



Illinois Environmental Protection Agency

1021 North Grand Avenue East • P.O. Box 19276 • Springfield • Illinois • 62794-9276 • (217) 782-3397

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.

For Office Use Only

OWNER INFORMATION

Permit No. ILR10 _____

Company/Owner Name: Illinois State Toll Highway Authority

Mailing Address: 2700 Ogden Avenue

Phone: 630-241-6800

City: Downers Grove

State: IL

Zip: 60515

Fax: _____

Contact Person: Bryan Wagner

E-mail: bwagner@getipass.com

Owner Type (select one) State

MS4 Community: Yes No

CONTRACTOR INFORMATION

Contractor Name: Plote Construction, Inc. / Dunnet Bay Construction Co., JV

Mailing Address: 1100 Brandt Dr.

Phone: 847-695-9300

City: Hoffman Estates

State: IL

Zip: 60192

Fax: 847-695-7251

CONSTRUCTION SITE INFORMATION

Select One: New Change of information for: ILR10 _____

Project Name: I-355 Roadway and Bridge Rehab and Widening (RR-16-4256)

County: DuPage

Street Address: Veterans Memorial Tollway (I-355)

City: Lombard

IL Zip: 60148

Latitude: 41

53

13

Longitude: 88

2

12

12

39N

10E

(Deg)

(Min)

(Sec)

(Deg)

(Min)

(Sec)

Section

Township

Range

Approximate Construction Start Date 4/23/18

Approximate Construction End Date 12/11/18

Total size of construction site in acres: 238.50

If less than 1 acre, is the site part of a larger common plan of development?

Yes No

Fee Schedule for Construction Sites:

Less than 5 acres - \$250

5 or more acres - \$750

STORM WATER POLLUTION PREVENTION PLAN (SWPPP)

Has the SWPPP been submitted to the Agency?

Yes

No

(Submit SWPPP electronically to: epa.constilr10swppp@illinois.gov)

Location of SWPPP for viewing: Address: 120 W. Center Court

City: Schaumburg

SWPPP contact information:

Inspector qualifications:

Contact Name: Brett Roberts

P.E.

Phone: 312-442-2222

Fax: 773-714-0055

E-mail: broberts@chastainengineers.com

Project inspector, if different from above

Inspector qualifications:

Inspector's Name: _____

Phone: _____

Fax: _____

E-mail: _____

This Agency is authorized to require this information under Section 4 and Title 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.

TYPE OF CONSTRUCTION (select one)

Construction Type Transportation

SIC Code: _____

Type a detailed description of the project:

The work under this contract shall be performed along the Veterans Memorial Tollway (I-355) from M.P. 22.3 (Station 1275+00) located approximately 1,500 feet south of Butterfield Road to M.P. 29.8 (Station 1673+00) located approximately 200 feet north of Army Trail Road in DuPage County, Illinois. The work under this contract includes: earthwork, grading, pavement removal and replacement; pavement milling/resurfacing; new drainage structures; landscaping, erosion control, noise abatement walls, guardrail, lighting, signage and pavement markings.

HISTORIC PRESERVATION AND ENDANGERED SPECIES COMPLIANCE

Has the project been submitted to the following state agencies to satisfy applicable requirements for compliance with Illinois law on:

Historic Preservation Agency Yes No

Endangered Species Yes No

RECEIVING WATER INFORMATION

Does your storm water discharge directly to: Waters of the State or Storm Sewer

Owner of storm sewer system: IL Tollway

Name of closest receiving water body to which you discharge: E Branch of the DuPage River & Salt Creek

Mail completed form to: Illinois Environmental Protection Agency
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.gov

I certify under penalty of law that this document and all attachments were prepared under my direction and 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 this 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. In addition, I certify that the provisions of the permit, including the development and implementation of a storm water pollution prevention plan and a monitoring program plan, will be complied with.

Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))

Kelsey Musich for BW
Owner Signature:

4/13/18
Date:

Kelsey Musich
Printed Name:

Senior Env Planner, CPESC
Title: