**INSTRUCTIONS – DEP FORM 62-624.600(2)**

**ANNUAL REPORT FORM FOR INDIVIDUAL NPDES PERMITS FOR**

**MUNICIPAL SEPARATE STORM SEWER SYSTEMS**

**Who Must Submit This Annual Report Form?**

* Operators of municipal separate storm sewer systems (MS4s) that are covered by an individual NPDES stormwater permit pursuant to Rule 62-624, F.A.C. must submit this form. Each permitted operator must individually complete and submit this form, even if the operator is covered under a permit with multiple co-permittees or has established an interlocal agreement with one or more co-permittees.

**When to Submit This Annual Report Form?**

* This form must be fully completed and submitted for each year of coverage under the NPDES stormwater permit term. The Year 1 Annual Report must cover the twelve-month period beginning on the effective date of the permit and is due six months after the first anniversary of the date of permit issuance. All subsequent annual reports are due six months after the anniversary of the effective date of the permit.

**Where To Submit This Annual Report Form?**

* This form and any REQUIRED attachments must be sent by mail to the address below. The form and attachments may be submitted electronically (on a disk or CD) if a signed paper copy of Section VI of this form (Certification Statement and Signature) is also submitted. Do not submit any materials not specifically required to be submitted as per Section V of this form.

Florida Department of Environmental Protection

NPDES Stormwater Section

Mail Station 2500

2600 Blair Stone Road

Tallahassee, Florida 32399-2400

**Section I: BACKGROUND INFORMATION**

* Row A ― Provide the name of the governmental entity submitting this form. For example, “City of Lauderhill.”
* Row B ― Provide the name of the permit as it appears on the first page of your permit. For example, “Broward County MS4.” The permit name will not necessarily be the same name provided in Row A if the permit covers multiple co-permittees. If the name of the permit is the same name provided in Row A, repeat the name in Row B – do not leave the row blank.
* Row C ― Provide the last two digits of your permit number as it appears on the first page of your permit.
* Row D ― Indicate which permit year the annual report covers. If the permit year is beyond Year 5, check the last box and provide the appropriate permit year number.
* Row E ― Indicate the twelve-month period the annual report covers. Provide the month and year for the beginning of the period and the month and year for the end of the period. For example, “March/2003 through February/2004.” Do not provide the day.
* Row F ― Provide contact information for your Responsible Authority. The definition of a Responsible Authority can be found at Rule 62-620.305, F.A.C.
* Row G ― Provide contact information for the Designated Stormwater Management Program Contact if it isn’t the same person as the Responsible Authority identified in Row F, otherwise leave this section blank. The Stormwater Management Program Contact is the technical person that oversees the stormwater program and is the primary contact for when the Department has questions about the annual report, is scheduling an annual inspection, or needs to discuss miscellaneous issues concerning implementation of the permit.

**Section II: MS4 MAJOR OUTFALL INVENTORY**

* This section is required to be completed in all permit years EXCEPT Year 1. In Year 1, you are required to provide an inventory and a map of all known major outfalls, in accordance with Rule 62-624.600(2)(a), F.A.C. In all subsequent permit years, you need to only provide any updates to the inventory by completing this section.
* The definition of a “major” outfall can be found at Rule 62-624.200(5), F.A.C.
* Row A ― This row contains two separate questions. First, provide the number of outfalls ADDED to the outfall inventory in the current reporting year. If no outfalls were added, insert a “0” – do not leave it blank. Second, indicate whether the number of outfalls added includes any “non-major” outfalls by checking one of the following:
  + “Yes” if the number includes non-major outfalls
  + “No” if the number does not include non-major outfalls, or
  + “Not Applicable” if no new outfalls were added to the inventory.

* Row B ― Provide the number of outfalls REMOVED from the outfall inventory in the current reporting year. If no outfalls were removed, insert “0” – do not leave it blank. Then indicate whether the number of outfalls removed includes any “non-major” outfalls by checking one of the following:
  + “Yes” if the number includes non-major outfalls
  + “No” if the number does not include non-major outfalls, or
  + “Not Applicable” if no outfalls were removed from the inventory.

* + - Row C ― Indicate whether the change in the total number of outfalls in the inventory is due to land being either annexed or vacated during the reporting year by checking one of the following:
  + “Yes” if the change is due to lands annexed, lands vacated, or lands both annexed and vacated.
  + “No” if the change is not due to lands annexed or vacated, or
  + “Not Applicable” if no outfalls were reported in Rows A or B as added or removed from the outfall inventory.

**Section III: MONITORING PROGRAM**

* **This is the ONLY section of this form that you may reference another permittee’s annual report to satisfy your reporting requirements**, but only if that permittee is fully reporting on the monitoring program as required by this form**.** In you choose to reference another permittee’s annual report, you must include the name of the permittee in Row A – do not leave this section blank.
* Row A ― Provide a brief summary of the status of monitoring plan implementation, including any problems encountered; or, if applicable, include the name of the permittee whose annual report you are referencing for the necessary monitoring information.
* Row B ― Provide a brief summary of the monitoring results to date, including any trend analyses.
* Row C ― Attach to the form a summary of the monitoring data as required under Rule 62-624.600(2)(c), F.A.C. Do not provide the monitoring raw data.

**Section IV: FISCAL ANALYSIS**

* Row A ― Provide a single figure that most accurately represents the total expenditures for the NPDES stormwater management program (SWMP) for the current reporting year. Be sure to include the costs of all departments involved (SWMP-related activities only) and of any contracts or interlocal agreements.
* Row B ― Provide a single figure that most accurately represents the total budget for the NPDES stormwater management program for the subsequent reporting year. Be sure to include the budgets of all the departments involved (SWMP-related activities only) and of any contracts or interlocal agreements.

**Section V: MATERIALS TO BE SUBMITTED WITH THIS ANNUAL REPORT FORM**

* Use the checklist in this section to determine what is required to be attached to this form. Do not submit any materials not required, such as records or logs of SWMP activities, monitoring raw data, public outreach materials, or pesticide and herbicide applicator certifications.
* For each item listed in the checklist, indicate whether it is “Attached” or “N/A” (Not Applicable). Do not leave any item unchecked.
* For the first item listed, carefully read Part III.A of your permit. In this section of your permit, certain annual reporting requirements are specified. The requirements include submitting certain quantifiable data (which are to be included in Section VII of this form) and may also include submitting non-quantifiable information, such as a copy of any stormwater-related updates to your local codes/ordinances.
* For the second item listed, indicate whether you attached the monitoring data summary requested in Section III.C of the form. If you referenced a co-permittee’s annual report for the monitoring information required in Section III, check the “N/A” box.
* For the third item listed, indicate whether you attached the major outfall inventory and a map of the major outfall locations in accordance with Rule 62-624.600(2)(a), F.A.C. This item is only applicable in Year 1. For all other reporting years, check the “N/A” box.
* For the fourth item listed, indicate whether you attached the estimates of pollutant loadings and event mean concentrations as required under Part V.A of your permit and in accordance with Rule 62-624.600(2)(b), F.A.C. This item is only applicable in Year 3. For all other reporting years, check the “N/A” box.
* For the fifth item listed, indicated whether you attached your permit re-application in accordance with the re-application requirements in Rule 62-624.420(2), F.A.C. This item is only applicable in Year 4. For all other reporting years, check the “N/A” box.

**Section VI: CERTIFICATION STATEMENT AND SIGNATURE**

* The Responsible Authority listed in Section I.F of this form must sign the certification statement provided in this section, in accordance with Rule 62-620.305, F.A.C. The annual report form will be returned to the permittee if the required signature is not included. If you choose to submit the annual report and attachments electronically, a signed paper copy of this section must also be submitted.

