



# 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

Company/Owner Name: Illinois State Toll Highway Authority

Permit No. ILR10 \_\_\_\_\_

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

### CONTRACTOR INFORMATION

MS4 Community:  Yes  No

Contractor Name: Martin & Company Excavating

Mailing Address: P.O. Box 443, 2456 E. Pleasant Grove Road Phone: \_\_\_\_\_

City: Oregon State: IL Zip: 61061 Fax: \_\_\_\_\_

### CONSTRUCTION SITE INFORMATION

Select One:  New  Change of information for: ILR10 \_\_\_\_\_

Project Name: Bridge Removal and Roadway Reconstruction - 4284 County: Lee

Street Address: Interstate I-88 at Mile Post 53.8 City: Dixon IL Zip: 61021

Latitude: 41 49 05.40 Longitude: -89 28 31.10 8 21N 9E  
(Deg) (Min) (Sec) (Deg) (Min) (Sec) Section Township Range

Approximate Construction Start Date Apr 24, 2017 Approximate Construction End Date Nov 10, 2017

Total size of construction site in acres: 4

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](mailto:epa.constilr10swppp@illinois.gov))

Location of SWPPP for viewing: Address: 170 Keul Road City: Dixon, IL 61021

SWPPP contact information: Inspector qualifications: \_\_\_\_\_  
Contact Name: Dennis Donna and/or Peter Donna CPESC

Phone: 815-857-3281 Fax: 815-857-3286 E-mail: ddonna@dreamscapesbydennis.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 Reconstruction

SIC Code: 9621

Type a detailed description of the project:

The improvements to be constructed under this contract shall be performed along the Reagan Memorial Tollway at Mile Post 53.8 in Lee County, Illinois. The work under this contract includes removal of two mainline bridge structures, replacement with a typical pavement cross section on embankment, modification of existing drainage system, soil erosion/sedimentation control measures, replacement of guardrail and cable median barrier installations, and other ancillary work.

**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: N/A

Name of closest receiving water body to which you discharge: Unnamed Tributary to Rock River

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](mailto: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  
Owner Signature:

5/19/17  
Date:

Kelsey Musich, CPESC  
Printed Name:

Sr. Env. Planner  
Title: