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## Before you begin...

A fillable Microsoft Word document with all of the questions is available at <https://www.pca.state.mn.us/sites/default/files/wq-strm4-06a.doc> (for personal use only, not for submittal).

The MS4 Annual Report for 2015 will automatically save your answers when you hit the 'Next' button at the bottom of each page.

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## MS4 Annual Report for 2015

**Reporting period:** January 1, 2015 to December 31, 2015

**Due:** June 30, 2016

**Instructions:** Complete this annual report to provide a summary of your activities under the 2013 MS4 Permit (Permit) between January 1, 2015 and December 31, 2015. MPCA staff may contact you for additional information.

Fillable document available at <https://www.pca.state.mn.us/sites/default/files/wq-strm4-06a.doc> (for personal use only, not for submittal).

**Questions:** Contact Cole Landgraf at 651-757-2880 or [cole.landgraf@state.mn.us](mailto:cole.landgraf@state.mn.us) or Rachel Stangl at 651-757-2879 or [rachel.stangl@state.mn.us](mailto:rachel.stangl@state.mn.us).

### MS4 General Contact Information

Full name	John Loomis
Title	Water Resources Program Manager
Mailing address	2302 Tower Dr
City	Woodbury
State	MN
Zip code	55125

Phone	<input type="text" value="6513731531"/>
Email	<input type="text" value="jloomis@ci.woodbury.mn.us"/>

**Preparer Contact Information** (if different from the MS4 General Contact)

Full name	<input type="text"/>
Title	<input type="text"/>
Organization	<input type="text"/>
Mailing address	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
Zip code	<input type="text"/>
Phone	<input type="text"/>
Email	<input type="text"/>

**MCM 1: Public Education and Outreach**

The following questions refer to Part III.D.1. of the Permit.

Q2 Did you select a stormwater-related issue of high priority to be emphasized during this Permit term? [Part III.D.1.a.(1)]

- Yes  
 No

Q3 What is your stormwater-related issue(s)? Check all that apply.

- TMDL(s)  
 Local businesses  
 Residential BMPs  
 Pet waste  
 Yard waste

- Deicing materials
- Household chemicals
- Construction activities
- Post-construction activities
- Other

Q4 Have you distributed educational materials or equivalent outreach to the public focused on illicit discharge recognition and reporting? [Part III.D.1.a.(2)]

- Yes
- No

Q5 Do you have an implementation plan as required by the Permit? [Part III.D.1.b.]

- Yes
- No

Q6 How did you distribute educational materials or equivalent outreach? Check all that apply and provide circulation/audience associated with each item. [Part III.D.1.a.]

- Brochure
- Newsletter
- Utility bill insert
- Newspaper ad
- Radio ad
- Television ad
- Cable access channel
- Stormwater-related event
- School presentation or project
- Website
- Other (1)
- Other (2)
- Other (3)

Other (1), describe:

Q7 Intended audience? Check all that apply.

Residents

Local Businesses

Developers

Students

Employees

Other

Newsletter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newspaper ad	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater-related event	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School presentation or project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Website	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other (1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Q8** Enter the total circulation/audience (if unknown, use best estimate):

Newsletter	110000
Newspaper ad	750000
Stormwater-related event	250
School presentation or project	4000
Website	20000
Other (1)	?

Provide a brief description of each activity related to public education and outreach (e.g. rain garden workshop, school presentation, public works open house) held and the date each activity was held from January 1, 2015 to December 31, 2015. [Part III.D.1.c.(4)]






**Q9**Date of activity

**Q10**Description of activity

Date (mm/dd/yyyy)

Date (mm/dd/yyyy)

Date (mm/dd/yyyy)

Date (mm/dd/yyyy)		
Date (mm/dd/yyyy)		
Date (mm/dd/yyyy)		
Date (mm/dd/yyyy)		
Date (mm/dd/yyyy)		

Q11 Between January 1, 2015 and December 31, 2015, did you modify your BMPs, measurable goals, or future plans for your public education and outreach program? [Part IV.B.]

- Yes  
 No

Describe those modifications:

SWWD is a member of the East Metro Water Resources Education Program (EMWREP) and relies on that program for public education and outreach. EMWREP meets annually to develop a workplan. Additional information is available at <http://www.mnwcd.org/emwrep/>.

## MCM 2: Public Participation/Involvement

The following questions refer to Part III.D.2.a. of the Permit.