**Section VII: STORMWATER MANAGEMENT PROGRAM (SWMP) SUMMARY TABLE**

* Column A ― Columns B through F must be completed for each SWMP element indicated by the permit citation in Column A. No information is to be inserted by the permittee in this column.
* Column B ― Provide a summary of the permit requirements in Part III.A of your permit for each SWMP element and, underneath the summary, list the quantifiable SWMP activities related to the requirements. The particular quantifiable SWMP activities are specific to each permittee, but must include, at a minimum, the quantifiable activities that are required by the permit to be reported.
* Column C ― Provide a number representing the activities performed in the current reporting year for each of the quantifiable SWMP activities you listed in Column B. This column may not be left blank for any of the quantifiable SWMP activities listed in Column B.
* Column D ― Provide a title or description of the record that documents each number you provided in Column C. For example, “Daily Work Orders,“ “Illicit Complaint/Investigation Forms and Log,” or “Construction Inspection Checklists and Log.” If the activity is recorded entirely in an electronic database system, you may provide the name of the system, such as the “Hansen Model.” This column may not be left blank for any of the numbers provided in Column C.
* Column E ― Provide the name of your department/division that is responsible for performing each of the SWMP activities listed in Column B, or provide the name of the co-permittee, private contractor, or other entity that is performing the activities on your behalf. Try to be as specific as possible by including, for example, the name of the employee responsible for a particular SWMP activity if only that employee can answer any questions concerning the activity. This column may not be left blank for any of the SWMP activities listed in Column B.
* Column F ― This column allows for any brief comments you determine are necessary to explain the information you provided in Columns C, D, and E.

**Section VIII: CHANGES TO STORMWATER MANAGEMENT PROGRAM (SWMP) ACTIVITIES**

* This section is to be completed, as applicable, in all permit years EXCEPT Year 4. In Year 4, any desired changes to your SWMP activities should be included in your permit re-application that is to be attached to the Year 4 Annual Report Form.

* Row A ― If applicable, include in this row any requested changes to your SWMP activities that are established as specific requirements under Part III.A of your permit. Provide the permit citation/SWMP element that corresponds to the SWMP activity you want changed, describe the requested change, and provide a rationale for the change. Such changes cannot be implemented without prior approval from the Department and may require a permit revision in accordance with Rule 62-620.325, F.A.C.
* Row B ― If applicable, include in this row any changes to your SWMP activities that are NOT established as specific requirements under Part III.A of your permit but rather are activities at the discretion of the permittee. Provide the permit citation/SWMP element that corresponds to the SWMP activity you have changed, describe the change, and provide a rationale for the change.

# ANNUAL REPORT FORM

# FOR INDIVIDUAL NPDES PERMITS FOR

# MUNICIPAL SEPARATE STORM SEWER SYSTEMS

**(RULE 62-624.600(2), F.A.C.)**

* This Annual Report Form must be completed and submitted to the Department to satisfy the annual reporting requirements established in Rule 62-621.600, F.A.C.

**Submit the form and attachments to:**

Florida Department of Environmental Protection

Mail Station 2500

2600 Blair Stone Road

Tallahassee, Florida 32399-2400

* Submit this fully completed and signed form and any REQUIRED attachments by mail to the address in the box at right.
* Refer to the Form Instructions for guidance on completing each section.
* **Please print or type information in the appropriate areas below.**

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| --- | --- | --- | --- | --- |
| SECTION I. BACKGROUND INFORMATION | | | | |
| **A.** | Permittee Name: INSERT | | | |
| **B.** | Permit Name: Lee County Municipal Separate Storm Sewer System | | | |
| **C.** | Permit Number: FLS000035-003 (Cycle 3) | | | |
| **D.** | Annual Report Year:  Year 1  Year 2  Year 3  Year 4  Year 5  Other, specify Year: | | | |
| **E.** | Reporting Time Period (month/year):      /      through       / | | | |
| **F.** | Name of the Responsible Authority: | | | |
| Title: | | | |
| Mailing Address: | | | |
| City: | Zip Code: | | County: |
| Telephone Number: | | Fax Number: | |
| E-mail Address: | | | |
| **G.** | Name of the Designated Stormwater Management Program Contact (if different from Section I.F above): | | | |
| Title: | | | |
| Department: | | | |
| Mailing Address: | | | |
| City: | Zip Code: | | County: |
| Telephone Number: | | Fax Number: | |
| E-mail Address: | | | |

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| SECTION II. MS4 MAJOR OUTFALL INVENTORY (Not Applicable In Year 1) | |
| **A.** | Number of outfalls ADDED to the outfall inventory in the current reporting year (insert “0” if none):  (Does this number include non-major outfalls?  Yes  No  Not Applicable) |
| **B.** | Number of outfalls REMOVED from the outfall inventory in the current reporting year (insert “0” if none):  (Does this number include non-major outfalls?  Yes  No  Not Applicable) |
| **C.** | Is the change in the total number of outfalls due to lands annexed or vacated?  Yes  No  Not Applicable |

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| SECTION III. MONITORING PROGRAM | |
| **A.** | Provide a brief statement as to the status of monitoring plan implementation: |
| **B.** | Provide a brief discussion of the monitoring results to date:  *DEP Note: See Part V of the permit for the monitoring requirements.* |
| **C.** | Attach a monitoring data summary, as required by the permit. |

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| SECTION IV. FISCAL ANALYSIS | |
| **A.** | Total expenditures for the NPDES stormwater management program for the current reporting year: $  *DEP Note: If program resources have decreased from the previous year, attach a discussion of the impacts on the implementation of the SWMP as per Part II.F of the permit.* |
| **B.** | Total budget for the NPDES stormwater management program for the subsequent reporting year: $ |

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| SECTION V. MATERIALS TO BE SUBMITTED WITH THIS ANNUAL REPORT FORM | | |
| Only the following materials are to be submitted to the Department along with this fully completed and signed Annual Report Form (check the appropriate box to indicate whether the item is attached or is not applicable): | | |
| Attached | N/A | ***\*\*\*DEP Note: Please complete Checklists A & B at the end of the tailored form.\*\*\**** |
|  |  | Any additional information required to be submitted in this current annual reporting year in accordance with Part III.A of your permit that is not otherwise included in Section VII below. |
|  |  | A monitoring data summary as directed in Section III.C above and in accordance with Rule 62-624.600(2)(c), F.A.C. |
|  |  | Year 1 ONLY: An inventory of all known major outfalls and a map depicting the location of the major outfalls (hard copy or CD-ROM) in accordance with Rule 62-624.600(2)(a), F.A.C. |
|  |  | Year 3 ONLY: The estimates of pollutant loadings and event mean concentrations for each major outfall or each major watershed in accordance with Rule 62-624.600(2)(b), F.A.C. |
|  |  | Year 4 ONLY: Permit re-application information in accordance with Rule 62-624.420(2), F.A.C. |
| **DO NOT SUBMIT ANY OTHER MATERIALS (such as records and logs of activities, monitoring raw data, public outreach materials, etc.)** | | |

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| SECTION VI. CERTIFICATION STATEMENT AND SIGNATURE | | | | | |
| *The Responsible Authority listed in Section I.F above must sign the following certification statement, as per Rule 62-620.305, F.A.C:*  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 upon 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. | | | | | |
| Name of Responsible Authority (type or print): | |  | | |  |
| Title: |  | | | |  |
| Signature: |  | | Date: | /    / |  |
|  | | | | |  |

| **SECTION VII. STORMWATER MANAGEMENT PROGRAM (SWMP) SUMMARY TABLE** | | | | | | | | | | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A.** | **B.** | | | | | | | | | | | | | | **C.** | | | | **D.** | | | **E.** | **F.** | |
| **Permit Citation/SWMP Element** | **Permit Requirement/Quantifiable SWMP Activity** | | | | | | | | | | | | | | **Number of Activities Performed** | | | | **Documentation / Record** | | | **Entity Performing the Activity** | **Comments** | |
| **Part III.A.1** | **Structural Controls and Stormwater Collection Systems Operation** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Maintain an up-to-date inventory of the structural controls and roadway stormwater collection structures operated by the permittee, including, at a minimum, all of the types of control structures listed in Table II.A.1.a of the permit. Report the current known inventory.  *DEP Note: The permittee needs to “customize” this section by adding any structural controls to the list below that are part of the permittee’s MS4 currently or are planned for the future. The permittee may remove any structural controls listed that it does not have currently or will likely not have during this permit cycle. Please see the attached description of each type of structure. In addition, the permittee may choose its own unit of measurement for each structural control to be consistent with the unit of measurement in the documentation. Unit options include: miles, linear feet, acres, etc.*  Provide an inventory of all known major outfalls covered by the permit and a map depicting the location of the major outfalls (hard copy or CD-ROM). Provide the outfall inventory and map with the Year 1 Annual Report.  Report the number of inspection and maintenance activities conducted for each type of structure included in Table II.A.1.a, and the percentage of the total inventory of each type of structure inspected and maintained. If the minimum inspection frequencies set forth in Table II.A.1.a were not met, provide as an attachment an explanation of why they were not and a description of the actions that will be taken to ensure that they will be met.  *DEP Note: If the minimum inspection frequencies set forth in Table II.A.1.a of the permit were not met for one or more type of structure, the permittee must provide as an attachment an explanation of why they were not and a description of the actions that will be taken to ensure that they will be met. Please provide the title of the attached explanation in Column D and the name of the entity who finalized the explanation in Column E.*  Maintain documentation of the wet detention systems in the Adopt-A-Pond program. Report the number of systems in the Adopt-A-Pond program. | | | | | | | | | | | | | | | | | | | | | | | |
| **Type of Structure** | | | | **Number of Activities Performed** | | | | | | | | | | | | | | **Documentation / Record** | | | **Entity Performing the Activity** | **Comments** | |
|  | | | | **Total Number of Structures** | | **Number of Inspections** | | | | | **Percentage**  **Inspected** | **Number of Maintenance Activities** | | | | **Percentage Maintained** | |  | | |  |  | |
| **Dry retention systems** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Exfiltration trench / French drains (linear feet)** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Grass treatment swales (miles)** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Dry detention systems** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Wet detention systems** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Pollution control boxes** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Stormwater pump stations** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Major stormwater outfalls** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Weirs or other control structures** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Canals or Levees** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **MS4 pipes / culverts (miles)** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Inlets / catch basins / grates** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Ditches / conveyance swales (miles)** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **Systems in the Adopt-A-Pond program** | | | |  | |  | | | | |  |  | | | |  | |  | | |  |  | |
| **ATTACH explanation if any of the minimum inspection frequencies in Table II.A.1.a were not met** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Year 1 ONLY: Attach a map of all known major outfalls** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Part III.A.2** | **Areas of New Development and Significant Redevelopment** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Report the number of significant redevelopment projects reviewed by the permittee for post-development stormwater considerations.  *DEP Note: Please provide an explanation in Column F for any “0” reported in Column C.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Number of significant redevelopment projects reviewed** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| Provide in the Year 2 Annual Report the summary report of the review of local codes activity. Provide in the Year 4 Annual Report the follow-up report on plan implementation of modifying codes to allow low impact design BMPs.  *DEP Note: Refer to Part III.A.2 of the permit for details regarding what the review entails, and what must be included in the summary report and follow-up report. Please provide the title of the attached report in Column D and the name of the entity who finalized the report in Column E.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Year 2 ONLY: Attach the summary report of the review activity** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Year 4 ONLY: Attach the follow-up report on plan implementation** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Part III.A.3** | **Roadways** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Annually review (and revise, as needed) and implement the permittee’s written procedures for the litter control program(s) for public streets, roads, and highways, including rights-of-way, employed within the permittee’s jurisdictional area and properly dispose of collected material. Implement the program on a monthly, or on an as needed, basis. Report on the litter control program, including the frequency of litter collection, an estimate of the total number of road miles cleaned or amount of area covered by the activities, and an estimate of the quantity of litter collected.  *DEP Note: Please provide an explanation in Column F for any “0” reported in Column C. In addition, the permittee may choose its own units of measurement for the reporting items. Unit options for the amount of litter include: bags, cubic yards, pounds, tons. Unit options for the amount of area covered by the activity include: square feet, linear feet, yards, miles, acres. If all litter collection is performed by staff or by contractors, but not by both, please remove the non-applicable reporting items.* | | | | | | | | | | | | | | | | | | | | | | | |
| **PERMITTEE Litter Control Program: Frequency of litter collection** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **PERMITTEE Litter Control Program: Estimated amount of area maintained (linear feet)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **PERMITTEE Litter Control Program: Estimated amount of litter collected (cubic yards)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **CONTRACTOR Litter Control Program: Frequency of litter collection** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **CONTRACTOR Litter Control Program: Estimated amount of area maintained (linear feet)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **CONTRACTOR Litter Control Program: Estimated amount of litter collected (cubic yards)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| If an Adopt-A-Road or similar program is implemented, report the total number of road miles cleaned and an estimate of the quantity of litter collected.  *DEP Note: The permittee may choose its own unit of measurement for the amount of litter collected. Unit options include: bags, cubic yards, pounds, tons. If an Adopt-A-Road or similar program is not implemented by the permittee, please note that in Column F but do not remove the Adopt-A-Road Program reporting items.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Trash Pick-up Events: Total miles cleaned** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Trash Pick-up Events: Estimated amount of litter collected (cubic yards)** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Adopt-A-Road Program: Total miles cleaned** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Adopt-A-Road Program: Estimated amount of litter collected (cubic yards)** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| Report on the street sweeping program, including the frequency of the sweeping, total miles swept, an estimate of the quantity of sweepings collected, and the total nitrogen (TN) and total phosphorus (TP) loadings that were removed by the collection of sweepings. If no street sweeping program is implemented, provide the explanation of why not in the Year 1 Annual Report.  *DEP Note: Please provide an explanation in Column F for any “0” reported in Column C. Also, the permittee may choose its own unit of measurement for the amount of sweeping material collected. Unit options include: cubic yards, pounds, tons.*  *DEP Note: If the permittee has curbs and gutters but no street sweeping program is implemented, the permittee must provide an explanation of why not in the Year 1 Annual Report. Refer to Part III.A.3 of the permit for the information that must be included in the explanation (including the alternate BMPs used or planned in lieu of street sweeping). Please provide the title of the attached explanation in Column D and the name of the entity who finalized the explanation in Column E.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Frequency of street sweeping** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Total miles swept (per year)** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Estimated quantity of sweeping material collected (cubic yards)** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Total nitrogen loadings removed (pounds)** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Total phosphorus loadings removed (pounds)** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Year 1 ONLY: If have curbs and gutters, attach explanation of why no street sweeping program and the alternate BMPs used or planned** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| Annually review (and revise, as needed) and implement the permittee’s written standard practices to reduce the pollutants in stormwater runoff from areas associated with road repair and maintenance, and from permittee-owned or operated equipment yards and maintenance shops that support road maintenance activities. Report the number of applicable facilities and the number of inspections conducted for each facility.  *DEP Note: The permittee needs to “customize” this section by listing the names of the applicable facilities in Column B and the number of inspections of each facility in Column C. Add more rows if necessary. If “0” is reported in Column C for the number of inspections conducted and the permittee has one or more applicable facilities, please provide an explanation in Column F for why no inspections were conducted. In addition, if the same facility is applicable under both Parts III.A.3 and III.A.5 of the permit, the same site inspection can count towards both inspection requirements as long as it covers the applicable waste area(s). Be sure to report the site inspection under both Parts III.A.3 and III.A.5.* | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | **Number of Inspections** | | | | |  | |  |  | |
| **Name of facility #1:** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Name of facility #2:** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Name of facility #3:** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Part III.A.4** | **Flood Control Projects** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Report the total number of flood control projects that were constructed by the permittee during the reporting period and the number of those projects that did NOT include stormwater treatment. The permittee shall provide a list of the projects where stormwater treatment was not included with an explanation for each of why it was not. Report on any stormwater retrofit planning activities and the associated implementation of retrofitting projects to reduce stormwater pollutant loads from existing drainage systems that do not have treatment BMPs.  *DEP Note*: *A “stormwater retrofit project” is one implemented primarily to provide stormwater treatment for areas currently without treatment.*  *DEP Note: The status of the flood control and retrofit projects should be reported as of the last day of the applicable reporting period. Therefore, there should be no duplication for those reported as planned, for those reported as under construction and for those reported as completed.*  *DEP Note: If applicable, please provide the title of the attached list of flood control projects that did not include stormwater treatment in Column D and the name of the entity who finalized the list in Column E.* | | | | | | | | | | | | | | | | | | | | | | | |
