

Phase II Municipal Separate Storm Sewer System (MS4)
Annual Report Form

Cover Page

Part 1. General Information:

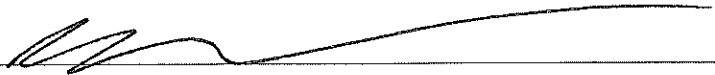
1. Permittee Name: City of Auburn
2. Mailing Address: 1 Auburn Way
Auburn, GA 30011
3. Contact Person: Joe Moravec Stormwater Coordinator.
4. E-Mail Address: pwdirector@cityofauburn-ga.org
5. Telephone Number: 762-338-9103 x331
6. Reporting Year (January 1–December 31): 2024

Part 2. Status of Stormwater Management Program:

1. Has your stormwater management program to comply with the 2022 NPDES Permit been approved? Yes ☒ No ☐
2. If yes, provide the approval date: January 31, 2024
3. If no, provide the date of the last submittal: Click here to enter text.

Part 3. Certification Statement:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature: 

Printed Name: Honorable Rick Roquemore

Title: Mayor Date: 1/30/2024

Public Education and Outreach
Minimum Control Measure
(Table 4.2.1)

1. **BMP # 1**

A. Do you have a website? Yes ☒ No ☐

- i. If yes, you are required to post the most updated SWMP to the website. Has the most updated SWMP been posted? Yes ☒ No ☐
- ii. If not, explain why not: Click here to enter text.

2. **BMP Title:** Educational Material Distribution

3. **Provide the measurable goal from SWMP:** Annually inventory the kiosk to determine the number of brochures distributed during the reporting period. Restock the kiosk to ensure a minimum of 100 brochures are available at the beginning of each reporting period.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The city placed four different educational brochures at two locations, City Hall and the Library. The city evaluated the number of brochures each quarter and restocked as needed. In addition, 6 new businesses began operation and were given a brochure titled "After the Storm". Copies of the brochures and the log tracking the brochure distribution are attached.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 2**

2. **BMP Title:** Newsletter

3. **Provide the measurable goal from SWMP:** Publish one newsletter containing Stormwater related material once during the reporting period.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City published newsletters in October, November and April 2024 containing information related to stormwater topics. The City mailed out 3,917 copies of the newsletter to water customers located within the City. Copies of the newsletter are attached.

B. Date(s) for any BMP activities completed during this reporting period: October, November and April.

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

Note: You must complete a BMP annual report page for any additional Public Education BMPs contained in your SWMP. Permittees with a population greater than 10,000 at the time of this permit issuance must complete four (4) BMPs.

Public Involvement/ Participation
Minimum Control Measure
(Table 4.2.2)

1. **BMP # 1**
2. **BMP Title:** Earth Day Cleanup Event
3. **Provide the measurable goal from SWMP:** Hold a cleanup event annually.
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐
 - B. If not, please explain why: N/A
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The City held an Earth Day Clean Up Event on April 19-20, 2024. Residents were allowed to dispose of batteries, used motor oil, scrap metal, plastics, wood, appliances, and electronics. There were 194 participants in the event. The city collected 174 tires, 772 pounds of batteries, 658 gallons of used motor oil, and 14,152 pounds of metal and electronics. In addition, 14.74 tons of other items. Copies of advertisements, a log, sign in sheets, photos and invoices for the disposal of materials are attached.
 - B. Date(s) for any BMP activities completed during this reporting period: April 19th and 20th
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes ☒ No ☐
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 2**
2. **BMP Title:** Rivers Alive Cleanup Event
3. **Provide the measurable goal from SWMP:** Hold a cleanup event annually.
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐
 - B. If not, please explain why: N/A
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The City held a Rivers Alive Cleanup event on October 12th, 2024. Four volunteers cleaned up the area of Shackelford Park. Sign – in sheets, a tally form, and photos of the event are attached.
 - B. Date(s) for any BMP activities completed during this reporting period: October 12th 2024
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes ☒ No ☐
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒
 - D. If yes, please explain: N/A

Note: You must complete a BMP annual report page for any additional Public Involvement/Participation BMPs contained in your SWMP. Permittees with a population greater than 10,000 at the time of this permit issuance must complete four (4) BMPs.

