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

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

a) Name of **facility/site**: Salem Lateral Project at Salem Harbor Station		**Facility/site** mailing address:			
Location of **facility/site**: longitude: -70.878212 latitude: 42.525022	Facility SIC code(s): 4900	Street: 24 Fort Avenue			
b) Name of **facility/site owner:** Footprint Power Salem Harbor Development, LP		Town: Salem			
Email address of facility/site owner: rderosier@footprintsalemharbor.com		State: Massachusetts	Zip: 01970-5693	County: Essex	
Telephone no. of facility/site **owner**: 978-660-7112					
Fax no. of facility/site **owner**: 978-744-6900		**Owner** is (check one): 1. Federal__○__ 2. State/Tribal__○__ 3. Private __⊙__ 4. Other __○__ if so, describe: Algonquin Gas Transmission, LLC			
Address of **owner** (if different from site):					
Street: 890 Winter Street, Suite 300					
Town: Waltham	State: MA	Zip: 02451	County: Middlesex		
c) Legal name of **operator**: Algonquin Gas Transmission, LLC	**Operator** telephone no: 617-560-1424				
	Operator fax no.:	**Operator** email: SHepburn@spectraenergy.com			
Operator contact name and title: Sabrina Hepburn - Environmental Project Manager					
Address of **operator** (if different from owner):	Street:				
Town:	State:	Zip:	County:		

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

e) Is site/facility subject to any State permitting, license, or other action which is causing the generation of discharge? Y___ N___
If Y, 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 General Permit? Y___ N___,
if Y, number:
2. Final Dewatering General Permit? Y___ N___,
if Y, number:
3. EPA Construction General Permit? Y___ N___,
if Y, number: MAR120000
4. Individual NPDES permit? Y___ N___,
if Y, number:
5. any other water quality related individual or general permit? Y___ N___, if Y, number: RGP Permit MAG910000

g) Is the site/facility located within or does it discharge to an Area of Critical Environmental Concern (ACEC)? Y___ N___

h) Based on the facility/site information and any historical sampling data, identify the sub-category into which the potential discharge falls.

Activity Category	**Activity Sub-Category**
I - Petroleum Related Site Remediation	A. Gasoline Only Sites ___ B. Fuel Oils and Other Oil Sites (including Residential Non-Business Remediation Discharges) ___ C. Petroleum Sites with Additional Contamination ___
II - Non Petroleum Site Remediation	A. Volatile Organic Compound (VOC) Only Sites ___ B. VOC Sites with Additional Contamination ___ C. Primarily Heavy Metal Sites ___
III - Contaminated Construction Dewatering	A. General Urban Fill Sites ___ B. Known Contaminated Sites ___

IV - Miscellaneous Related Discharges	A. Aquifer Pump Testing to Evaluate Formerly Contaminated Sites ☐ B. Well Development/Rehabilitation at Contaminated/Formerly Contaminated Sites ☐ C. Hydrostatic Testing of Pipelines and Tanks ☒ D. Long-Term Remediation of Contaminated Sumps and Dikes ☐ E. Short-term Contaminated Dredging Drain Back Waters (if not covered by 401/404 permit) ☐

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

a) Describe the discharge activities for which the owner/applicant is seeking coverage:

Soil excavation to facilitate the installation of a 16-inch diameter natural gas pipeline.

b) Provide the following information about each discharge:

1) Number of discharge points: Three potential points

2) What is the **maximum** and **average flow rate** of discharge (in cubic feet per second, ft^3/s)?
Max. flow 0.9 cfs Is maximum flow a **design value**? Y ◉ N ○
Average flow (include units) 0.25 cfs Is average flow a design value or estimate? Estimate

3) Latitude and longitude of each discharge within 100 feet:

pt.1: lat	42.524634115	long	-70.879641029	pt.2: lat. 42.524167600	long. -70.877929780;
pt.3: lat	42.523618056	long	-70.876604769	pt.4: lat.	long. ;
pt.5: lat		long		pt.6: lat.	long. ;
pt.7: lat		long		pt.8: lat.	long. ; etc.