| Flood control projects completed during the reporting period | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Flood control projects completed during the reporting period that did not include stormwater treatment** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **ATTACH a list of the flood control projects that did not include stormwater treatment and an explanation for each of why it was not** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Stormwater retrofit projects planned** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Stormwater retrofit projects under construction during the reporting period** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Stormwater retrofit projects completed during the reporting period** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Part III.A.5** | **Municipal Waste Treatment, Storage, and Disposal Facilities Not Covered by an NPDES Stormwater Permit** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Annually review (and revise, as needed) and implement the permittee’s written procedures for inspections and the implementation of measures to control discharges from the following facilities that are not otherwise covered by an NPDES stormwater permit:   * Operating municipal landfills; * Municipal waste transfer stations; * Municipal waste fleet maintenance facilities; and * Any other municipal waste treatment, waste storage, and waste disposal facilities.   Report the number of applicable facilities and the number of the inspections conducted for each facility.  *DEP Note: The permittee needs to “customize” this section by listing the names of the applicable facilities in Column B and the number of inspections of each facility in Column C. Add more rows if necessary. If “0” is reported in Column C for the number of inspections conducted and the permittee has one or more applicable facilities, please provide an explanation in Column F for why no inspections were conducted.* ***An applicable facility under Part III.A.5 includes, but is not limited to, those facilities/yards where street sweeping material and/or yard waste are temporary stockpiled, and where solid waste collection vehicles are parked and/or maintained.*** *In addition, if the same facility is applicable under both Parts III.A.3 and III.A.5 of the permit, the same site inspection can count towards both inspection requirements as long as it covers the applicable waste area(s). Be sure to report the site inspection under both Parts III.A.3 and III.A.5.* | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | **Number of Inspections** | | | | |  | |  |  | |
| **Name of facility #1:** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Name of facility #2:** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Name of facility #3:** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Name of facility #4:** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Part III.A.6** | **Pesticides, Herbicides, and Fertilizer Application** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Continue to require proper certification and licensing by the Florida Department of Agriculture and Consumer Services (FDACS) for all applicators contracted to apply pesticides, herbicides, or fertilizers on permittee-owned property, as well as any permittee personnel employed in the application of these products. Report the number of permittee personnel applicators and contracted commercial applicators of pesticides and herbicides who are FDACS certified / licensed. Report the number of permittee personnel and contractors who have been trained through the Green Industry BMP Program, and the number of contracted commercial applicators of fertilizer who are FDACS certified / licensed.  *DEP Note: If “0” is reported in Column C for any of the reporting items, please include in Column F an explanation of why training was not provided* *to / obtained by personnel and contractors during the applicable reporting year, the most recent year that training / certification was previously provided / obtained, and the names of the personnel and contractors previously trained / certified*. | | | | | | | | | | | | | | | | | | | | | | | |
| **PERSONNEL: Florida Department of Agriculture and Consumer Services (FDACS) certified applicators of pesticides and herbicides** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **CONTRACTORS: FDACS certified / licensed applicators of pesticides and herbicides** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **CONTRACTORS: FDACS certified / licensed applicators of fertilizer** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **PERSONNEL: Green Industry BMP Program training completed** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **CONTRACTORS: Green Industry BMP Program training completed** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| Pursuant to SB 2080 (2009), all local governments are encouraged to adopt a Florida-friendly Landscaping Ordinance similar to the one set forth in the document “Florida-friendly Guidance Models for Ordinances, Covenants and Restrictions.” If the broader Florida-friendly ordinance described above is not adopted, then all local governments within the watershed of a nutrient-impaired water body shall adopt the Department’s Model Ordinance for Florida-Friendly Fertilizer Use on Urban Landscapes pursuant to SB 494 (2009) or an ordinance that includes all of the requirements set forth in the Model Ordinance. The ordinance shall be adopted within 24 months of the date of permit issuance. Provide a copy of the adopted ordinance with the subsequent Year 1 or Year 2 Annual Report.  *DEP Note: If this provision is not applicable because the permittee is not within the watershed of a nutrient-impaired water body, then please indicate that in Column F, but do not remove this reporting item.*  *DEP Note: Please provide the title and citation of the ordinance in Column D, and the name of the entity who finalized the ordinance in Column E.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Year 1 or Year 2 ONLY: Attach copy of adopted Florida-friendly** **ordinance** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| During Year 1 of the permit, develop and implement a written public education and outreach program plan to encourage citizens to reduce their use of pesticides, herbicides, and fertilizers. Report on the public education and outreach activities that are performed or sponsored by the permittee within the permittee’s jurisdiction to encourage citizens to reduce their use of pesticides, herbicides, and fertilizers, including the type and number of activities conducted, the type and number of materials distributed, the percentage of the population reached by the activities in total, and the number of Web site visits (if applicable). Activities performed under the Florida Yards and Neighborhoods (FYN) program should only be reported if the permittee is contributing funding towards the FYN staff and program within its jurisdiction.  *DEP Note: The permittee should “customize” the list of public outreach activities by removing items or adding items to the list below as appropriate to their particular public outreach program. However, the reporting item of “Estimated percentage of the population reached by the activities in total” must remain. The permittee may add more specifics to the reporting items, such as the name of the brochure or newsletter distributed. If “0” is reported in Column C for all the reporting items please include in Column F an explanation for why no outreach was performed.*  *DEP Note: Lee County is to report the public education and outreach activities that it performed county-wide (and not just in the unincorporated areas of Lee County). The co-permittees are to report just the public education and outreach activities that they performed.*  *DEP Note: Indicate under Column E “Entity Performing the Activity” if FYN or IFAS is performing any of the reported public education and outreach activities. In addition, please complete the following line:*  **FYN PROGRAM FUNDING: Permittee Provides Funding?  Yes  No Amount of Funding = $** | | | | | | | | | | | | | | | | | | | | | | | |
| **Estimated percentage of the population reached by the activities in total** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **Brochures/Flyers/Fact sheets distributed** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **FYN: Brochure/Flyers/Fact sheets distributed** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **Neighborhood presentations: Number conducted** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **FYN: Neighborhood presentations: Number of participants** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **FYN: Neighborhood presentations: Number conducted** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **Neighborhood presentations: Number of participants** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **Newspapers & newsletters: Number of articles/notices published** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **Newsletters: Number of newsletters distributed** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **Public displays (e.g., kiosks, storyboards, posters, etc.)** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **FYN: Public displays (e.g., kiosks, storyboards, posters, etc.)** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **Radio or television Public Service Announcements (PSAs)** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **FYN: Radio or television Public Service Announcements (PSAs)** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **School presentations: Number conducted** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **School presentations: Number of participants** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **FYN: School presentations: Number conducted** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **FYN: School presentations: Number of participants** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **Seminars/Workshops: Number conducted** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **Seminars/Workshops: Number of participants** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **FYN: Seminars/Workshops: Number conducted** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **FYN: Seminars/Workshops: Number of participants** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **Special events: Number conducted** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **Special events: Number of participants** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **FYN: Special events: Number conducted** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **FYN: Special events: Number of participants** | | | | | | | | | | | | | |  | | | | | |  | FYN |  | |
| **Web Site: Number of hits / visitors to the stormwater-related pages** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **Part III.A.7.a** | **Illicit Discharges and Improper Disposal ⎯ Inspections, Ordinances, and Enforcement Measures** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Where applicable, strengthen the legal authority to conduct inspections, conduct monitoring, control illicit discharges, illicit connections, illegal dumping and spills into the MS4 and to require compliance with conditions in ordinances, permits, contracts, and orders. Report amendments, as needed.  *DEP Note: If applicable, please provide the title of the attached report in Column D and the name of the entity who finalized the report in Column E.* | | | | | | | | | | | | | | | | | | | | | | | |
| **ATTACH a report on any amendments to the applicable legal authority** | | | | | | | | | | | | | |  | | | | | |  |  |  | |
| **Part III.A.7.c** | **Illicit Discharges and Improper Disposal ⎯ Investigation of Suspected Illicit Discharges and/or Improper Disposal** | | | | | | | | | | | | | | | | | | | | | | | |
|  | During Year 1 of the permit, develop and implement a written proactive inspection program plan for identifying and eliminating sources of illicit discharges, illicit connections, or dumping to the MS4. Report on the proactive inspection program, including the number of inspections conducted, the number of illicit activities found, and the number and type of enforcement actions taken.  *DEP Note: If “0” is reported in Column C for the first reporting item, please include an explanation in Column F for why no proactive inspections were performed. In addition, the permittee should re-word the “NOVs / warning letters / citations issued” reporting item to more accurately reflect its particular initial enforcement activity, if necessary.*  *DEP Note: Proactive inspections may include, for example, suspect areas (e.g., industrial areas), commercial businesses (e.g., restaurants, car washes, service stations, laundries / dry cleaners, auto body shops, mobile carpet cleaners) or temporary activities (e.g., special events / fairs / circus) that would not otherwise be inspected during routine inspections and maintenance of the MS4, in association with high risk industrial facilities or construction sites, or in response to citizen or staff reports*.  *DEP Note: Lee County is to report the ONLY the proactive inspections it performed in the unincorporated areas of Lee County – any proactive inspections it performed in the co-permittees’ jurisdictions are to be reported by the co-permittees. Each co-permittee is to report the Lee County proactive inspections done in their jurisdiction separately from the proactive inspections that the co-permittee performed itself.*  *DEP Note: Refer to Part III.A.7.c of the permit for what must be included in the written proactive inspection program plan.* *Please provide the title of the attached plan in Column D and the name of the entity who finalized the plan in Column E.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Proactive inspections performed by Lee County on behalf of a co-permittee for suspected illicit discharges / connections / dumping** | | | | | | | | | | | | | |  | | |  | | | | Lee County DNR |  | |
| **Proactive inspections performed by the permittee for suspected illicit discharges / connections / dumping** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Illicit discharges / connections / dumping found during a proactive inspection** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Notices of Violation (NOVs) / warning letters / citations issued for illicit discharges / connections / dumping found during a proactive inspection** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Fines issued for illicit discharges / connections / dumping found during a proactive inspection** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Year 1 ONLY: Attach the written proactive inspection program plan** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| Annually review (and revise, as needed) and implement the permittee’s written procedures to conduct reactive investigations to identify and eliminate the source(s) of illicit discharges, illicit connections or improper disposal to the MS4, based on reports received from permittee personnel, contractors, citizens, or other entities regarding suspected illicit activity. Report on the reactive investigation program as it relates to responding to reports of suspected illicit discharges, including the number of reports received, the number of investigations conducted, the number of illicit activities found, and the number and type of enforcement actions taken. If a permittee relies on Lee County to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Lee County shall make available) the necessary annual report information from the County  *DEP Note: If the number of reports received differs from the number of reactive investigations, please provide an explanation for the discrepancy in Column F. In addition, the permittee should re-word the “NOVs / warning letters / citations issued” reporting item to more accurately reflect its particular initial enforcement activity, if necessary.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Reports of suspected illicit connections / discharges / dumping received** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Reactive investigations of reports of suspected illicit discharges/ connections / dumping** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Illicit discharges / connections / dumping found during a reactive investigation** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Notices of Violation (NOVs) / warning letters / citations issued for illicit discharges / connections / dumping found during a reactive investigation** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| **Fines issued for illicit discharges / connections / dumping found during a reactive investigation** | | | | | | | | | | | | | |  | | |  | | | |  |  | |
| During Year 1 of the permit, develop and implement a written plan for the training of all appropriate permittee personnel (including field crews, fleet maintenance staff, and inspectors) and contractors to identify and report conditions in the stormwater facilities that may indicate the presence of illicit discharges / connections / dumping to the MS4. Refresher training shall be provided annually. Report the type of training activities, and the number of permittee personnel and contractors trained (both in-house and outside training).  *DEP Note: If “0” is reported for either reporting item, please include in Column F an explanation of why training was not provided* *to / obtained by personnel and contractors during the applicable reporting year, the most recent year that training was previously provided / obtained, and the names of the personnel and contractors previously trained*. | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **Initial Training** | | | | | | **Refresher Training** | | | | | |  | | |  | | | |  |  | |
| **Personnel trained** | |  | | | | | |  | | | | | |  | | |  | | | |  |  | |
| **Contractors trained** | |  | | | | | |  | | | | | |  | | |  | | | |  |  | |
| **Part III.A.7.d** | **Illicit Discharges and Improper Disposal ⎯ Spill Prevention and Response** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Annually review (and revise, as needed) and implement the permittee’s written spill-prevention/spill-response plan and procedures to prevent, contain, and respond to spills that discharge into the MS4. Report on the spill prevention and response activities, including the number of spills addressed. If a permittee relies on a Lee County Fire District to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Lee County Fire District shall make available) the necessary annual report information from the County.  *DEP Note: The permittee may report the number of hazardous material spills separately from the number of non-hazardous material spills, or report one combined number, to more accurately reflect its tracking of these spills.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Hazardous and non-hazardous material spills responded to** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| During Year 1 of the permit, develop and implement a written plan for the training of all appropriate permittee personnel (including field crews, firefighters, fleet maintenance staff and inspectors) and contractors on proper spill prevention, containment, and response techniques and procedures. Refresher training shall be provided annually. Report the type of training activities, and the number of permittee personnel and contractors trained (both in-house and outside training).  *DEP Note: If “0” is reported for either reporting item, please include in Column F an explanation of why training was not provided* *to / obtained by personnel and contractors during the applicable reporting year, the most recent year that training was previously provided / obtained, and the names of the personnel and contractors previously trained*. | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | **Initial Training** | | | | **Refresher Training** | | | | | | |  | | | |  | | |  |  | |
| **Personnel trained** | | |  | | | |  | | | | | | |  | | | |  | | |  |  | |
| **Contractors trained** | | |  | | | |  | | | | | | |  | | | |  | | |  |  | |
| **Part III.A.7.e** | **Illicit Discharges and Improper Disposal ⎯ Public Reporting** | | | | | | | | | | | | | | | | | | | | | | | |
|  | During Year 1 of the permit, develop and implement a written public education and outreach program plan to promote, publicize, and facilitate public reporting of the presence of illicit discharges and improper disposal of materials into the MS4. Report on the public education and outreach activities that are performed or sponsored by the permittee within the permittee’s jurisdiction to encourage the public reporting of suspected illicit discharges and improper disposal of materials, including the type and number of activities conducted, the type and number of materials distributed, the percentage of the population reached by the activities in total, and the number of Web site visits (if applicable).  *DEP Note: The permittee should “customize” the list of public outreach activities by removing items or adding items to the list below as appropriate to their particular public outreach program. However, the reporting item of “Estimated percentage of the population reached by the activities in total” must remain. The permittee may add more specifics to the reporting items, such as the name of the brochure or newsletter distributed. If “0” is reported in Column C for all the reporting items, please include in Column F an explanation for why no outreach was performed.*  *DEP Note: Lee County is to report the public education and outreach activities that it performed county-wide (and not just in the unincorporated areas of Lee County). The co-permittees are to report just the public education and outreach activities that they performed.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Estimated percentage of the population reached by the activities in total** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Publicize the Lee County Complaint or your local complaint Hotline** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Brochures/Flyers/Fact sheets distributed** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Neighborhood presentations: Number conducted** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Neighborhood presentations: Number of participants** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Newspapers & newsletters: Number of articles/notices published** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Newsletters: Number of newsletters distributed** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Public displays (e.g., kiosks, storyboards, posters, etc.)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Radio or television Public Service Announcements (PSAs)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **School presentations: Number conducted** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **School presentations: Number of participants** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Seminars/Workshops: Number conducted** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Seminars/Workshops: Number of participants** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Special events: Number conducted** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Special events: Number of participants** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Web Site: Number of visitors to the stormwater-related pages** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Part III.A.7.f** | **Illicit Discharges and Improper Disposal ⎯ Oils, Toxics, and Household Hazardous Waste Control** | | | | | | | | | | | | | | | | | | | | | | | |
|  | During Year 1 of the permit, develop and implement a written public education and outreach program plan to encourage the proper use and disposal of used motor vehicle fluids, leftover hazardous household products, and lead acid batteries. Report on the public education and outreach activities that are performed or sponsored by the permittee within the permittee’s jurisdiction to encourage the proper use and disposal of oils, toxics, and household hazardous waste, including the type and number of activities conducted, the type and number of materials distributed, the amount of waste collected / recycled / properly disposed, the percentage of the population reached by the activities in total, and the number of Web site visits (if applicable).  *DEP Note: The permittee should “customize” the list of public outreach activities by removing items or adding items to the list below as appropriate to their particular public outreach program. However, the reporting items of “Estimated percentage of the population reached by the activities in total” and “Household Chemical Collection Center Program: Amount of waste collected / recycled / properly disposed (tons)” must remain. The permittee may add more specifics to the reporting items, such as the name of the brochure or newsletter distributed. If “0” is reported in Column C for all the reporting items, please include in Column F an explanation for why no outreach was performed.*  *DEP Note: Lee County is to report the public education and outreach activities that it performed county-wide (and not just in the unincorporated areas of Lee County). The co-permittees are to report just the public education and outreach activities that they performed.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Estimated percentage of the population reached by the activities in total** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Household Chemical Collection Center Program: Amount of waste collected / recycled / properly disposed (tons)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Household Chemical Collection Center Program: Events** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Household Hazardous Waste Materials Guides distributed** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Brochures/Flyers/Fact sheets distributed** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Neighborhood presentations: Number conducted** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Neighborhood presentations: Number of participants** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Newspapers & newsletters: Number of articles/notices published** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Newsletters: Number of newsletters distributed** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Public displays (e.g., kiosks, storyboards, posters, etc.)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Radio or television Public Service Announcements (PSAs)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **School presentations: Number conducted** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **School presentations: Number of participants** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Seminars/Workshops: Number conducted** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Seminars/Workshops: Number of participants** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Special events: Number conducted** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Special events: Number of participants** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Storm sewer inlets newly marked/replaced** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Web Site: Number of visitors to the stormwater-related pages** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Part III.A.7.g** | **Illicit Discharges and Improper Disposal ⎯ Limitation of Sanitary Sewer Seepage** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Annually review (and revise, as needed) and implement the permittee’s written procedures to reduce or eliminate sanitary wastewater contamination into the MS4, including discharges to the MS4 from sanitary sewer overflows (SSOs) and from inflow / infiltration from collection / transmission systems and/or septic tank systems. Advise the appropriate utility owner of a violation if constituents common to wastewater contamination are discovered in the MS4. Report on the type and number of activities undertaken to reduce or eliminate SSOs and inflow/ infiltration, the number of SSOs or inflow / infiltration incidents found and the number resolved, and the name of the owner of the sanitary sewer system within the permittee’s jurisdiction.  *DEP Note: The permittee needs to “customize” this section as it pertains to the type of activities undertaken to reduce or eliminate SSOs and inflow / infiltration into the MS4. The first five reporting items below are examples.*  *DEP Note: The permittee should contact the appropriate authorities for accurate reporting information, such as the sanitary sewer system operator who is responsible for investigating and eliminating SSOs and the local health department who is responsible for permitting / overseeing septic tank systems.*  *DEP Note: Report only the SSOs and inflow / infiltration incidents into the MS4.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Activity to reduce/eliminate SSOs and inflow / infiltration: Sanitary sewer pipe inspected for infiltration (linear feet)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Activity to reduce/eliminate SSOs and inflow / infiltration: Sanitary sewer pipe sealed, lined, and / or replaced (linear feet)** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Activity to reduce/eliminate SSOs and inflow / infiltration: Sanitary sewer line breaks repaired** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Activity to reduce/eliminate SSOs and inflow / infiltration: Septic systems removed** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Activity to reduce/eliminate SSOs and inflow / infiltration: Emergency generator added** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **SSO incidents discovered** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **SSO incidents resolved** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Inflow / infiltration incidents discovered** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Inflow / infiltration incidents resolved** | | | | | | | | | | | | | |  | | | |  | | |  |  | |
| **Name of owner of the sanitary sewer system** | | | | | | | | | | | | | |  | | | | | | | | | |
| **Part III.A.8.a** | **Industrial and High-Risk Runoff ⎯ Identification of Priorities and Procedures for Inspections** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Continue to maintain an up-to-date inventory of all existing high risk facilities discharging into the permittee’s MS4. The inventory shall identify the outfall and surface water body into which each high risk facility discharges. For the purposes of this permit, high risk facilities include:   * Operating municipal landfills; * Hazardous waste treatment, storage, disposal and recovery facilities; * Facilities that are subject to EPCRA Title III, Section 313 (also known as the Toxics Release Inventory (TRI) maintained by the U.S. EPA); and * Any other industrial or commercial discharge that the permittee determines is contributing a substantial pollutant loading to the permittee’s MS4. This could include facilities identified through the proactive inspection program as per Part III.A.7.c of the permit.   Report on the high risk facilities inventory, including the type and total number of high risk facilities and the number of facilities newly added each year. If a permittee relies on Lee County to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Lee County shall make available) the necessary annual report information from the County.  *DEP Note: The TRI is updated every spring / summer by the U.S. EPA at www.epa.gov/triexplorer. Select “Facility” on the left, chose your Geographic Location, and then select “Generate Report.” Please indicate in Column F when (month / year) you last checked EPA’s TRI for applicable facilities.*  During Year 1 of the permit, develop and implement a written plan for conducting inspections of high risk facilities to determine compliance with all appropriate aspects of the stormwater program. While the permittee may determine the order and frequency of the inspections, the permittee shall inspect each identified facility at least once during the permit term; however, facilities identified as high risk due to the findings of the proactive inspection program as per Part III.A.7.c of the permit shall be inspected annually. Report on the high risk facilities inspection program, including the number of inspections conducted and the number and type of enforcement actions taken. If a permittee relies on Lee County to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Lee County shall make available) the necessary annual report information from the County.  *DEP Note: If “0” is reported for the number of inspections conducted and the permittee has one or more high risk facilities, please provide an explanation in Column F for why no inspections were conducted. In addition, the permittee should re-word the “NOVs / warning letters / citations issued” reporting item to more accurately reflect its particular initial enforcement activity, if necessary.*  *DEP Note: Lee County is to report ONLY the inventory of high risk facilities in the unincorporated areas of Lee County – the inventory of high risk facilities located in the co-permittees’ jurisdictions are to be reported by the co-permittees. Likewise, the County is to report ONLY the high risk facility inspections it performed in the unincorporated areas of Lee County – any high risk facility inspections it performed in the co-permittees’ jurisdictions are to be reported by the co-permittees. Each co-permittee is to obtain the necessary information from Lee County that pertains to its jurisdiction.* | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | **Number of Facilities** | | **Number of Inspections** | | | **For violations discovered during a high risk inspection** | | | | | | |  | | | |  |  | |
| **Fines**  **issued** | | | **Notices of Violation (NOVs) / warning letters / citations issued** | | | |
| **Total high risk facilities** | | | | |  | |  | | |  | | |  | | | |  | | | |  |  | |
| **New high risk facilities added to the inventory during the current reporting period** | | | | |  | |  | | |  | | |  | | | |  | | | |  |  | |
| **Operating municipal landfills** | | | | |  | |  | | |  | | |  | | | |  | | | |  |  | |
| **Hazardous waste treatment, storage, disposal and recovery (HWTSDR) facilities** | | | | |  | |  | | |  | | |  | | | |  | | | |  |  | |
| **EPCRA Title III, Section 313 facilities (that are not landfills or HWTSDR facilities)** | | | | |  | |  | | |  | | |  | | | |  | | | |  |  | |
| **Facilities determined as high risk by the permittee through the proactive inspections as per Part III.A.7.c** | | | | |  | |  | | |  | | |  | | | |  | | | |  |  | |
| **Other facilities determined as high risk by the permittee (that are not facilities identified through the proactive inspections)** | | | | |  | |  | | |  | | |  | | | |  | | | |  |  | |
| **Part III.A.8.b** | **Industrial and High-Risk Runoff ⎯ Monitoring for High Risk Industries** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Sampling of the discharge to the stormwater system may be required on an as-needed basis in the event that inspections of high-risk facilities disclose suspected illicit discharges to the MS4. New high-risk industrial facilities as defined in 40 CFR 122.26(d)(2)(iv)(C) must be evaluated to determine if the new discharge is contributing a substantial pollutant load to the MS4. The evaluation may include site-specific monitoring. Report the number of high risk facilities sampled. If a permittee relies on Lee County to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Lee County shall make available) the necessary annual report information from the County.  *DEP Note: Lee County is to report ONLY the number of high risk facilities in the unincorporated areas of Lee County that were sampled – the high risk facilities located in the co-permittees’ jurisdictions that were sampled by the County are to be reported by the co-permittees.* | | | | | | | | | | | | | | | | | | | | | | | |
| **High risk facilities sampled** | | | | | | | | | | | | | |  | | | | |  | |  |  | |
| **Part III.A.9.a** | **Construction Site Runoff ⎯ Site Planning and Non-Structural and Structural Best Management Practices** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Continue to implement the local codes or land development regulations and the written pre-construction site plan review procedures that require the use and maintenance of appropriate structural and non-structural erosion and sedimentation controls during construction to reduce the discharge of pollutants to the MS4. Report the number of permittee and private pre-construction site plans reviewed for stormwater, erosion, and sedimentation controls, and the number approved.  *DEP Note: Please provide an explanation in Column F for any “0” reported in Column C.* | | | | | | | | | | | | | | | | | | | | | | | |
| **PERMITTEE SITES: Construction site plans reviewed** | | | | | | | | | | | | | | |  | | | |  | |  |  | |
| **PERMITTEE SITES: Construction site plans approved** | | | | | | | | | | | | | | |  | | | |  | |  |  | |
| **PRIVATE SITES: Construction site plans reviewed** | | | | | | | | | | | | | | |  | | | |  | |  |  | |
| **PRIVATE SITES: Construction site plans approved** | | | | | | | | | | | | | | |  | | | |  | |  |  | |
| Annually review (and revise, as needed) and implement the permittee’s written procedures to notify all new development / redevelopment permit applicants of the need to obtain all required stormwater permits. Report the number of new development/redevelopment permit applicants notified of the ERP and CGP, and the number of applicants who confirmed ERP and CGP coverage.  *DEP Note: Please provide an explanation in Column F for any “0” reported in Column C. If the number of applicants notified of ERP or CGP coverage is less than the number of construction site plans reviewed, please provide an explanation for the discrepancy in Column F.* | | | | | | | | | | | | | | | | | | | | | | | |
| **Notified of ERP stormwater permit requirements** | | | | | | | | | | | | | | |  | | | |  | |  | |  |
| **Confirmed ERP coverage** | | | | | | | | | | | | | | |  | | | |  | |  | |  |
| **Notified of CGP stormwater permit requirements** | | | | | | | | | | | | | | |  | | | |  | |  | |  |
| **Confirmed CGP coverage** | | | | | | | | | | | | | | |  | | | |  | |  | |  |
| **Part III.A.9.b** | **Construction Site Runoff ⎯ Inspection and Enforcement** | | | | | | | | | | | | | | | | | | | | | | | |
|  | As an attachment to the Year 1 Annual Report, the permittee shall submit a written plan that details the standard operating procedures for implementation of the stormwater, erosion and sedimentation inspection program for construction sites discharging stormwater to the MS4. The permittee shall implement the plan for inspecting construction sites immediately upon written approval by the Department. Prior to Department approval, the permittee shall continue to perform inspections in accordance with its previously developed construction site inspection procedures. Report on the inspection program for privately-operated and permittee-operated construction sites, including the number of active construction sites during the reporting year, the number of inspections of active construction sites, the percentage of active construction sites inspected, and the number and type of enforcement actions / referrals taken.  *DEP Note: If “0” is reported in Column C for the number of inspections conducted, please provide an explanation in Column F of why no inspections were conducted. If the number of inspections reported is equal to or less than the number of active construction sites, or the percentage inspected is less than 100%, please provide an explanation in Column F. In addition, the permittee should re-word the “NOVs / warning letters / citations issued” reporting item to more accurately reflect its particular initial enforcement activity, if necessary.*  *DEP Note: Refer to Part III.A.9.b of the permit for what must be included in the construction site inspection program plan.* *Please provide the title of the attached plan in Column D and the name of the entity who finalized the plan in Column E.* | | | | | | | | | | | | | | | | | | | | | | | |
| **PERMITTEE SITES: Active construction sites** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **PERMITTEE SITES: Inspections of active construction sites for proper stormwater, erosion and sedimentation BMPs** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **PERMITTEE SITES: Percentage of active construction sites inspected** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **PRIVATE SITES: Active construction sites** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **PRIVATE SITES: Inspections of active construction sites for proper stormwater, erosion and sedimentation BMPs** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **PRIVATE SITES: Percentage of active construction sites inspected** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **Red Tags issued** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **Notices of Violation (NOVs) issued** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **Stop Work Orders issued** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **Fines issued** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **Year 1 ONLY: Attach the written construction site inspection program plan** | | | | | | | | | | | | | |  | | | | | |  |  | |  |
| **Part III.A.9.c** | **Construction Site Runoff ⎯ Site Operator Training** | | | | | | | | | | | | | | | | | | | | | | | |
|  | During Year 1 of the permit, develop and implement a written plan for stormwater training / outreach for construction site plan reviewers, site inspectors and site operators. Provide training for permittee personnel (employed by or under contract with the permittee) involved in the site plan review, inspection or construction of stormwater management, erosion, and sedimentation controls. Also provide training for private construction site operators. All permittee inspectors (employed by or under contract with the permittee) of construction sites shall be certified through the Florida Stormwater, Erosion and Sedimentation Control Inspector Training program, or an equivalent program approved by the Department. Refresher training shall be provided annually. Report the type of training activities, the number of inspectors, site plan reviewers and site operators trained (both in-house and outside training), and the number of private construction site operators trained by the permittee.  *DEP Note: If “0” is reported for any of these reporting items, please include in Column F an explanation of why training was not provided* *to / obtained by the permittee’s staff and private construction site operators during the applicable reporting year*.  *DEP Note: The permittee should report only the number of staff and private construction site operators trained / certified during the applicable reporting year, and then note in Column F the number of staff who were previously trained / certified. Private site operator training can include pre-construction meetings.* | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Inspector**  **Certification Training** | | | **Non-Inspector**  **Initial Training (non-certification)** | | | | | **Refresher Training** | | | | |  | | |  | | | |  |  | |
| **Permittee construction site inspectors** |  | | |  | | | | |  | | | | |  | | |  | | | |  |  | |
| **Permittee construction site plan reviewers** |  | | |  | | | | |  | | | | |  | | |  | | | |  |  | |
| **Permittee construction site operators** |  | | |  | | | | |  | | | | |  | | |  | | | |  |  | |
| **Private construction site operators** |  | | |  | | | | |  | | | | |  | | |  | | | |  |  | |

