chromium VI	✓		1	Grab	3500	10	ND			

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min-imum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
43. Copper	✓		1	Grab	6020	0.5	ND			
44. Lead		✓	1	Grab	6020	0.5	19			
45. Mercury	✓		1	Grab	6020	0.2	ND			
46. Nickel	✓		1	Grab	6020	0.5	ND			
47. Selenium	✓		1	Grab	6020	1	ND			
48. Silver	✓		1	Grab	6020	0.4	ND			
49. Zinc	✓		1	Grab	6020	5	ND			
50. Iron	✓			Grab	6020	50	ND			
Other (describe):										

c) For discharges where **metals** are believed present, please fill out the following:

Step 1: Do any of the metals in the influent have a **reasonable potential** to exceed the effluent limits in Appendix III (i.e., the limits set at zero to five dilutions)? Y ✓ N___	If yes, which metals? Arsenic and Lead
Step 2: For any metals which have **reasonable potential** to exceed the **Appendix III** limits, calculate the **dilution factor (DF)** using the formula in Part I.A.3.c) (step 2) of the NOI instructions or as determined by the State prior to the submission of this NOI. What is the dilution factor for applicable metals? Metals:_____ DF: 18.0	Look up the limit calculated at the corresponding dilution factor in **Appendix IV.** Do any of the metals in the **influent** have the potential to exceed the corresponding **effluent** limits in Appendix IV (i.e., is the influent concentration above the limit set at the calculated dilution factor)? Y ✓ N___ If "Yes," list which metals: Lead

4. Treatment system information. Please describe the treatment system using separate sheets as necessary, including:

a) A description of the treatment system, including a schematic of the proposed or existing treatment system:

System influent Frac. tank Bag filter Ion Exchange GAC filter Precipitation System Effluent

As needed

b) Identify each applicable treatment unit (check all that apply):	Frac. tank ✓	Air stripper	Oil/water separator	Equalization tanks	Bag filter	GAC filter
	Chlorination	Dechlorination	Other (please describe): Bag filters and Ion exchange			

c) Proposed **average** and **maximum flow rates** (gallons per minute) for the discharge and the **design flow rate**(s) (gallons per minute) of the treatment system:
Average flow rate of discharge 25 est Maximum flow rate of treatment system 75 est Design flow rate of treatment system 75 es

d) A description of chemical additives being used or planned to be used (attach MSDS sheets):

NA

5. Receiving surface water(s). Please provide information about the receiving water(s), using separate sheets as necessary:

a) Identify the discharge pathway:	Direct____	Within facility__	Storm drain ✓	River/brook ✓	Wetlands____	Other (describe):

b) Provide a narrative description of the discharge pathway, including the name(s) of the receiving waters:

See Figure 3 for discharge location BWSC Outfall # CSO073. The dewatering effluent eventually discharges to the Fort Point Channel in Boston, MA.

c) Attach a detailed map(s) indicating the site location and location of the outfall to the receiving water:
1. For multiple discharges, number the discharges sequentially.
2. For indirect dischargers, indicate the location of the discharge to the indirect conveyance and the discharge to surface water
The map should also include the location and distance to the nearest sanitary sewer as well as the locus of nearby sensitive receptors (based on USGS topographical mapping), such as surface waters, drinking water supplies, and wetland areas.

d) Provide the state water quality classification of the receiving water SB ,

e) Provide the reported or calculated seven day-ten year low flow (7Q10) of the receiving water 4.75 cfs
Please attach any calculation sheets used to support stream flow and dilution calculations.

f) Is the receiving water a listed 303(d) water quality impaired or limited water? Yes ✓ No____ If yes, for which pollutant(s)?
Priority Organics, Pathogens

Is there a TMDL? Yes ✓ No____ If yes, for which pollutant(s)?
Priority Organics, Pathogens. Documented as Category 5 Waters "Waters requiring a TMDL"

6. Results of Consultation with Federal Services: Please provide the following information according to requirements of Part I.B.4 and Appendices II and VII.

a) Are any listed threatened or endangered species, or designated critical habitat, in proximity to the discharge? Yes____No ✓
Has any consultation with the federal services been completed ? No ✓ or is consultation underway? No ✓
What were the results of the consultation with the U.S. Fish and Wildlife Service and/or National Marine Fisheries Service (~~check~~ one):
a "no jeopardy" opinion? _____or written concurrence ✓ on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat? Yes

b) Are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility or site or in proximity to the discharge?
Yes ✓ No_____ Have any state or tribal historic preservation officer been consulted in this determination (Massachusetts only)? Yes_____ No ✓

7. Supplemental information. :

Please provide any supplemental information. Attach any analytical data used to support the application. Attach any certification(s) required by the general permit.

Refer to attached documentation on Dilution Factor and Total Recoverable Metals Limitations.

Refer to Table I and Appendix F for chemical data results for water sample obtained from the site.

8. Signature Requirements: The Notice of Intent must be signed by the operator in accordance with the signatory requirements of 40 CFR Section 122.22, including the following 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 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, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I certify that I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Facility/Site Name: 10, 20, and 30 Channel Center

Operator signature: Ryan E Hutchins Ryan E. Hutchins

Title: District Operations Manager

Date: October 16, 2007

Channel Center Development
Boston, MA
Remediation General Permit (RGP) Under the
National Pollutant Discharge Elimination System (NPDES)

Dilution Factor

Per email correspondence with Mr. George Papadopoulos of the United States Environmental Protection Agency (EPA) on 17 August 2006, it was determined that the Dilution Factor for the discharge to the Fort Point Channel in Boston has been calculated for submission of previous Remediation General Permit.

Mr. Papadopoulos informed Kenneth Alepidis of Haley & Aldrich that the calculation determined by others and approved by the EPA, would be appropriate for use for projects discharging into the Fort Point Channel. The Dilution Factor had been calculated to 18.

Total Recoverable Metals Limitations

The Total Recoverable Metal Limitations at selected Dilution Factors have not been provided in the RGP for saline waters. In the email correspondence on 17 August 2006, Mr. Papadopoulos informed Haley & Aldrich that the Total Recoverable Metal Limitations at selected Dilution Factors could be calculated by multiplying the saline water metals concentration limits by the calculated Dilution Factor for the proposed discharge.