Q12 You must provide a minimum of one opportunity each year for the public to provide input on the adequacy of your Stormwater Pollution Prevention Program (SWPPP). Did you provide this opportunity between January 1, 2015 and December 31, 2015? [Part III.D.2.a.(1)]

- Yes  
 No

Q13 What was the opportunity that you provided? Check all that apply.

- Public meeting
- Public event
- Other

Q14 Did you hold a stand-alone meeting or combine it with another event?

- Stand-alone
- Combined

Enter the date of the public meeting (mm/dd/yyyy):

Enter the number of citizens that attended and were informed about your SWPPP:

Q17 Between January 1, 2015 and December 31, 2015, did you receive any input regarding your SWPPP?

- Yes
- No

Q19 Between January 1, 2015 and December 31, 2015, did you modify your BMPs, measurable goals, or future plans for your public participation/involvement program? [Part IV.B.]

- Yes
- No

Describe those modifications:

http://www.mnwcd.org/emwrep/."/>

### MCM 3: Illicit Discharge Detection and Elimination

The following questions refer to Part III.D.3. of the Permit.

Q20 As of December 31, 2015, have you enacted a regulatory mechanism which prohibits non-stormwater discharges to your MS4?

- Yes  
 No

Q21 Provide either a website address to the above regulatory mechanism or upload a copy. How will you provide this regulatory mechanism?

- Website address  
 Upload

Q22 Website address:

<http://www.swwdmn.org/wp-content/uploads/2016/02/2015SWWDRules.pdf>

Q24 Did you identify any illicit discharges between January 1, 2015 and December 31, 2015? [Part III.D.3.h.(4)]

- Yes  
 No

Q33 Do you have written Enforcement Response Procedures (ERPs) to compel compliance with your illicit discharge regulatory mechanism(s)? [Part III.B.]

- Yes  
 No

Q34 Provide either a website address to the above ERPs or upload a copy. How will you provide these ERPs?

- Website address  
 Upload

Q35 Website address:

[http://www.swwdmn.org/wp-content/uploads/2016/04/SWPPP\\_2014.pdf](http://www.swwdmn.org/wp-content/uploads/2016/04/SWPPP_2014.pdf)

Q37 Did you train all field staff in illicit discharge recognition (including conditions which could cause illicit discharges) and reporting illicit discharges for further investigations? [Part III.D.3.e.]

- Yes  
 No

Q38 How did you train your field staff? Check all that apply.



- Email
- PowerPoint
- Presentation
- Video
- Field Training
- Other

The following questions refer to Part III.C.1. of the Permit.

- Q39 Did you update your storm sewer system map between January 1, 2015 and December 31, 2015? [Part III.C.1.]
- Yes
  - No
- Q40 Does your storm sewer map include all pipes 12 inches or greater in diameter and the direction of stormwater flow in those pipes? [Part III.C.1.a.]
- Yes
  - No
- Q41 Does your storm sewer map include outfalls, including a unique identification (ID) number and an associated geographic coordinate? [Part III.C.1.b.]
- Yes
  - No
- Q42 Does your storm sewer map include all structural stormwater BMPs that are part of your MS4? [Part III.C.1.c.]
- Yes
  - No
- Q43 Does your storm sewer map include all receiving waters? [Part III.C.1.d.]
- Yes
  - No
- Q44 In what format is your storm sewer map available?

- Hardcopy only
- GIS
- CAD
- Other

- Q45 Between January 1, 2015 and December 31, 2015, did you modify your BMPs, measurable goals, or future plans for your illicit discharge detection and elimination (IDDE) program? [Part IV.B.]
- Yes
  - No

#### MCM 4: Construction Site Stormwater Runoff Control

The following questions refer to Part III.D.4. of the Permit.

- Q46 As of December 31, 2015, have you enacted a regulatory mechanism that is at least as stringent as the Agency's general permit to Discharge Stormwater Associated with Construction Activity (CSW Permit) No. MN R100001 (<http://www.pca.state.mn.us/index.php/view-document.html?gid=18984>) for erosion and sediment controls and waste controls? [Part III.D.4.a.]
- Yes
  - No
- Q47 Have you developed written procedures for site plan reviews as required by the Permit? [Part III.D.4.b.]
- Yes
  - No
- Q48 Have you documented each site plan review as required by the Permit? [Part III.D.4.f.]
- Yes
  - No
- Q49 Enter the number of site plan reviews conducted for sites an acre or greater of soil disturbance between January 1, 2015 and December 31, 2015:

7

- Q50 What types of enforcement actions do you have available to compel compliance with your regulatory

mechanism? Check all that apply and enter the number of each used from January 1, 2015 to December 31, 2015.