| **SECTION VIII. CHANGES TO THE STORMWATER MANAGEMENT PROGRAM (SWMP) ACTIVITIES (Not Applicable In Year 4)** | | |
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| **A.** | **Permit Citation/**  **SWMP Element** | **Proposed Changes to the Stormwater Management Program Activities Established as Specific Requirements Under Part III.A of the Permit (Including the Rationale for the Change) ⎯ REQUIRES DEP APPROVAL PRIOR TO CHANGE IF PROPOSING TO REPLACE OR DELETE AN ACTIVITY.**  *DEP Note: There may be changes deemed necessary after developing / reviewing your plans and SOPs as per Part III.A of the permit, after completing your SWMP evaluation as per Part VI.B.2 of the permit, or due to a TMDL / BMAP as per Part VIII.B of the permit.* |
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| **B.** | **Permit Citation/**  **SWMP Element** | **Changes to the Stormwater Management Program Activities NOT Established as Specific Requirements Under Part III.A of the Permit (Including the Rationale for the Change)**  *DEP Note: There may be changes deemed necessary after developing / reviewing your plans and SOPs as per Part III.A of the permit, after completing your SWMP evaluation as per Part VI.B.2 of the permit, or due to a TMDL / BMAP as per Part VIII.B of the permit.* |
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| CHECKLIST A: ATTACHMENTS TO BE SUBMITTED WITH THE ANNUAL REPORTS | | | | | |
| Below is a list of items required by the permit that may need to be attached to the annual report. Please check the appropriate box to indicate whether the item is attached or is not applicable for the current reporting period. Please provide the number and the title of the attachments in the blanks provided. | | | | | |
| **Attached** | **N/A** | **Rule / Permit Citation** | **Required Attachment** | **Attachment Number** | **Attachment Title** |
|  |  | Part II.F | **EACH ANNUAL REPORT:** If program resources have decreased from the previous year, a discussion of the impacts on the implementation of the SWMP. |  |  |
|  |  | Part III.A.1 | **EACH ANNUAL REPORT:** An explanation of why the minimum inspection frequency in Table II.A.1.a was not met, if applicable. |  |  |
|  |  | Part III.A.4 | **EACH ANNUAL REPORT:** A list of the flood control projects that did not include stormwater treatment and an explanation for each of why it did not, if applicable. |  |  |
|  |  | Part III.A.7.a | **EACH ANNUAL REPORT:** A report on amendments / changes to the legal authority to control illicit discharges, connections, dumping, and spills, if applicable. |  |  |
|  |  | Part V.B.9 | **EACH ANNUAL REPORT:** Reporting and assessment of monitoring results. **[Also addressed in Section III of the Annual Report Form]** |  |  |
|  |  | Part VI.B.2 | **EACH ANNUAL REPORT:** An evaluation of the effectiveness of the SWMP in reducing pollutant loads discharged from the MS4 that, at a minimum, must include responses to the questions listed in the permit. |  |  |
|  |  | Part VIII.B.3.e | **EACH ANNUAL REPORT:** A status report on the implementation of the requirements in this section of the permit and on the estimated load reductions that have occurred for the pollutant(s) of concern. |  |  |
|  |  | Part VIII.B.4.f | **EACH ANNUAL REPORT after approval of the BPCP:** The status of the implementation of the Bacterial Pollution Control Plan (BPCP). |  |  |
|  |  | Part III.A.1 | **YEAR 1:** An inventory of all known major outfalls and a map depicting the location of the major outfalls (hard copy or CD-ROM). |  |  |
|  |  | Part III.A.3 | **YEAR 1:** If have curbs and gutters but no street sweeping program, an explanation of why no street sweeping program and the alternate BMPs used or planned. |  |  |
|  |  | Part III.A.6 | **YEAR 1 or YEAR 2:** A copy of the adopted Florida-friendly Ordinance, if applicable. |  |  |
|  |  | Part III.A.7.c | **YEAR 1:** A proactive illicit discharge / connection / dumping inspection program plan. |  |  |
|  |  | Part III.A.9.b | **YEAR 1:** A construction site inspection program plan. **[For approval by DEP]** |  |  |
|  |  | Part III.A.2 | **YEAR 2:** A summary report of a review of codes and regulations to reduce the stormwater impact from new development / redevelopment. |  |  |
|  |  | Part V.A.2 | **YEAR 3:** Estimates of annual pollutant loadings and EMCs, and a table comparing the current calculated loadings with those from the previous two Year 3 ARs. |  |  |
|  |  | Part III.A.2 | **YEAR 4:** A follow-up report on plan implementation of changes to codes and regulations to reduce the stormwater impact from new development / redevelopment. |  |  |
|  |  | Part V.A.3 | **YEAR 4:** If the total annual pollutant loadings have not decreased over the past two permit cycles, revisions to the SWMP, as appropriate. |  |  |
|  |  | Part V.B.3 | **YEAR 4:** The monitoring plan (with revisions, if applicable). |  |  |
|  |  | Part VII.C | **YEAR 4:** An application to renew the permit. |  |  |
|  |  | Part VIII.B.3.d | **YEAR 4:** A TMDL Implementation Plan / Supplemental SWMP. |  |  |

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| **CHECKLIST B: THE REQUIRED ANNUAL REVIEWS OF WRITTEN STANDARD OPERATING PROCEDURES (SOPs) & PLANS** | | | | | |
| The permit requires annual review, and revision if needed, of written Standard Operating Procedures (SOPs) and plans (e.g., public education and outreach, training, inspections). Please indicate your review status below. **If you have made revisions that need DEP approval, you must complete Section VIII.A of the annual report.** | | | | | |
| **Did not complete**  **review of existing SOP / Plan** | **Developed new written SOP / Plan** | **Reviewed & no revision needed to existing**  **SOP / Plan** | **Reviewed & revised existing SOP / Plan** | **Permit Citation** | **Description of Required SOPs / Plans** |
|  |  |  |  | Part III.A.1 | SOP and/or schedule of inspections and maintenance activities of the structural controls and roadway stormwater collection system. |
|  |  |  |  | Part III.A.2 | SOP for development project review and permitting procedures and/or local codes and regulations for new development / areas of significant development. |
|  |  |  |  | Part III.A.3 | SOP for the litter control program. |
|  |  |  |  | Part III.A.3 | SOP for the street sweeping program. |
|  |  |  |  | Part III.A.3 | SOP for inspections of equipment yards and maintenance shops that support road maintenance activities. |
|  |  |  |  | Part III.A.5 | SOP for inspections of waste treatment, storage, and disposal facilities not covered by an NPDES stormwater permit. |
|  |  |  |  | Part III.A.6 | Plan for public education and outreach on reducing the use of pesticides, herbicides and fertilizer. |
|  |  |  |  | Part III.A.6 | SOP for reducing the use of pesticides, herbicides and fertilizer, and for the proper application, storage and mixing of these products. |
|  |  |  |  | **Part III.A.7.c** | **Plan for proactive illicit discharge / connections / dumping inspections.\*** |
|  |  |  |  | Part III.A.7.c | SOP for reactive illicit discharge / connections / dumping investigations. |
|  |  |  |  | Part III.A.7.c | Plan for illicit discharge training. |
|  |  |  |  | Part III.A.7.d | SOP for spill prevention and response efforts. |
|  |  |  |  | Part III.A.7.d | Plan for spill prevention and response training. |
|  |  |  |  | Part III.A.7.e | Plan for public education and outreach on how to identify and report the illicit discharges and improper disposal to the MS4. |
|  |  |  |  | Part III.A.7.f | Plan for public education and outreach on the proper use and disposal of oils, toxics and household hazardous waste. |
|  |  |  |  | Part III.A.7.g | SOP to reduce / eliminate sanitary wastewater contamination of the MS4. |
|  |  |  |  | Part III.A.8 | SOP for inspections of high risk industrial facilities. |
|  |  |  |  | Part III.A.9.a | SOP for construction site plan review for stormwater, erosion and sedimentation controls, and ERP and CGP coverage. |
|  |  |  |  | **Part III.A.9.b** | **Plan for inspections of construction sites.\*** |
|  |  |  |  | Part III.A.9.c | Plan for stormwater, erosion and sedimentation BMPs training. |

**\* Revisions to these plans require DEP approval – please complete Section VIII.A of the annual report.**

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| **REMINDER LIST OF THE TMDL / BMAP REPORTS TO BE SUBMITTED SEPARATELY FROM AN ANNUAL REPORT** | | |
| **Rule / Permit Citation** | **Report Title** | **Due Date** |
| Part VIII.B.3.a | **6 MONTHS** **from effective date of permit:** TMDL Prioritization Report. | 3/13/12 |
| Part VIII.B.3.b | **12 MONTHS** **from effective date of permit:** TMDL Monitoring and Assessment Plan. | 9/13/12 |
| Part VIII.B.3.c | **6 MONTHS from receiving analyses from the lab:** TMDL Monitoring Report. | TBD |
| Part VIII.B.4 | **30 MONTHS** **from effective date of permit:** A Bacterial Pollution Control Plan (BPCP). | 9/13/15 |

**END OF REVISED TAILORED MS4 AR FORM**

**CYCLE 3 PERMIT**