4) If hydrostatic testing, total volume of the discharge (gals): 118,000

5) Is the discharge intermittent ◉ or seasonal ○ ?
Is discharge ongoing? Y ○ N ◉

c) Expected dates of discharge (mm/dd/yy): start 06/01/2015 end 12/01/2015

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.

a) Based on the sub-category selected (see Appendix III), indicate whether each listed chemical is **believed present** or **believed absent** in the potential discharge. Attach additional sheets as needed.

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
1. Total Suspended Solids (TSS)		☐	☒	1	Grab	2540D	15,000 ug/L	66,000	48	66,000	12
2. Total Residual Chlorine (TRC)		☒	☐	1	Grab	4500CL-D	20 ug/l	0	0	0	0
3. Total Petroleum Hydrocarbons (TPH)		☐	☒	1	Grab	1664A	4,400 ug/l	119,000	86.5	119,000	21.6
4. Cyanide (CN)	57125	☒	☐	1	Grab	4500-CN-CE	5.0 ug/l	0	0	0	0
5. Benzene (B)	71432	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0
6. Toluene (T)	108883	☒	☐	1	Grab	8260C	3.0 ug/l	0	0	0	0
7. Ethylbenzene (E)	100414	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0
8. (m,p,o) Xylenes (X)	108883; 106423; 95476; 1330207	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0
9. Total BTEX [2]	n/a	☒	☐	1	Grab	8260C	4.0 ug/l	0	0	0	0
10. Ethylene Dibromide (EDB) (1,2-Dibromoethane) [3]	106934	☒	☐	1	Grab	8260C	0.1 ug/l	0	0	0	0
11. Methyl-tert-Butyl Ether (MtBE)	1634044	☒	☐	1	Grab	8260C	4.0 ug/l	0	0	0	0
12. tert-Butyl Alcohol (TBA) (Tertiary-Butanol)	75650	☒	☐	1	Grab	8260C	40 ug/l	0	0	0	0

***** Numbering system is provided to allow cross-referencing to Effluent Limits and Monitoring Requirements by Sub-Category included in Appendix III, as well as the Test Methods and Minimum Levels associated with each parameter provided in Appendix VI.

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

[3] EDB is a groundwater contaminant at fuel spill and pesticide application sites in New England.

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
13. tert-Amyl Methyl Ether (TAME)	9940508	☒	☐	1	Grab	8260C	40 ug/l	0	0	0	0
14. Naphthalene	91203	☒	☐	1	Grab	8260C	10 ug/l	0	0	0	0
15. Carbon Tetrachloride	56235	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0
16. 1,2 Dichlorobenzene (o-DCB)	95501	☒	☐	1	Grab	8260C	10 ug/l	0	0	0	0
17. 1,3 Dichlorobenzene (m-DCB)	541731	☒	☐	1	Grab	8260C	20 ug/l	0	0	0	0
18. 1,4 Dichlorobenzene (p-DCB)	106467	☒	☐	1	Grab	8260C	20 ug/l	0	0	0	0
18a. Total dichlorobenzene		☒	☐	1	Grab	8260C	20 ug/l	0	0	0	0
19. 1,1 Dichloroethane (DCA)	75343	☒	☐	1	Grab	8260C	3.0 ug/l	0	0	0	0
20. 1,2 Dichloroethane (DCA)	107062	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0
21. 1,1 Dichloroethene (DCE)	75354	☒	☐	1	Grab	8260C	3.0 ug/l	0	0	0	0
22. cis-1,2 Dichloroethene (DCE)	156592	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0
23. Methylene Chloride	75092	☒	☐	1	Grab	8260C	12 ug/l	0	0	0	0
24. Tetrachloroethene (PCE)	127184	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0
25. 1,1,1 Trichloro-ethane (TCA)	71556	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0
26. 1,1,2 Trichloro-ethane (TCA)	79005	☒	☐	1	Grab	8260C	3.0 ug/l	0	0	0	0
27. Trichloroethene (TCE)	79016	☒	☐	1	Grab	8260C	2.0 ug/l	0	0	0	0

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
28. Vinyl Chloride (Chloroethene)	75014	☒	☐	1	Grab	8260C	4.0 ug/l	0	0	0	0
29. Acetone	67641	☒	☐	1	Grab	8260C	20 ug/l	0	0	0	0
30. 1,4 Dioxane	123911	☒	☐	1	Grab	8260C-SIM	12 ug/l	0	0	0	0
31. Total Phenols	108952	☒	☐	1	Grab	420.1	30 ug/l	0	0	0	0
32. Pentachlorophenol (PCP)	87865	☒	☐	1	Grab	8270D-SIM	32 ug/l	0	0	0	0
33. Total Phthalates (Phthalate esters) [4]		☒	☐	1	Grab	8270D	50 ug/l	0	0	0	0
34. Bis (2-Ethylhexyl) Phthalate [Di-(ethylhexyl) Phthalate]	117817	☒	☐	1	Grab	8270D	30 ug/l	0	0	0	0
35. Total Group I Polycyclic Aromatic Hydrocarbons (PAH)		☐	☒	1	Grab	8270D-SIM	10 ug/l	18.4	0.013	18.4	0.003
a. Benzo(a) Anthracene	56553	☐	☒	1	Grab	8270D-SIM	8.0 ug/l	9.8	0.007	9.8	0.002
b. Benzo(a) Pyrene	50328	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
c. Benzo(b)Fluoranthene	205992	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
d. Benzo(k)Fluoranthene	207089	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
e. Chrysene	21801	☐	☒	1	Grab	8270D-SIM	8.0 ug/l	8.6	0.006	8.6	0.002
f. Dibenzo(a,h)anthracene	53703	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
g. Indeno(1,2,3-cd) Pyrene	193395	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
36. Total Group II Polycyclic Aromatic Hydrocarbons (PAH)		☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0

[4] The sum of individual phthalate compounds.

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
h. Acenaphthene	83329	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
i. Acenaphthylene	208968	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
j. Anthracene	120127	☐	☒	1	Grab	8270D-SIM	8.0 ug/l	15	0.011	15	0.003
k. Benzo(ghi) Perylene	191242	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
l. Fluoranthene	206440	☐	☒	1	Grab	8270D-SIM	8.0 ug/l	27	0.020	27	0.005
m. Fluorene	86737	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
n. Naphthalene	91203	☒	☐	1	Grab	8270D-SIM	8.0 ug/l	0	0	0	0
o. Phenanthrene	85018	☐	☒	1	Grab	8270D-SIM	8.0 ug/l	24	0.017	24	0.004
p. Pyrene	129000	☐	☒	1	Grab	8270D-SIM	8.0 ug/l	28	0.020	28	0.005
37. Total Polychlorinated Biphenyls (PCBs)	85687; 84742; 117840; 84662; 131113; 117817.	☒	☐	1	Grab	608	0.25 ug/l	0	0	0	0
38. Chloride	16887006	☐	☒	1	Grab	44,300.0	500 ug/l	24,300	17.66	24,300	4.42
39. Antimony	7440360	☒	☐	1	Grab	6020A	2.0 ug/l	0	0	0	0
40. Arsenic	7440382	☐	☒	1	Grab	6020A	0.5 ug/l	3.7	0.003	3.7	0.0006
41. Cadmium	7440439	☐	☒	1	Grab	6020A	0.2 ug/l	0.3	0.0002	0.3	0.00005
42. Chromium III (trivalent)	16065831	☒	☐	1	Grab	6020A	1.0 ug/l	19.1	0.014	19.1	0.03
43. Chromium VI (hexavalent)	18540299	☐	☒	1	Grab	3500CR-B	10 ug/l	0	0	0	0
44. Copper	7440508	☐	☒	1	Grab	6020A	1.0 ug/l	22.2	0.016	22.2	0.004
45. Lead	7439921	☐	☒	1	Grab	6020A	0.5 ug/l	9.3	0.007	9.3	0.02
46. Mercury	7439976	☒	☐	1	Grab	245.1	0.2 ug/l	0	0	0	0
47. Nickel	7440020	☐	☒	1	Grab	6020A	0.5 ug/l	12.3	0.009	12.3	0.002
48. Selenium	7782492	☒	☐	1	Grab	6020A	5.0 ug/l	0	0	0	0
49. Silver	7440224	☒	☐	1	Grab	6020A	0.3 ug/l	0	0	0	0
50. Zinc	7440666	☐	☒	1	Grab	6020A	10 ug/l	389.7	0.283	389.7	0.071
51. Iron	7439896	☐	☒	1	Grab	200.7	50 ug/l	6.6	0.005	6.6	0.001
Other (describe):		☐	☐								

Parameter *	CAS Number	Believed Absent	Believed Present	# of Samples	Sample Type (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)
		☐	☐								
		☐	☐								

b) For discharges where **metals** are believed present, please fill out the following (attach results of any calculations):

Step 1: Do any of the metals in the influent exceed the effluent limits in Appendix III (i.e., the limits set at zero dilution)? Y_____ N_____	If yes, which metals? Iron, lead, and zinc
Step 2: For any metals which 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? Metal:_____ DF:_____ Metal:_____ DF:_____ Metal:_____ DF:_____ Metal:_____ DF:_____ Etc.	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 Y, list which metals:

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:

Bag filter and GAC filtration (see attached schematic).

b) Identify each applicable treatment unit (check all that apply):	Frac. tank ☒	Air stripper ☐	Oil/water separator ☐	Equalization tanks ☐	Bag filter ☒	GAC filter ☒
	Chlorination ☐	De-chlorination ☐	Other (please describe):			

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 100 gpm Maximum flow rate of treatment system 400 gpm
Design flow rate of treatment system 400 gpm

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

None

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

a) Identify the discharge pathway:	Direct to receiving water ☒	Within facility (sewer) ☐	Storm drain ☒	Wetlands ☐	Other (describe):

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

Three potential discharge sites; two storm drain(s) that discharge to Salem Harbor or direct discharge into Salem Harbor (still to be determined).

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 _____ 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? Y ◉ N ○ If yes, for which pollutant(s)?
Coliform; estuarine bioassessment

Is there a final TMDL? Y ○ N ◉ If yes, for which pollutant(s)? _____

6. ESA and NHPA Eligibility.

Please provide the following information according to requirements of Permit Parts I.A.4 and I.A.5 Appendices II and VII.

a) Using the instructions in Appendix VII and information on Appendix II, under which criterion listed in Part I.C are you eligible for coverage under this general permit?

A ___ B ___ C ___ D ___ E ___ F ___

b) If you selected Criterion D or F, has consultation with the federal services been completed? Y___ N___ Underway___

c) If consultation with U.S. Fish and Wildlife Service and/or NOAA Fisheries Service was completed, was a written concurrence finding that the discharge is "not likely to adversely affect" listed species or critical habitat received? Y___ N___

d) Attach documentation of ESA eligibility as described in the NOI instructions and required by Appendix VII, Part I.C, Step 4.

e) Using the instructions in Appendix VII, under which criterion listed in Part II.C are you eligible for coverage under this general permit?

1 ___ 2 ___ 3 ___

f) If Criterion 3 was selected, attach all written correspondence with the State or Tribal historic preservation officers, including any terms and conditions that outline measures the applicant must follow to mitigate or prevent adverse effects due to activities regulated by the RGP.

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.

Cover Letter and Supplemental Information
1. NOI Application Form
2. Site Location Map
3. Site Plan (URAM Work Area)
4. Map of Discharge Points
5. Groundwater Treatment System Flow Diagram
6. Summary of Groundwater Analytical Results
7. Laboratory Data
8. Groundwater Water Quality Data Summary and Data Package
9. Agency Correspondence

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:	Algonquin Gas Transmission, LLC - Salem Lateral Project (at Footprint Salem Harbor Station)
Operator signature:	Sabrina Hepburn
Printed Name &Title:	Sabrina Hepburn, Environmental Project Manager
Date:	May 8, 2015