

**DEQ** Montana Department of Environmental Quality  
 Water Protection Bureau  
 Montana Pollutant Discharge Elimination System

Agency Use
Permit No.: MTR04
Date Rec'd
Amount Rec'd
Check No.
Rec'd By

FORM NOI-04	<b>Notice of Intent (NOI) Storm Water Discharges Associated with MS4s MTR040000</b>
----------------	---

The NOI-04 form must be completed by the owner or operator of a permitted Small Municipal Separate Storm Sewer System (MS4) eligible for coverage under the Montana Department of Environmental Quality's (DEQ) General Permit for Storm Water Discharges Associated with Small MS4s. **Please read the attached instructions before completing this form.** You must print or type legibly; forms that are not legible, not complete, or unsigned will be returned. You must maintain a copy of the completed NOI-04 form for your records.

**Section A – NOI-04 Status** (If no prior NOI-04 was submitted, DEQ will assign a permit number)

Permit Number: M T R 0 4 0 0 1 2  New  Resubmitted  Renewal  Modification

**Section B – Applicant Information**

Small MS4 Name University of Montana - Missoula  
 Contact Person, (name, title) Paul Trumbley  
 Mailing Address 32 Campus Drive  
 City, State, and Zip Code Missoula, MT 59812  
 Phone Number, Email Address (406) 243-2127; paul.trumbley@umontana.edu  
 Applying as a Co-permittee?  Yes: \_\_\_\_\_  No  
 (If, yes provide Co-permittee MS4 name in the blank provided. Each co-permittee must submit a separate complete NOI.)

**Section C – Small MS4 Information**

MS4 Boundary Description UM main campus, bounded by Arthur & Beckwith Ave, Campus Dr & the Clark Fork River  
 Residential Population Student FTE - 8,147; Faculty & Staff FTE - 2,271 (as of Spring semester, 2022)  
 Approximate Square Miles 0.24

Link to storm water website and current version of the Storm Water Management Program (SWMP) describing implemented Best Management Practices (BMPs) www.UMT.edu/facilities/Energy and Utilities/Storm Water.php  
 (New applicants may skip this requirement if a SWMP or website has not been established)

Attach an organizational chart identifying the primary SWMP coordinator and positions responsible for implementing requirements of the permit.  Attached  Not Attached

MAP: Include reference to a topographic map extending at least one mile beyond MS4 boundaries that identifies applicable boundaries, drainage patterns, receiving surface water bodies, and all outfalls or point source discharges.

Electronic GIS  Hard copy PDFs  Link to  
 Shapefiles emailed to: attached herein online maps: \_\_\_\_\_  
 DEQMPDESDataManagement@mt.gov

## Section D – Outfall Descriptions and Locations for Monitoring

Identify current monitoring locations and receiving waters: (If applying as a new MS4 without established monitoring, skip this section)

Outfall Name	Latitude	Longitude	Monitoring Purpose (select all that apply)	Name of Receiving Water
East Outfall	46.864888	-113.980524	<input checked="" type="checkbox"/> Storm Event <input checked="" type="checkbox"/> TMDL-Related	Clark Fork River, Blackfoot River to Rattlesnake Creek
West Outfall	46.866459	-113.984491	<input checked="" type="checkbox"/> Storm Event <input checked="" type="checkbox"/> TMDL-Related	Clark Fork River, Blackfoot River to Rattlesnake Creek
			<input type="checkbox"/> Storm Event <input type="checkbox"/> TMDL-Related	
			<input type="checkbox"/> Storm Event <input type="checkbox"/> TMDL-Related	
			<input type="checkbox"/> Storm Event <input type="checkbox"/> TMDL-Related	
			<input type="checkbox"/> Storm Event <input type="checkbox"/> TMDL-Related	
			<input type="checkbox"/> Storm Event <input type="checkbox"/> TMDL-Related	
			<input type="checkbox"/> Storm Event <input type="checkbox"/> TMDL-Related	

## Section E – Additional Information

Is the MS4 sharing responsibility? If yes, attach written acceptance and explanation of shared obligation(s).  Yes  No

Does the MS4 maintain a list of permits/approvals received or applied for from state or federal agencies?  Yes  No

I certify that all point source discharges of storm water have been tested or evaluated for the presence of non-storm water discharges that are not covered by an MPDES permit. (Attach a description of any analytical testing or sampling based on the NOI-04 instructions.)