Illicit Discharge Detection and Elimination
Minimum Control Measure
(Table 4.2.3)

1. **BMP # 1 (Table 4.2.3, BMP #1)**
2. **BMP Title: Legal Authority**
3. **Provide the measurable goal from the Permit and/or approved SWMP: Annually evaluate the existing ordinance and if necessary, revise the ordinance.**
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Ordinance Status**
 - A. Did you adopt or revise the ordinance during the reporting period? Yes ☒ No ☐
 - B. If yes, provide the date of adoption or revision: N/A
 - C. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes ☒ No ☐
 - D. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: N/A
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The City re-adopted the ordinance from 2005. The signed ordinances are attached.
 - B. Date(s) for any BMP activities completed during this reporting period: January 2024
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes ☒ No ☐
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 2 (Table 4.2.3, BMP #2)**

2. **BMP Title: Outfall Map and Inventory**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Annually update the inventory and map showing the location of all outfalls from the MS4 and the names and locations of all waters of the State that receive discharges from those outfalls.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Outfall Inventory and Map**

A. Provide the number of outfalls added or deleted from the inventory during the reporting period:

Number added: 4

Deleted : 15

B. Provide the total number of outfalls on the inventory during the reporting period: 41

C. Is the inventory attached? Yes ☒ No ☐

D. Is the map attached? Yes ☒ No ☐

E. Is the outfall mapping completed? Yes ☒ No ☐

E. If not, explain the reason why, and provide the status of the mapping: N/A

F. If not, provide the projected completion date: N/A

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: During the reporting period, the outfall inventory and map were reviewed for accuracy. A determination was made that four outfalls were added. The inventory and map are attached.

B. Date(s) for any BMP activities completed during this reporting period: December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 3 (Table 4.2.3, BMP #3)**

2. **BMP Title: IDDE Plan**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** The City will dry weather screen a minimum of 20% of the outfalls each reporting period, ensuring that 100% of the total outfalls are screened within the 5- year permit term. The city will investigate 100% of suspected illicit discharges and ensure that 100% of all identified discharges are eliminated.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **IDDE Plan Status**

A. Provide the status of the outfall screening from 2023-2027:

| Year | Total Number of Outfalls | Number of Outfalls Screened | % Screened |
|-------|--------------------------|-----------------------------|------------|
| 2023 | 51 | 10 | 19.6 |
| 2024 | 41 | 19 | 46.3 |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

B. Did you conduct any stream walks as part of your IDDE program?
Yes ☐ No ☒

1. If yes, provide the total number of stream miles containing or downstream of an MS4 outfall within your permitted area: N/A

2. Provide the number of stream miles walked during the reporting period: N/A

3. What percentage of the total number of stream miles were walked during the reporting period? N/A

C. Did you conduct stream walks for a reason other than IDDE? Yes ☐ No ☒

1. If yes, explain the reason: Click here to enter text.

2. Provide the number of stream miles walked during the reporting period:

D. Did you use an alternate method of inspecting for illicit discharges?

Yes ☐ No ☒

1. If yes, provide a documentation of the activity completed during the reporting period. Click here to enter text.

E. If applicable, did you attach documentation of any illicit discharge detection activities and information on any eliminated discharges or on any enforcement actions taken to eliminate illicit discharges? Yes ☐ No ☒

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: During the reporting period, the City Screened 19 outfalls that outfall to waters of the State. The screening checklist, along with photos of the outfalls, are included in the attachments.

