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## Permit Information

NPDES ID: NMR1006S5State/Territory to which your project/site is discharging: NM

Is your project/site located on federally recognized Indian Country lands? No

Are you requesting coverage under this NOI as a "*Federal Operator*" or a "*Federal Facility*" as defined in Appendix A (<https://www.epa.gov/system/files/documents/2022-01/2022-cgp-final-appendix-a-definitions.pdf>)?

No

Have stormwater discharges from your current construction site been covered previously under an NPDES permit? No

Will you use polymers, flocculants, or other treatment chemicals at your construction site? No

Has a Stormwater Pollution Prevention Plan (SWPPP) been prepared in advance of filling this NOI, as required? Yes

Are you able to demonstrate that you meet one of the criteria listed in Appendix D (<https://www.epa.gov/system/files/documents/2022-01/2022-cgp-final-appendix-d-endangered-species-protection.pdf>) with respect to protection of threatened or endangered species listed under the Endangered Species Act (ESA) and federally designated critical habitat?

Yes

Have you completed the screening process in Appendix E (<https://www.epa.gov/system/files/documents/2022-01/2022-cgp-final-appendix-e-historic-properties.pdf>) relating to the protection of historic properties?

Yes

Indicating "Yes" below, I confirm that I understand that CGP only authorized the allowable stormwater discharges in Part 1.2.1 and the allowable non-stormwater discharges listed in Part 1.2.2. Any discharges not expressly authorized in this permit cannot become authorized or shielded from liability under CWA section 402(k) by disclosure to EPA, state or local authorities after issuance of this permit via any means, including the Notice of Intent (NOI) to be covered by the permit, the Stormwater Pollution Prevention Plan (SWPPP), during an Inspection, etc. If any discharges requiring NPDES permit coverage other than the allowable stormwater and non-stormwater discharges listed in Parts 1.2.1 and 1.2.2 will be discharged, they must be covered under another NPDES permit.

Yes

## Operator Information

## Operator Information

Operator Name: Carlisle Associates LP

## Operator Mailing Address:

Address Line 1: 33 S. Service Road

Address Line 2:

City: JerichoZIP/Postal Code: 11753State/Province: NYCounty or Similar Division: NassauCountry: US

## Operator Point of Contact Information

First Name Middle Initial Last Name: David S RosenTitle: Executive Vice PresidentPhone: 516-281-1550

Ext.:

Email: david@rosenmgmt.com

## NOI Preparer Information

☒ This NOI is being prepared by someone other than the certifier.First Name Middle Initial Last Name: Madelyn J SchauerOrganization: Inspections Plus LLCPhone: 505-895-1547

Ext.:

Email: madelyn@inspectionsplus.com

## Project/Site Information

Project/Site Name: Carlisle Crossing

## Project/Site Address

Address Line 1: Indian School Road NE & Carlisle Blvd. NE

Address Line 2:

City: Albuquerque

ZIP/Postal Code: 87110

State: NM

County or Similar Division: Bernalillo

Latitude/Longitude: 35.104018°N, 106.603612°W

Latitude/Longitude Data Source: GPS

Horizontal Reference Datum: WGS 84

Project Start Date: 10/01/2024

Project End Date: 12/31/2025

Estimated Area to be Disturbed: 1

Types of Construction Sites:

- Commercial

Will there be demolition of any structure built or renovated before January 1, 1980? No

Will you be discharging dewatering water from your site? No

Was the pre-development land use used for agriculture? No

Are there other operators that are covered under this permit for the same project site? No

Have earth-disturbing activities commenced on your project/site? No

Is your project/site located on federally recognized Indian Country lands? No

Is your project/site located on a property of religious or cultural significance to an Indian tribe? No

Discharge Information

Does your project/site discharge stormwater into a Municipal Separate Storm Sewer System (MS4)? Yes

Are there any waters of the U.S. within 50 feet of your project's earth disturbances? No

Are any of the waters of the U.S. to which you discharge designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water) or as a Tier 3 water (Outstanding National Resource Water)? See Resources, Tools and Templates (<https://www.epa.gov/npdes/construction-general-permit-resources-tools-and-templates>)

No

ID: 001

Name: MS4 and then to Rio Grande

Description:

Latitude/Longitude: 35.104056°N, 106.603774°W

Tier Designation: N/A

Is this receiving water impaired (on the CWA 303(d) list)? No

Has a TMDL been completed for this receiving waterbody? No

Stormwater Pollution Prevention Plan (SWPPP)

Will all required personnel, including those conducting inspections at your site, meet the training requirements in Part 6 of this permit? Yes

First Name Middle Initial Last Name: Michael Felzarano

Title: Director of Development

Phone: 516-281-1506

Ext.:

Email: michaelf@rosenmgt.com

Endangered Species Protection Worksheet: Criterion E

Determine ESA Eligibility Criterion

Are your discharges and discharge-related activities already addressed in another operator's valid certification of eligibility for your "action area" under the current 2022 CGP? No

Has consultation between you, a Federal Agency, and the USFWS and/or the NMFS under section 7 of the Endangered Species Act (ESA) concluded? Yes

➤ The result of the consultation was:

Option ii. Written concurrence (e.g., letter of concurrence) from the applicable Service(s) with a determination that your site's discharges and discharge-related activities are not likely to adversely affect ESA-listed species and/or designated critical habitat. The concurrence letter must have included the effects of your site's discharges and discharge-related activities on all the ESA-listed species and/or designated critical habitat on your species list(s) acquired from USFWS and/or NMFS as part of this worksheet.

➤

The consultation does not warrant reinitiation under 50 CFR §402.16; or, if reinitiation of consultation is required (e.g., due to a new species listing, critical habitat designation, or new information), the federal action agency has reinitiated the consultation and the result of the consultation is consistent with the statements above. Include any reinitiation documentation from the Services or consulting federal agency with your NOI.

True

You are eligible under **Criterion E**.

Identify the federal action agency or agencies involved (i.e. the federal agencies seeking coverage):

Carlisle Associates LP

Identify the Service(s) field or regional offices providing the consultation:

IPaC  
USFWS

Identify any tracking numbers associated with the consultation (e.g., IPaC number, ECO number):

Project Code: 2025-0005781

Provide the date the consultation was completed: 2024-10-15

Attach correspondence with USFWS and/or NMFS documenting the Biological Opinion, conference opinion (IPaC or ECO tracking number) or concurrence.

| Name                                                                                                                                                                                        | Uploaded Date | Size      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-----------|
|  Species List_New Mexico Ecological Services Field Office - 2024-10-15T100539.181.pdf (attachment/1934403) | 10/22/2024    | 249.09 KB |

Historic Preservation

Are you installing any stormwater controls as described in Appendix E (<https://www.epa.gov/system/files/documents/2022-01/2022-cgp-final-appendix-e-historic-properties.pdf>) that require subsurface earth disturbances? (Appendix E (<https://www.epa.gov/system/files/documents/2022-01/2022-cgp-final-appendix-e-historic-properties.pdf>), Step 1)

No

Certification Information

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 gathered and evaluated 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 have no personal knowledge that the information submitted is other than 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. Signing an electronic document on behalf of another person is subject to criminal, civil, administrative, or other lawful action.

Certified By: David Rosen

Certifier Title: VP

Certifier Email: david@rosenmgmt.com

Certified On: 10/22/2024 2:56 PM ET