

MS4 Annual Report for 2017

Reporting period: January 1, 2017 to December 31, 2017

Due: June 30, 2018

Instructions: Complete this annual report to provide a summary of your activities under the 2013 MS4 Permit (Permit) between January 1, 2017 and December 31, 2017. MPCA staff may also contact you for additional information.

Questions: Contact Cole Landgraf (cole.landgraf@state.mn.us, 651-757-2880) or Megan Handt (megan.handt@state.mn.us, 651-757-2843)

MS4 General Contact Information

Full Name:	John Loomis
Title:	Water Resources Program Manager
Mailing Address:	2302 Tower Drive
City:	Woodbury
State:	MN
Zip Code:	55125
Phone:	6517143714
Email:	john.loomis@woodburymn.gov

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

Full Name:		
Title:		
Organization:		
Organization: Mailing Address:		
City:		
State:		
Zip Code:		
Zip Code: Phone:		
Email:		



MCM	1: Publi	ic Educa	ation and Outreach						
The follow	ring question	s refer to Pa	art 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)] No								
			22, what is your stormwater-related issue(s)? Check all that apply. Total Maximum Daily Loads (TMDLs) Local Dusinesses Residential best management practices (BMPs) Pet waste Yard waste Deicing materials Household chemicals Construction activities Post-construction activities Other						
Q4	Have you d Yes	listributed e	educational materials or equivalent outreach to the public focused on illicit discharge recognition and reporting? [Part III.D.1.a.(2)]						
Q5	Do you hav Yes	re an implen	mentation plan as required by the Permit? [Part III.D.1.b.]						

- How did you distribute educational materials or equivalent outreach? [Part III.D.1.a.] Check all that apply in the table below.
- Q7 For the items checked in **Q6** below, who is the intended audience? *Check all that apply in the table below.*
- Q8 For the items checked in Q6 below, enter the total circulation/audience in the table below (if unknown, use best estimate).

Q6		Q7 Intended audience? Check all that apply:					Q8	
	ou distribute educational							Total
	or equivalent outreach?		Local					circulation/audience: (if
Check all t	hat apply:	Residents	businesses	Developers	Students	Employees	Other	unknown, best est.)
	Brochure							
Х	Newsletter	Х	Х	Х				250000
	Utility bill insert							
	Newspaper ad							
	Radio ad							
	Television ad							
Х	Cable access channel	X						15000
X	Stormwater-related event	Х	X					500
Х	School project or presentation				Х			1000
Х	Website	Х	Х	X	Х			12000
Х	Other (1)							
	Describe: weekly articles for local newspapers and blog - East Metro Water	х	x	х	х			12000
	Other (2) Describe:							
	Other (3) Describe:							

For Q9 and Q10 below, 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, 2017 to December 31, 2017. [Part III.D.1.c.(4)]

29	Date of Activity	_ Q10	Description of Activity
			Details available at
			https://static1.squarespace.com/static/5201a163e4b01f15d7f763c6/t/5a95893a652dea82395b79ce/1519749438263/2017+annual+re
	1/1/2017		port.pdf
		ļ	

Q11 Between January 1, 2017 and December 31, 2017, did you modify your BMPs, measurable goals, or future plans for your public education and outreach program? [Part IV.B.] If 'Yes,' describe those modifications:

Yes

SWWD participates in the East Metro Water Resources Education Program (EMWREP). EMWREP partners meet annually to establish the workplan for the following year. More information available at www.mnwcd.org/emwrep.

MINNESOTA POLLUTION CONTROL AGENCY

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, 2017 and December 31, 2017? [Part III.D.2.a.(1)]

Yes

	Q13	If 'Yes' in	Q12, what was the opportunity that you provided? Check all that apply.
			Public meeting Public event Other
		Q14	If 'Public meeting' in Q13, did you hold a stand-alone meeting or combine it with another event? Combined
			Enter the date of the public meeting: Enter the date of the public meeting: Enter the number of citizens that attended and
		Q15	were informed about your SWPPP: 1
		Q15	If 'Public Event' in Q13, Describe:
		Q15	Enter the date of the public event: Enter the number of citizens that attended and
			were informed about your SWPPP: 0
		Q16	If 'Other' in Q13, Describe:
			Enter the date of the 'other' event: Enter the number of citizens that attended and
			were informed about your SWPPP: 0
Q17	Between J No		017 and December 31, 2017, did you receive any input regarding your SWPPP?
			ter the total number of individuals or ons that provided comments on your
	Q18	If 'Yes' in	Q17, did you modify your SWPPP as a result of written input received? [Part III.D.2.b.(2)]
			If 'Yes ,' describe those modifications:
Q19	Between J	anuary 1, 2	017 and December 31, 2017, did you modify your BMPs, measurable goals, or future plans for your public education and outreach program? [Part IV.B.] If 'Yes,' describe those modifications:
	No]	
	č	ONTI	ESOTA POLLUTION ROL AGENCY
MCM	3· Illicit	Disch:	arge Detection and Elimination
			Part III.D.3. of the Permit.
Q20	Do you ha	ve a regula	story mechanism which prohibits non-stormwater discharges to your MS4?
Q21		entify any il	llicit discharges between January 1, 2017 and December 31, 2017? [Part III.D.3.h.(4)]
	Q22	If 'Yes' in	Q21, enter the number of illicit discharges detected:
	Q23	If 'Yes' in	Q21, how did you discover these illicit discharges? Check all that apply.
			Public complaint Staff
		Q24	If 'Public complaint' in Q23 , enter the number discovered by the public:
		Q25	If 'Staff' in Q23 , enter the number discovered by staff:

	Q26	If 'Yes' in C	221, did any of the discovered illicit discharges result in an enforcement action (this includes verbal warnings)?
		Q27	If 'Yes' in Q26, what type of enforcement action(s) was taken and how many of each action were issued between January 1, 2017 and December 31, 2017?
			Check all that apply. Number issued:
			Verbal warning Notice of violation
			Fine Criminal action
			Civil penalty Other
			If 'Other,' describe:
		Q28	If 'Yes' in Q26, did the enforcement action(s) taken sufficiently address the illicit discharge(s)?
			Q29 If 'No' in Q28, why was the enforcement not sufficient to address the illicit discharge(s)?
Q30	Do you ha	ve written F	nforcement Response Procedures (ERPs) to compel compliance with your illicit discharge regulatory mechanism(s)? [Part III.B.]
QSU	Yes		indicentent response i roccoures (em s) to compete compinance with your mich discharge regulatory meditalism(s). It at clinibility
Q31			117 and December 31, 2017, did you train all field staff in illicit discharge recognition (including conditions which could cause illicit discharges) charges for further investigations? [Part III.D.3.e.]
	Yes]	unaiges for furtiler investigations: [Fart in.D.S.e.]
	Q32		31 , how did you train your field staff? Check all that apply. Email
			Powerpoint
			Presentation Video
		Х	Field Training Other
		If 'Other ,' describe:	
The follow	ving question	ns refer to P	art III.C.1. of the Permit.
Q33	Did you up No	date your s	torm sewer system map between January 1, 2017 and December 31, 2017? [Part III.C.1.]
Q34	Does your	storm sewe	r 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]	
Q35	Does your Yes	storm sewe	r map include outfalls, including a unique identification (ID) number and an associated geographic coordinate? [Part III.C.1.b.]
Q36	Does your	storm sewe	r map include all structural stormwater BMPs that are part of your MS4? [Part III.C.1.c.]
	Yes]	
Q37	Does your Yes	storm sewe	r map include all receiving waters? [Part III.C.1.d.]
Q38		rmat is vour	storm sewer map available?
~		SIS	
	describe:		
030	Deb		M7 and December 24, 2017, did you madify your DMDs recoverable and a sefetive place from the billion of the second
Q39	Between J [Part IV.B.]		17 and December 31, 2017, did you modify your BMPs, measurable goals, or future plans for your illicit discharge detection and elimination (IDDE) program?
	No]	If 'Yes,' describe those modifications:

MINNESOTA POLLUTION CONTROL AGENCY

MCM 4: Construction Site Stormwater Runoff Control

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

Q40 Do you have 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

Q41	Have you developed written procedures for s Yes	site plan reviews as required by the Permit? [Part III.D.4.b.]
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Q42	Have you documented each site plan review a	as required by the Permitt [Part III.D.4.1.]
Q43	Enter the number of site plan reviews conduc	cted for sites an acre or greater between January 1, 2017 and December 31, 2017:
	3	
Q44	What types of enforcement actions do you had each used from January 1, 2017 to December	ave available to compel compliance with your regulatory mechanism? Check all that apply and enter the number of r 31, 2017. Number issued:
	X Verbal warning X Notice of violation	
	Administrative order	0
	X Stop-work order Fine	0 0
	Forfeit of security bond money Withholding of certificate of occu	pancy 0
	Criminal action	0
	Civil penalty Other	0 0
	If 'Other,' describe:	
Q45	Do you have written Enforcement Response F [Part III.B.] Yes	Procedures (ERPs) to compel compliance with your construction site stormwater runoff control regulatory mechanism(s)?
Q46	Enter the number of active construction sites	an acre or greater that were in your jurisdiction between January 1, 2017 and December 31, 2017:
Q47	Do you have written procedures for identifying	ng priority sites for inspections? [Part III.D.4.d.(1)]
ζ.,	No No	g provid sizes on inspectations. It at times markety
	Q48 If 'Yes' in Q47, how are sites prio	ritized for inspections? Check all that apply.
	Site topography Soil characteristics	
	Types of receiving wat	ter(s)
	Stage of construction Compliance history	
	Weather conditions Citizen complaints	
	Project size	
	Other If 'Other,'	
	describe:	
Q49		ns to document site inspections when determining compliance? [Part III.D.4.d.(4)]
	Yes	
Q50	Enter the number of site inspections conduct	ed for sites an acre or greater between January 1, 2017 and December 31, 2017:
Q51	Enter the frequency at which site inspections	are conducted (e.g. daily, weekly, monthly): [Part III.D.4.d.(2)]
Q31	Enter the requerty at which site hispections	are considered (e.g. dain), weekly, monanty: [rate in to -t.a.(2)]
		bi-weekly bi-weekly
Q52	Enter the number of trained inspectors that v	were available for construction site inspections between January 1, 2017 and December 31, 2017:
Q53	Provide the contact information for the inspe construction stormwater contact first if you h	ector(s) and/or organization that conducts construction stormwater inspections for your MS4. List your primary nave multiple inspectors.
	1 Inspector Name	Matt Moore
	Organization Phone (Office)	SWWD 6517143729
	Phone (Work Cell) Email	matt.moore@woodburymn.gov
	Preferred contact method	email
		John Loomis
	2 Inspector Name	
	Organization	SWWD 6517143714
	Organization Phone (Office) Phone (Work Cell)	6517143714
	Organization Phone (Office)	
	Organization Phone (Office) Phone (Work Cell) Email Preferred contact method	6517143714 john.loomis@woodburymn.gov email
	Organization Phone (Office) Phone (Work Cell) Email Preferred contact method 3 Inspector Name Organization	6517143714 john.loomis@woodburymn.gov email Andy Schilling SWWD
	Organization Phone (Office) Phone (Work Cell) Email Preferred contact method 3 Inspector Name	6517143714 john.loomis@woodburymn.gov email Andy Schilling
	Organization Phone (Office) Phone (Work Cell) Email Preferred contact method 3 Inspector Name Organization Phone (Office)	6517143714 john.loomis@woodburymn.gov email Andy Schilling SWWD

Q54	What training did inspectors receive? Check all that apply. X 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 Assocation Erosion Control Training X Certified Professional in Erosion and Sediment Control (CPESC) Certified Professional in Stormwater Quality (CPSWQ) Certified Erosion Sediment and Storm Water Inspector (CESSWI) Other If 'Other,' describe:
Q55	Between January 1, 2017 and December 31, 2017, did you modify your BMPs, measurable goals, or future plans for your construction site stormwater runoff control program? [Part IV.B.] If 'Yes,' describe those modifications:
m	MINNESOTA POLLUTION CONTROL AGENCY
MCM	5: Post-Construction Stormwater Management
The follow	ving questions refer to Part III.D.5. of the Permit.
Q56	Do you have a regulatory mechanism which meets all requirements as specified in Part III.D.5.a of the Permit? Yes
Q57	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 surface on-site Retain the post-construction runoff volume on site for the 95th percentile storm Match the predevelopment runoff conditions Adopt the Minimal Impact Design Standards (MIDS) An approach has not been selected X Other method (Must be technically defensible - e.g., based on modeling, research and acceptable engineering practices) If 'Other,' describe: We generally require developers to match pre-development conditions for rate (atlas 14), annual runoff volume, and annual TP/TSS loads. Exceptions are resource specific and more stringent on total phosphorus.
Q58	Do you have written Enforcement Response Procedures (ERPs) to compel compliance with your post-construction stormwater management regulatory mechanism(s)? [Part III.B.] Yes
Q59	Between January 1, 2017 and December 31, 2017, did you modify your BMPs, measurable goals, or future plans for your post-construction site stormwater management program? [Part IV.B.]
	No If 'Yes,' describe those modifications:
m	MINNESOTA POLLUTION CONTROL AGENCY
MCM	6: Pollution Prevention/Good Housekeeping for Municipal Operations
The follow	ving questions refer to Part III.D.6. of the Permit.
Q60	Enter the total number of structural stormwater BMPs, outfalls (excluding underground outfalls), and ponds within your MS4 (exclude privately owned). Structural stormwater BMPs Outfalls Ponds 4
Q61	Enter the number of structural stormwater BMPs, outfalls (excluding underground outfalls), and ponds that were inspected from January 1, 2017 to December 31, 2017 within your MS4 (exclude privately owned). [Part III.D.6.e.] Structural stormwater BMPs Outfalls Ponds 4
Q62	Have you developed an alternative inspection frequency for any structural stormwater BMPs, as allowed in Part III.D.6.e.(1) of the Permit?

Q63	Pacad on increation fi	ndings, did you conduct any maintenance on any structural stormwater BMPs? [Part III.D.6.e.(1)]						
QUS	No No	numgs, and you conduct any maintenance on any structural stormwater Divirs: [Fart III.D.O.E.[1]]						
	INU							
	oca ifilyaa liha	infly, deposits the avainteenance that was exactly start.						
	Q64 If 'Yes,' br	iefly describe the maintenance that was conducted:						
Q65	Do you own or operat	e any stockpiles, and/or storage and material handling areas? [Part III.D.6.e.(3)]						
	No							
	Q66 If 'Yes' in G	Q65, did you inspect all stockpiles and storage and material handling areas quarterly? [Part III.D.6.e.(3)]						
	Q67 If 'Yes' in G	266, based on inspection findings, did you conduct maintenance at any of the stockpiles and/or storage and material handling areas?						
	11 723 1114	1						
	Q68	If 'Yes' in Q67, briefly describe the maintenance that was conducted:						
Q69	Between January 1, 20	017 and December 31, 2017, did you modify your BMPs, measurable goals, or future plans for your pollution prevention/good						
		nicipal operations program? [Part IV.B.]						
		If 'Yes,' describe those modifications:						
	No							
	MINNE	SOTA POLLUTION ROL AGENCY						
	CONTR	ROLAGENCY						
-		The state of the s						
Disch	arges to Impair	red Waters with a USEPA-Approved TMDL that Includes an applicable WLA						
If require	ed you must complete th	e TMDL Annual Report Form, available at: http://stormwater.pca.state.mn.us/index.php/Upload_page_with_TMDL_forms.						
		uual Report Form to this Annual Report as instructed below. [Part III.E]						
Accuenty	our completed TWDE Am	nda neportro in to this Alman neport as instructed below. If the time,						
071	TMDL form not required for South Machineton MD MSd							
Q71	Successfully uploaded	file: TMDL form not required for South Washington WD MS4.						
Q71	Successfully uploaded	file: TMDL form not required for South Washington WD MS4.						
Q71								
Q71								
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Q71		file: TMDL form not required for South Washington WD MS4. ESOTA POLLUTION ROL AGENCY						
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Alum	or Ferric Chlor	ide Phosphorus Treatment Systems Part III.F.3.a. of the Permit. Provide the information below as it pertains to your alum or ferric chloride phosphorus treatment system.						
Alum	or Ferric Chlor	ESOTA POLLUTION ROL AGENCY ide Phosphorus Treatment Systems						
Alum The follo	or Ferric Chlor wing questions refer to F	ide Phosphorus Treatment Systems Fart III.F.3.a. of the Permit. Provide the information below as it pertains to your alum or ferric chloride phosphorus treatment system. For Ferric Chloride Phosphorus Treatment Systems' section not required for South Washington WD MS4.						
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Q77	Any performance issues and corrective action(s), including the date(s) when corrective action(s) were taken, between January 1, 2017 and December 31, 2017:	
	MINNESOTA POLLUTION CONTROL AGENCY	

Partnerships

Q78 Did you rely on any other regulated MS4s to satisfy one or more Permit requirements?

Yes

Q79

If 'Yes' in Q78, 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 member of EMWREP upon which it relies to satisfy some requirements of MCMs 1, 3, and 6. Information at www.mnwcd.org/emwrep/. Consistent with MN Rule 8410, each Municipality in the District must maintain a local water management plan and local controls 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 owned and operated system originates and is delivered by municipal MS4s. Because all inflows into SWWD's system come from Municipal MS4s we expect them to meet all permit requirements. SWWD does assist those municipalities with ESC inspections. Violations identified during inspections are followed up on by City staff.



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_2017AR to ms4permitprogram.pca@state.mn.us.

Qou	Successfully uploaded file.	No file attached.	
Q81	Successfully uploaded file:	No file attached.	
Q82	Successfully uploaded file:	No file attached.	
Q83	Optional, describe the file(s) uplo	paded:	



Optional Question

The MPCA is attempting to identify potential sources of water quality data. Answering this question will help the MPCA and interested stakeholders obtain a more comprehensive understanding of sources of data that may be shared and ultimately aid in understanding the extent to which stormwater management practices result in water quality improvements.

Q84 Are you

Are you collecting water quality data (e.g., from surface waters, outfalls, best management practices, etc.) that is not associated with a waste water treatment plant?

Yes



Owner of 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).

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:
 Matthew Moore

 Title:
 Administrator

 Date:
 6/26/2018