- Verbal warnings
- Notice of violation
- Administrative orders
- Stop-work orders
- Fines
- Forfeit of security of bond money
- Withholding of certificate of occupancy
- Criminal actions
- Civil penalties
- Other

Enter the number of verbal warnings issued:

Enter the number of notice of violations issued:

Enter the number of stop-work orders issued:

Enter the number criminal actions issued:

Enter the number of civil penalties issued:

Q51 Do you have written Enforcement Response Procedures (ERPs) to compel compliance with your construction site stormwater runoff control regulatory mechanism(s)? [Part III.B.]

- Yes
- No

Q52 Enter the number of active construction sites an acre or greater that were in your jurisdiction between January 1, 2015 and December 31, 2015:

Q53 Do you have written procedures for identifying priority sites? [Part III.D.4.d.(1)]

- Yes
- No

Q55 Do you have a checklist or other written means to document site inspections when determining compliance?  
[Part III.D.4.d.(4)]

- Yes  
 No

Q56 Enter the number of site inspections conducted for sites an acre or greater between January 1, 2015 and December 31, 2015:

20

Q57 Enter the frequency at which site inspections are conducted (e.g. daily, weekly, monthly): [Part III.D.4.d.(2)]

Approximately twice monthly for permitted sites.

Q58 Enter the number of trained inspectors that were available for construction site inspections between January 1, 2015 and December 31, 2015:

3

Q59 Provide the contact information for the inspector(s) and/or organization that conducts construction stormwater inspections for your MS4. List your primary construction stormwater contact first if you have multiple inspectors.

**(1) Inspector name**

John Loomis

Organization

South Washington Watershed District

Phone (Office)

6513731531

Phone (Work Cell)

Email

jloomis@ci.woodbury.mn.us

Preferred contact method

email

**(2) Inspector name**

Matt Moore

Organization

South Washington Watershed District

Phone (Office)

6517143714

Phone (Work Cell)

Email

mmoore@ci.woodbury.mn.us

Preferred contact method	email
<b>(3) Inspector name</b>	Andy Schilling
Organization	South Washington Watershed District
Phone (Office)	6517143717
Phone (Work Cell)	
Email	aschilling@ci.woodbury.mn.us
Preferred contact method	email

Q60 What training did inspectors receive? Check all that apply.

- University of Minnesota Erosion and Stormwater Management Certification Program
- Qualified Compliance Inspector of Stormwater (QCIS)
- Minnesota Laborers Training Center Stormwater Pollution Prevention Plan Installer or Supervisor
- Minnesota Utility Contractors Association Erosion Control Training
- Certified Professional in Erosion and Sediment Control (CPESC)
- Certified Professional in Stormwater Quality (CPSWQ)
- Certified Erosion, Sediment and Storm Water Inspector (CESSWI)
- Other

Q61 Between January 1, 2015 and December 31, 2015, did you modify your BMPs, measurable goals, or future plans for your construction site stormwater runoff control program? [Part IV.B.]

- Yes
- No

## MCM 5: Post-Construction Stormwater Management

The following questions refer to Part III.D.5. of the Permit.

Q62 As of December 31, 2015, have you enacted a regulatory mechanism to incorporate all requirements as specified in Part III.D.5.a. of the Permit?

- Yes
- No

- Q63 What approach are you using to meet the performance standard for Volume, Total Suspended Solids (TSS), and Total Phosphorus (TP) as required by the Permit? [Part III.D.5.a.(2)]  
Check all that apply.

Refer to the link <http://www.pca.state.mn.us/index.php/view-document.html?gid=17815> for guidance on stormwater management approaches.

- Retain a runoff volume equal to one inch times the area of the proposed increase of impervious surfaces on-site
- Retain the post-construction runoff volume on site for the 95th percentile storm
- Match the pre-development runoff conditions
- Adopt the Minimal Impact Design Standards (MIDS)
- An approach has not been selected
- Other method (Must be technically defensible--e.g. based on modeling, research and acceptable engineering practices)

Other, describe:

TP loading rates are established based on lake loading necessary to meet water quality standards. Where TP loads are not specified the limit is net reduction.