B. Date(s) for any BMP activities completed during this reporting period: December

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 4 (Table 4.2.3, BMP #4)**

2. **BMP Title:** Education

3. **Provide the measurable goal from the Permit and/or approved SWMP:** Annually track the number of visitors to the website during each month.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City maintained a stormwater webpage containing stormwater related materials, including educational brochures, the SWMP, and copies of annual reports from previous reporting periods. A screenshot of the stormwater webpage and a printout of the analytics showing the number of visitors to the webpage are attached.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 5 (Table 4.2.3, BMP #5)**
2. **BMP Title:** Complaint Response
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Investigate 100% of complaints within 3 business days of receipt.
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Documentation**
 - A. Did you attach report (e.g. complaint date, type, status) of the BMP activities completed during the reporting period? Yes ☒ No ☐
 - B. If not, please explain why: N/A
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The City received numerous complaints related to illicit discharges and investigated the complaints in a timely manner. Details on the complaints, including the date received, steps taken by the city and resolution status are summarized on the attachment.
 - B. Date(s) for any BMP activities completed during this reporting period: January – December 2024
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes ☒ No ☐
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒
 - D. If yes, please explain: N/A

Note: You must complete a BMP annual report page for any additional Illicit Discharge Detection and Elimination BMPs contained in your SWMP.

Construction Site Storm Water Runoff Control
Minimum Control Measure
(Table 4.2.4)

1. **BMP # 1 (Table 4.2.4, BMP #1)**

2. **BMP Title: Legal Authority**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** Annually evaluate the existing ordinance and if necessary, revise the ordinance.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Local Issuing Authority Status**

A. Are you a Local Issuing Authority (LIA)? Yes ☒ No ☐ If no, skip to #5.

B. As an LIA, you are required to submit semi-annual reports to the Georgia Soil and Water Conservation Commission (GSWCC). Did you provide the required reports to GSWCC? Yes ☐ No ☒

C. Provide the dates that the semi-annual reports were submitted to the GSWCC: The city did not provide reports to GSWCC this year. This was overlooked and the city will ensure that the reports get submitted going forward.

D. Provide copies of the semi-annual GSWCC reports. Are the GSWCC reports attached?
Yes ☐ No ☒

5. **Ordinance Status**

A. Is the construction waste requirement addressed in either your E&S or litter ordinance?
Yes ☒ No ☐

B. If yes, which one? Other

C. Did you adopt or revise either the E&S ordinance or the ordinance containing the construction waste requirement during the reporting period?
Yes ☐ No ☒

D. If yes, which one? N/A

E. If you are a Local Issuing Authority, you must revise your E&S Ordinance to comply with the latest revisions to the E&S Act (2015). The ordinance revision was to be completed by December 31, 2016. Have you completed the ordinance revisions?

Yes ☒ No ☐

F. If yes, provide the date of adoption or revision: April 20, 2017

G. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes ☒ No ☐

H. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: N/A

6. Implementation Schedule

A. BMP activities completed during this reporting period: The requirement to control waste at a construction site is addressed in the Construction Site Management ordinance. The city evaluated both the Soil Erosion, Sedimentation and Pollution Control ordinances and the Construction Site Management ordinance and determined that no revisions were needed. Copies of the ordinances and the GSWCC semi-annual reports are attached.

B. Date(s) for any BMP activities completed during this reporting period: December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. BMP Effectiveness

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 2 (Table 4.2.4, BMP #2)**

2. **BMP Title:** Site Plan Review Procedures

3. **Provide the measurable goal from the Permit and/or approved SWMP:** Ensure that 100% of site plans for projects disturbing 1.0 or more acres of land are reviewed and approved prior to issuance of a LDA

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Site Plan Review Status**

A. Are you a Local Issuing Authority? Yes ☒ No ☐

1. If yes, provide the following information for the reporting period:

Number of plans reviewed: 8

Number of plans approved: 4

Number of plans denied: 1

2. A list of the site plans received during the reporting period must be provided. Is the information attached?

Yes ☒ No ☐

3. Provide the total number of LDA permits issued during the reporting period: 2

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City contracts out plan reviews to a consultant, Engineering Management. The City received plans for 8 construction projects. One of those plans was reviewed, denied, and resubmitted by the developer. A list of plans and the status of the review is attached.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 3 (Table 4.2.4, BMP #3)**

2. **BMP Title: Inspection Program**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Conduct at least one inspection at each active construction site during the reporting period.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Documentation**

A. Provide a list or table of active construction sites and the number and dates of inspections conducted on each of the sites during the reporting period. Did you attach documentation of the BMP activities completed during the reporting period? ☒ Yes ☐ No

B. If not, please explain why: N/A

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City had nine active construction sites during the reporting period. A spreadsheet showing the name of the construction site and the dates inspected is attached.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 4 (Table 4.2.4, BMP #4)**
2. **BMP Title: Enforcement Procedures**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will take enforcement for 100% of E&S violations identified during construction site inspections.**
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Documentation**
 - A. Provide documentation of any enforcement actions taken during the reporting period, including the number, type, status, and amount of any assessed penalties. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐
 - B. If not, please explain why: N/A
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The City issued a Stop Work Order to one site during the reporting period for dirt entering the waters of the State. A copy of the SWO and photographs of the site are attached.
 - B. Date(s) for any BMP activities completed during this reporting period: January – December 2024
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes ☒ No ☐
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒
 - D. If yes, please explain: N/A

1. **BMP # 5 (Table 4.2.4, BMP #5)**
2. **BMP Title:** Complaint Response
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Investigate 100% of complaints within 3 business days of receipt.
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Documentation**
 - A. Did you attach information of the BMP activities completed during the reporting period? Yes ☒ No ☐
 - B. If not, please explain why: N/A
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The City included all stormwater complaints from the public on one summary, including erosion issues, flooding and ponding. The list of complaints include the nature of the complaint, and the steps taken by the City to resolve the issues is attached.
 - B. Date(s) for any BMP activities completed during this reporting period: January – December 2024
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes ☒ No ☐
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒
 - D. If yes, please explain: N/A

1. **BMP # 6 (Table 4.2.4, BMP #6)**

2. **BMP Title: Certification**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** Ensure that 100% of all staff involved in construction activities subject to the Construction general Permits are certified.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Documentation**

A. Provide documentation of current certifications held by MS4 staff. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: During the reporting period, the City continued to require GSWCC certifications for its E&S inspectors, site plan reviewers, and construction site operators. Copies of the GSWCC certification cards are included in the attachments.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

Note: You must complete a BMP annual report page for any additional Construction Site Management BMPs contained in your SWMP.

Post- Construction Storm Water Management
in New Development and Redevelopment
Minimum Control Measure
(Table 4.2.5)

1. **BMP # 1 (Table 4.2.5, BMP #1)**

2. **BMP Title: Legal Authority**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Annually evaluate the Post-Construction Stormwater Management for New Development and Redevelopment ordinance and if necessary, revise the ordinance.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Ordinance Status**

A. Did you adopt or revise the ordinance during the reporting period? Yes ☒ No ☐

B. If yes, provide the date of adoption or revision: November 4, 2021

C. Does the ordinance require development in accordance with the Georgia Stormwater Management Manual (GSMM), a local design manual, and/or the Coastal Stormwater Supplement? Yes ☒ No ☐

D. Does the ordinance adopt the performance standards in the latest edition of the GSMM? Yes ☒ No ☐

E. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes ☒ No ☐

F. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: N/A

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City maintains both a post-construction ordinance and a separate GI/LID ordinance. The ordinances were evaluated, and a determination was made that no revisions were needed. Copies of the ordinances are attached.