## Section F – Certification

### All Applicants Must Complete 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, 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 for knowing violations. [75-5-633, MCA].

Name (Type or Print)

Paul Lasiter

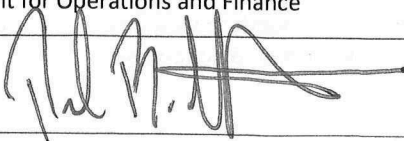
Title (Type or Print)

Vice President for Operations and Finance

Phone Number

(406) 243-4606

Signature

 VPO&F

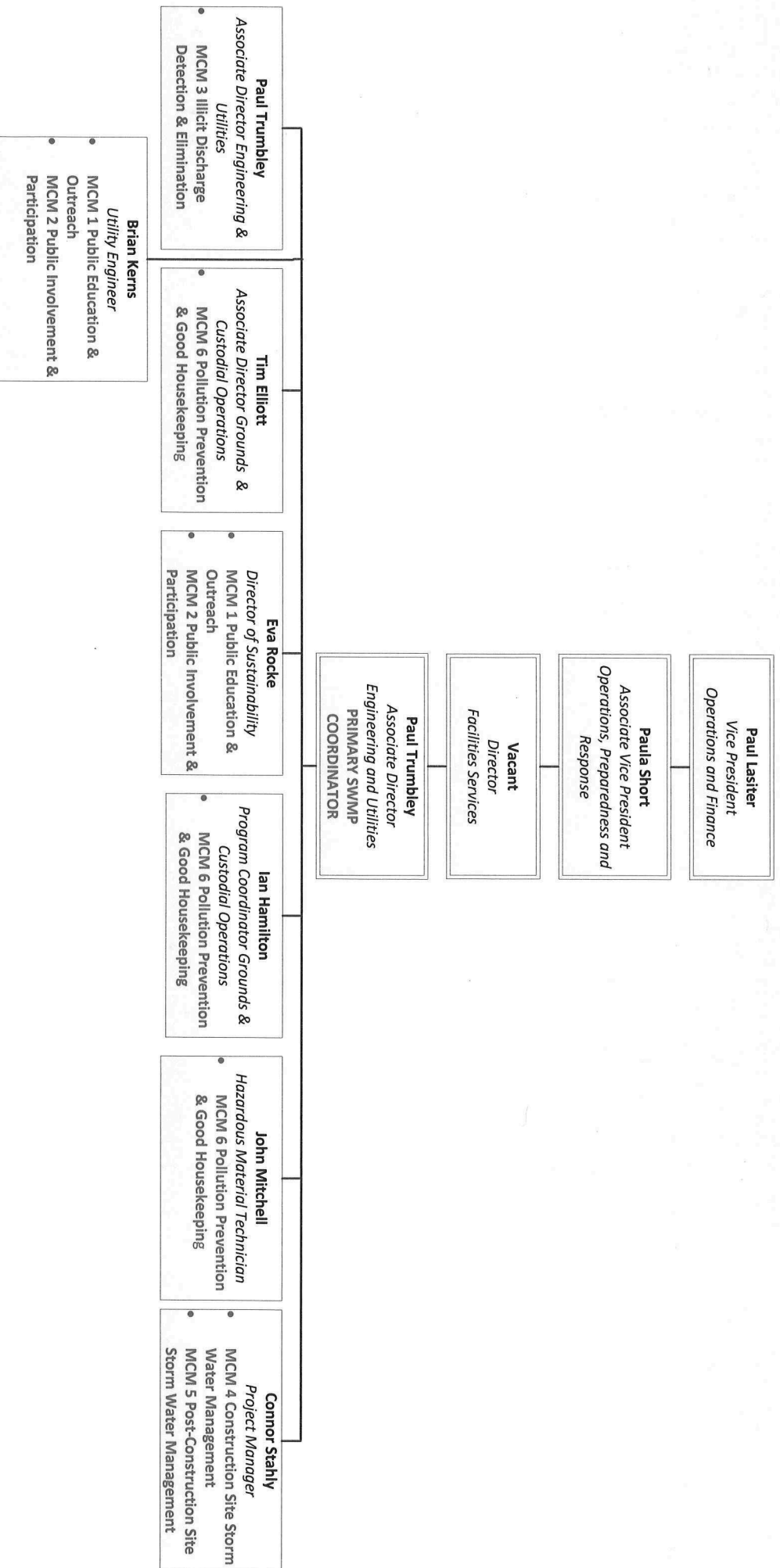
Date Signed

4-25-22

# Small MS4 2021 Annual Report

## Attachment 1

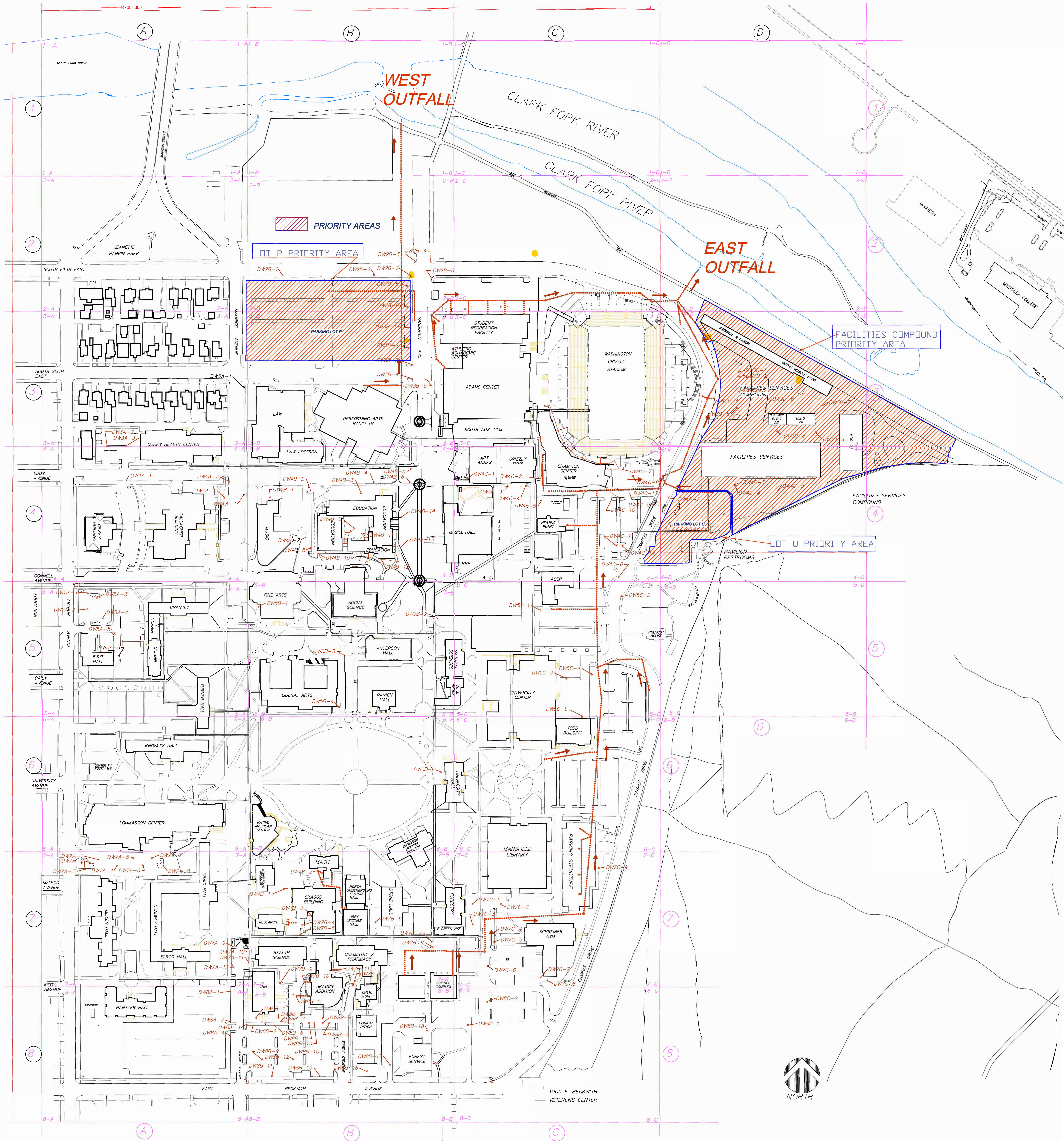
### University of Montana – Missoula MS4 Storm Water Management Team



# University of Montana- Storm Water Management Program

## Storm Sewer Inventory Map

### Attachment 3



TUNNEL MAP

STORM DRAIN MAP