- Q64 Do you have written Enforcement Response Procedures (ERPs) to compel compliance with your post-construction stormwater management regulatory mechanism(s)? [Part III.B.]
- Yes
  - No
- Q65 Between January 1, 2015 and December 31, 2015, did you modify your BMPs, measurable goals, or future plans for your post-construction stormwater management program? [Part IV.B.]
- Yes
  - No

## MCM 6: Pollution Prevention/Good Housekeeping for Municipal Operations

The following questions refer to Part III.D.6. of the Permit.

- Q66 Enter the total number of structural stormwater BMPs, outfalls (excluding underground outfalls), and ponds within your MS4 (exclude privately owned).

Structural  
stormwater BMPs

0

Outfalls	1
Ponds	4

Q67 Enter the number of structural stormwater BMPs, outfalls (excluding underground outfalls), and ponds that were inspected from January 1, 2015 to December 31, 2015 within your MS4 (exclude privately owned). [Part III.D.6.e.]

Structural stormwater BMPs	0
Outfalls	1
Ponds	4

Q68 Have you developed an alternative inspection frequency for any structural stormwater BMPs, as allowed in Part III.D.6.e.(1) of the Permit?

- Yes  
 No

Q69 Based on inspection findings, did you conduct any maintenance on any structural stormwater BMPs? [Part III.D.6.e.(1)]

- Yes  
 No

Q70 Briefly describe the maintenance that was conducted:

Repaired erosion on slope of pond caused by inflow from Cottage Grove MS4 system.

Q71 Do you own or operate any stockpiles, and/or storage and material handling areas? [Part III.D.6.e.(3)]

- Yes  
 No

Q75 Between January 1, 2015 and December 31, 2015, did you modify your BMPs, measurable goals, or future plans for your pollution prevention/good housekeeping for municipal operations program? [Part IV.B.]

- Yes  
 No

## Partnerships

Q84 Did you rely on any other regulated MS4s to satisfy one or more Permit requirements?

- Yes  
 No

Q85 Describe the agreements you have with other regulated MS4s and which Permit requirements the other regulated MS4s help satisfy: [Part IV.B.6.]

SWWD is a founding member of EMWREP upon which it relies to satisfy some requirements under MCMs 1, 3, and 6. The purpose of the program is to provide education about impacts of non-point source pollution on local resources and to engage people and communities to protect and improve water quality. Additional information can be found at [www.mnwcd.org/emwrep/](http://www.mnwcd.org/emwrep/). Consistent with MN Rule 8410, each municipality in the District is required to maintain a local water management plan and local controls (i.e. ordinances) that are in conformance with SWWD's watershed management plan and rules. SWWD relies on this legal partnership to satisfy some requirements of MCMs 4 and 5. All stormwater entering SWWD's MS4 originates from and is delivered by municipal MS4s.

## Additional Information

If you would like to provide any additional files to accompany your annual report, use the space below to upload those files. For each space, you may attach one file. You may provide additional explanation and/or information in an email with the subject *YourMS4NameHere\_2015AR* to [ms4permitprogram.pca@state.mn.us](mailto:ms4permitprogram.pca@state.mn.us).

Q86 Click the "up arrow" icon below to upload a file. When it has uploaded successfully, a unique ID will appear in the box. Only files less than 10 MB in size will upload.



Q87 Click the "up arrow" icon below to upload a file. When it has uploaded successfully, a unique ID will appear in the box. Only files less than 10 MB in size will upload.





- Q88 Click the "up arrow" icon below to upload a file. When it has uploaded successfully, a unique ID will appear in the box. Only files less than 10 MB in size will upload.



- Q89 Optional, describe the file(s) uploaded:

## Owner or Operator Certification

The person with overall administrative responsibility for SWPPP implementation and Permit compliance must certify this MS4 Annual Report. This person must be duly authorized and should be either a principal executive (i.e., Director of Public Works, City Administrator) or ranking elected official (i.e., Mayor, Township Supervisor).

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 (Minn. R. 7001.0070). I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment (Minn. R. 7001.0540).

Yes

By typing my name in the following box, I certify the above statements to be true and correct, to the best of my knowledge, and that information can be used for the purpose of processing my MS4 Annual Report.

Name:

Title:

Date:  
(mm/dd/yyyy)

**When you are ready to submit, you must click the 'Submit' button at the bottom of this page.**

Provide the email(s) of the individual(s) you would like to receive the MS4 Annual Report for 2015 submittal confirmation email from the MPCA. After you click the Submit button below, please allow up to three business days to receive this email.

Email  
(1)

Email  
(2)

Email  
(3)

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