B. Date(s) for any BMP activities completed during this reporting period: December 2023

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 2 (Table 4.2.5, BMP #2)**

2. **BMP Title: Inventory**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Update the inventory as new structures are completed or existing structures are identified, with the update to occur at least annually.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Inventory Status**

A. Provide information on the number of structures added to the inventory during the reporting period:

1. Number of publicly-owned post-construction structures added: 1
2. Number of privately-owned post-construction structures added: 2
3. Number of publicly-owned structures owned by other entities added: 0

B. Provide information on the number of structures identified to date:

1. Total number of publicly-owned post-construction structures: 2
2. Total number of privately-owned post-construction structures: 13
3. Total number of publicly-owned by other entities post-construction structures: 0

C. New permittees: Provide the status of the inventory development: N/A

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: During the reporting period, the City reviewed the existing inventory, showing ownership, is included in the attachments.

B. Date(s) for any BMP activities completed during this reporting period: December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 3 (Table 4.2.5, BMP #3)**
2. **BMP Title: Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: Inspect at least 20% of the post – Construction structures on the inventory annually, with 100% of the structures inspected within the 5- year permit term.**
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Provide the status of inspections performed between 2022-2027:**

Publicly-Owned Post-Construction Structures

| Year | Total Number Post Construction Structures | Number Post Construction Structures Inspected | % Inspected |
|--------------|---|---|-------------|
| 2023 | 1 | 1 | 100 |
| 2024 | 15 | 8 | 53.3 % |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

Privately-Owned Post-Construction Structures

| Year | Total Number Post Construction Structures | Number Post Construction Structures Inspected | % Inspected |
|--------------|---|---|-------------|
| 2023 | 13 | 3 | 20 |
| 2024 | 13 | 4 | 39 |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

Publicly-Owned by Other Entities Post-Construction Structures

| Year | Total Number Post Construction Structures | Number Post Construction Structures Inspected | % Inspected |
|------|---|---|-------------|
| 2023 | | | |
| 2024 | | | |
| 2025 | | | |
| 2026 | | | |

| | | | |
|-------|--|--|--|
| 2027 | | | |
| Total | | | |

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City conducted inspections of 4 privately-owned detention ponds, noting any deficiencies. In addition, the two City-owned detention ponds were inspected. Copies of the completed inspection forms and a summary table of the inspections are attached.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 4 (Table 4.2.5, BMP #4)**

2. **BMP Title: Maintenance Program**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Maintain 100% of permittee-owned structures after inspections indicates needed maintenance. Require executed maintenance agreements for all newly constructed post-construction structures that are privately-owned or publicly- owned by other entities post-construction structures of any corrective action needed within 6 months of inspection.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period for the following:

1. Maintenance of permittee-owned structures, including a list of structures maintained, the type of maintenance performed, and documentation: Yes ☒ No ☐

2. Maintenance conducted by permittee on privately-owned structures or publicly-owned by other entities, including a list of structures maintained, the type of maintenance performed, and documentation: Yes ☐ No ☐ NA ☒

3. Summary list of maintenance agreements and documentation of any activities taken to ensure maintenance: Yes ☐ No ☒

4. If you address these in your SWMP, maintenance of privately-owned structures and other public entity-owned structures constructed prior to December 6, 2012, including a list of structures maintained, type of maintenance performed, and documentation: Yes ☐ No ☒

B. If not, please explain why: N/A

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City owns two ponds. The pond inspections on the morning of December 3rd and 4th, 2024, maintenance crews mowed and cut down excessive vegetation. Documentation of the inspection results and maintenance activities are attached. During the inspection of the privately-owned ponds, any deficiencies are noted. The inspection form is transmitted to the owner giving 30 days to correct the deficiencies. Documentation of the maintenance on the City pond and copies of private pond inspections forms with notice of the 30-day

corrective action period are attached. A summary list of the 6 private ponds with executed maintenance agreements is attached.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 5 (Table 4.2.5, BMP #5)**

2. **BMP Title: GI/LID Program**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Annually evaluate the GI/LID program.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Program Development**

A. Has the GI/LID Program development been completed? Yes ☒ No ☐

Note: For existing permittees, the deadline was February 15, 2020. For new permittees, the deadline is within 3 years of designation.

