



NOTICE OF INTENT TO COMPLY WITH THE MAINE MULTI-SECTOR GENERAL PERMIT FOR STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY

Notice of Intent (NOI) submission constitutes the expressed intent of the entity in Section A (of this form) and authorizes the discharge of stormwater associated with industrial activity to waters of the State (excluding groundwater), from the facility/site identified in Section B (of this form), under Maine's Multi-sector General Permit (MSGP). This also certifies that the responsible official understands and meets the eligibility conditions of Part I of the MSGP, agrees to comply with all applicable terms and conditions of the MSGP, and understands that continued authorization under the MSGP is contingent on maintaining eligibility for coverage. **In order to be granted coverage the information on this form must be correct and up-to-date. Please send the completed form with any corrections or updates to the Maine Department of Environmental Protection, 17 State House Station, Augusta, ME 04333-0017. Be sure to include a check for \$314.00 made payable to: Treasurer, State of Maine. Please read the instructions on the back prior to completing the NOI form.**

A. Company Information – Legal Name & Billing Address

Permit Owner Legal Name	GRIMMEL INDUSTRIES, INC.				ME State Charter Number (if business): 200910450 D	
Billing Address	80 PEJEPSCOT VILLAGE MAIN STREET					
City/Town	TOPSHAM	State	ME	Zip Code:	04086	
Daytime Phone: (with area code)	(207) 729-1691					
E-mail:	GRIMMELIND@AOL.COM					

The 4-digit Standard Industrial Classification (SIC) Code(s) or the 2-letter Activity Code(s) that best represent the industrial activity at the facility or any multiple sector-specific industrial activities.	SIC# or Activity Code	5093	Additional SIC# or Activity Code	
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B. Facility/Site Physical Location

C. Contact Person Information for this NOI

Facility/Site Name	SPRAGUE OPERATING RESOURCES FACILITY - MACK POINT				Permit Contact Person	MIKE GARRITY				
Physical Address	MACK POINT, TRUNDY ROAD				Title	FACILITY MANAGER				
City/Town	SEARSPORT	State	ME	Zip Code:	04974	Contact Address	80 PEJEPSCOT VILLAGE MAIN STREET			
Daytime Phone:	(207) 548-2531				City/Town	TOPSHAM	State	MA	Zip Code	04086
Title, Right, or Interest (to this site location):	Yes	X	No		Daytime Phone:	(207) 729-1691				
Email:	JLITTLEFIELD@SPRAGUEENERGY.COM				Email:	GRIMMELIND@AOL.COM				



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Facility Latitude: (if known)	44.454990 N	Facility Longitude: (if known)	68.90385 W
Name(s) of the receiving waters: SEARSPORT HARBOR (PENOBSCOT BAY)		The facility discharges stormwater to a municipal separate stormwater sewer system (MS4). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is the water considered impaired? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list category: 4-A ELEVATED FECALS; 5-D PARTIALLY SUPPORT SHELLFISH CONSUMPTION		If Yes, name(s) of MS4 operator:	

D. Permit Information

Applicable Sector(s) of industrial activity, as designated in Part I(B)(1) and Part I(B)(2) of the MSGP, that include associated discharges that you seek to have covered under this permit (check all that apply):

- | | | | | | | | |
|-----------------------------------|-----------------------------------|------------------------------------|------------------------------------|------------------------------------|----------------------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Sector A | <input type="checkbox"/> Sector B | <input type="checkbox"/> Sector C | <input type="checkbox"/> Sector D | <input type="checkbox"/> Sector E | <input type="checkbox"/> Sector F | <input type="checkbox"/> Sector G | <input type="checkbox"/> Sector H |
| <input type="checkbox"/> Sector I | <input type="checkbox"/> Sector J | <input type="checkbox"/> Sector K | <input type="checkbox"/> Sector L | <input type="checkbox"/> Sector M | <input checked="" type="checkbox"/> Sector N | <input type="checkbox"/> Sector O | <input type="checkbox"/> Sector P |
| <input type="checkbox"/> Sector Q | <input type="checkbox"/> Sector R | <input type="checkbox"/> Sector S | <input type="checkbox"/> Sector T | <input type="checkbox"/> Sector U | <input type="checkbox"/> Sector V | <input type="checkbox"/> Sector W | <input type="checkbox"/> Sector X |
| <input type="checkbox"/> Sector Y | <input type="checkbox"/> Sector Z | <input type="checkbox"/> Sector AA | <input type="checkbox"/> Sector AB | <input type="checkbox"/> Sector AC | <input type="checkbox"/> Sector AD | | |

E. Certification of Responsible Official

I certify under penalty of law that I have personally examined the information submitted in this document and all attachments thereto and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate, and complete. By my signature as a responsible official for the entity or individual identified in Section A of this NOI, I certify under penalty of law that that I am the operator of the facility, and have Title, Right or Interest, as indicated in Section B.

Printed Name: GARY GRIMMEL

Title:	Owner	Date:	4/17/15
Signature:			

OFFICE USE ONLY

In Good Standing <input type="checkbox"/> Yes <input type="checkbox"/> No	Permit ID	Acct. # 014-06A-1751-142
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