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Illinois Environmental Protection Agency

Bureau of Water • 1021 North Grand Avenue East • P.O. Box 19276 • Springfield • Illinois • 62794-9276

Division of Water Pollution Control Notice of Intent (NOI) for General Permit to Discharge Storm Water Associated with Construction Site Activities

This fillable form may be completed online, a copy saved locally, printed and signed before it is submitted to the Permit Section at the above address.

ONALED INCOME.	For Office Use Only	
OWNER INFORMATION	Permit No. ILR10	
Company/Owner Name: Kane County Division of Transportation		
Mailing Address: 41W011 Burlington Road	Phone: 630-584-1170	
City: St. Charles State: IL Zip: 60175	Fax: 630-584-5265	
Contact Person: Carl Schoedel, County Engineer E-ma	il: schoedelcarl@co.kane.il.us	
Owner Type (select one) County		
CONTRACTOR INFORMATION	MS4 Community: 🗸 Yes 🗌 No	
Contractor Name: Plate Construction Inc.		
Mailing Address: 1100 Brancht Dr.		
City: Hoffman Estates State: Il Zip: 66192	Fax: <u>847/695-7251</u>	
CONSTRUCTION SITE INFORMATION	0.14 0.0 7631	
Select One: New Change of information for: ILR10		
Project Name: McLean Blvd. Environmental Adaptive Management Plans County: Kane		
Street Address: McLean Blvd. City: South Elgin	IL Zip: 60177	
Latitude: 41 58 53.03 Longitude: 88 19 12		
(Deg) (Min) (Sec) (Deg) (Min) (Sec)	Sec) Section Township Range	
Approximate Construction Start Date Feb 1, 2012 Approximate Construction End Date Oct 31, 2012		
Total size of construction site in acres: 43	Fee Schedule for Construction Sites:	
If less than 1 acre, is the site part of a larger common plan of development?	Less than 5 acres - \$250	
☐ Yes ✓ No	5 or more acres - \$750	
STORM WATER POLLUTION PREVENTION PLAN (SWPPP)	3	
Has the SWPPP been submitted to the Agency? (Submit SWPPP electronically to: epa.constilr10swppp@illinois.gov)	✓ Yes □ No	
Location of SWPPP for viewing: Address: On - Site	City: South Elgin	
SWPPP contact information:		
Contact Name: Doug Milliam Phone: (223) 418-5390 Fax:	Inspector qualifications:	
Phone: (773) 418-5390 Fax: E-ma	ili diarles milliscod curaci care	
Project inspector, if different from above	Inspector qualifications:	
Inspector's Name:	p - ster quantoutions.	
Phone: Fax: E-mail		
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IL 532 2104 WPC 623

This Agency is authorized to require this information under Section 4 and Tille X of the Environmental Protection Act (415 ILCS 5/4, 5/39). Failure to disclose this Information may result in: a civil penalty of not to exceed \$50,000 for the violation and an additional civil penalty of not to exceed \$10,000 for each day during which the violation continues (415 ILCS 5/42) and may also prevent this form from being processed and could result in your application being denied. This form has been approved by the Forms Management Center.

SIC Code:	
Type a detailed description of the project:	
The work consists of creating public multi-use trails and parking at the McLean Blvd FEN site. The project will	
	a boardwalk, and the necessary erosion control measures
to complete the project. Additional improvements includ	
HISTORIC PRESERVATION AND ENDANGERED	
Has the project been submitted to the following state age Illinois law on:	ncies to satisfy applicable requirements for compliance with
Historic Preservation Agency Yes 1	No
Endangered Species Yes T	No
RECEIVING WATER INFORMATION	
Does your storm water discharge directly to: Waters	of the State or 🗸 Storm Sewer
Owner of storm sewer system: Kane County	
Name of closest receiving water body to which you discha	arge: Fox River
Mail completed form to: Illinois Environmental Protection of Division of Water Pollution Control Attn: Permit Section Post Office Box 19276 Springfield, Illinois 62794-9276 or call (217) 782-0610 FAX: (217) 782-9891	
Or submit electronically to: epa.constilr10swppp@illinois.g	nov
n accordance with a system designed to assure that qualif submitted. Based on my inquiry of the person or persons w for gathering the information, the information submitted is, it complete. I am aware that there are significant penalties for	achments were prepared under my direction and supervision fied personnel properly gather and evaluate the information who manage this system, or those persons directly responsible to the best of my knowledge and belief, true, accurate, and r submitting false information, including the possibility of fine if the permit, including the development and implementation program plan, will be complied with.
ny person who knowingly makes a false, fictitious, or fraudo onmits a Class 4 felony. A second or subsequent offense a	ulent material statement, orally or in writing, to the Illinois EPA fiter conviction is a Class 3 felony. (415 ILCS 5/44(h))
	August 4 2011
Owner Signature:	Date:
Carl Schoedel	County Engineer
Printed Name:	Title