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: The GI/LID program was evaluated and a determination made that no revisions were needed. A copy of the GI/LID program is included in the attachments.

B. Date(s) for any BMP activities completed during this reporting period: December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 6 (Table 4.2.5, BMP #6)**

2. **BMP Title:** GI/LID Structure Inventory

3. **Provide the measurable goal from the Permit and/or approved SWMP:** Update the GI/LID structure inventory annually. Track the addition of the new water quality-related GI/LID structures through the plan review process and ensure the structures are added to the inventory.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Inventory Status**

A. Provide information on the number of structures inventoried during the reporting period:

1. Number of permittee-owned GI/LID structures added: 0
2. Number of publicly-owned GI/LID structures owned by other entities added: 0
3. Number of privately-owned non-residential GI/LID structures added: 0

B. Provide information on the number of structures identified to date:

1. Total number of permittee-owned GI/LID structures: 0
2. Total number of publicly-owned GI/LID structures owned by other entities: 0
3. Total number of privately-owned non-residential GI/LID structures: 0

C. New permittees: Provide the status of the inventory development: Click here to enter text.

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☐ No ☒

B. If not, please explain why: There are no GI/LID structures completed in the City at this time.

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: There are no Gi/LID structures to inspect at this time.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 7 (Table 4.2.5, BMP #7)**
2. **BMP Title: GI/LID Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Inspections will begin following the construction of any GI/LID structures. Inspect either one GI/LID structure annually or if the inventory includes more than five structures, inspect 5% of the total structures annually. Ensure that 100% of the GI/LID structures are inspected within the 5-year permit term.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A
4. **Provide the status of inspections performed between 2023-2027:**

Permittee-Owned GI/LID Structures

| Year | Total Number GI/LID Structures | Number GI/LID Structures Inspected | % Inspected |
|--------------|--------------------------------|------------------------------------|-------------|
| 2023 | 0 | 0 | 0 |
| 2024 | | | |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

Publicly-Owned By Other Entities GI/LID Structures

| Year | Total Number Post Construction Structures | Number Post Construction Structures Inspected | % Inspected |
|--------------|---|---|-------------|
| 2023 | 0 | 0 | 0 |
| 2024 | | | |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

Privately-Owned Non-residential GI/LID Structures

| Year | Total Number Post Construction Structures | Number Post Construction Structures Inspected | % Inspected |
|------|---|---|-------------|
| 2023 | 0 | 0 | 0 |
| 2024 | | | |
| 2025 | | | |

| | | | |
|--------------|--|--|--|
| 2026 | | | |
| 2027 | | | |
| Total | | | |

5. **Documentation**

- A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☐ No ☒
- B. If not, please explain why: There are no GI/Lid structures, so no inspections were performed.

6. **Implementation Schedule**

- A. BMP activities completed during this reporting period: A review of the structure inventory was made to ensure that no new GI/LID structures were constructed during the reporting period. A determination was made that no GI/LID structures exist within the City, so no inspections were required.
- B. Date(s) for any BMP activities completed during this reporting period: December 2024
- C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
- D. If not, please explain why: N/A

7. **BMP Effectiveness**

- A. Do you consider this BMP to be effective? Yes ☒ No ☐
- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒
- D. If yes, please explain: Click here to enter text.

1. **BMP # 8 (Table 4.2.5, BMP #8)**

2. **BMP Title: GI/LID Maintenance Program**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Conduct maintenance on 100% of the City-owned GI/LID structures where inspections noted needed maintenance. Annually update the summary list of executed maintenance agreements for publicly-owned by others entities and privately-owned non-residential GI/LID structures of needed maintenance through letters transmitted within 6 months of a completed inspection.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Provide information on maintenance performed on permittee-owned GI/LID structures.**

A. Provide the number of GI/LID structures maintained 0

B. Did you provide documentation of maintenance performed? Yes ☐ No ☐

5. **Provide information on maintenance for publicly-owned by other entities and privately-owned non-residential GI/LID structures**

A. Did you provide a summary list of maintenance agreements finalized after December 6, 2017? Yes ☐ No ☒

B. If you did not provide a summary list of maintenance agreements, explain the reason: There are no GI/LID structures, so there are no maintenance agreements.

C. Did you provide documentation of any activities taken to ensure maintenance? Yes ☐ No ☒

6. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☐ No ☒

B. If not, please explain why: No activities completed during the reporting period.

7. **Implementation Schedule**

A. BMP activities completed during this reporting period: No GI/LID structures exist within the City, so no activities were performed during the reporting period.

B. Date(s) for any BMP activities completed during this reporting period: N/A

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

8. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

GI/LID Ordinance Review (Section 4.2.5.3)

(Only complete this section if the permittee population is >10,000 according to Appendix B for existing permittees, or at the time of designation for new permittees)

1. You are required to continue to review and revise, where necessary, building codes, ordinances, and other regulations to ensure they do not prohibit or impede the use of GI/LID practices. Was an evaluation of the MS4's ordinances, codes, and regulations conducted during the reporting period? Yes ☐ No ☐

A. Existing permittees:

1. For the 2023 reporting period, the evaluation must be comprehensive:
 - i. Was the comprehensive evaluation performed? Yes ☐ No ☐
 - ii. If yes, is documentation of the evaluation attached? Yes ☐ No ☐
 - iii. If not, explain the reason the evaluation was not performed [Click here to enter text.](#)
2. For the 2024-2027 reporting period, you must either conduct an annual comprehensive evaluation or certify that the evaluation is not needed.
 - i. Is documentation of a comprehensive evaluation attached? Yes ☐ No ☐
 - ii. If a comprehensive evaluation was not performed this reporting period:
 - a. Date of last comprehensive evaluation: [Click here to enter text.](#)
 - b. Is a certification attached stating additional revisions to the codes and ordinances are not required? Yes ☐ No ☐
3. If an evaluation was completed during the reporting period
4. Did the MS4 determine that revisions to the ordinances, codes, and regulations were necessary? Yes ☐ No ☐ NA ☐
 - i. If revisions to the document(s) were required, provide the name of the document(s) and the date(s) of adoption: [Click here to enter text.](#)
 - ii. If revisions have not yet been completed, provide the status of the document revisions and a projected completion date: [Click here to enter text.](#)
 - iii. If revisions were not required this reporting period, were any codes, ordinances, and other regulations determined to need revision in a previous reporting period? Yes ☐ No ☐
 - a. If yes, state which reporting period: [Click here to enter text.](#)

B. New permittees:

1. The evaluation must be completed within two years of designation.
 - i. Was an evaluation completed during the reporting period? Yes ☐ No ☐

- a. If not, explain when the evaluation was or will be conducted: Click here to enter text.
 - ii. Is a written report attached? Yes ☐ No ☐
 - a. If not, explain why not: Click here to enter text.
2. Adopted ordinances must be submitted within four years of designation.
 - i. Are the adopted ordinances attached? Yes ☐ No ☐
 - a. If not, explain why they are not: Click here to enter text.

Pollution Prevention/ Good Housekeeping
for Municipal Operations
Minimum Control Measure
 (Table 4.2.6)

1. **BMP # 1 (Table 4.2.6, BMP #1)**
2. **BMP Title: MS4 Structure Inventory and Map**
3. **Provide the measurable goal from the Permit and/or approved SWMP: Annually update an inventory and map of the MS4 structures.**
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Inventory and Map Status**
 - A. Provide the number of structures inventoried and mapped during the reporting period:
 1. Number of catch basins added: 17
 2. Number of ditches added (state if miles or linear feet): 0
 3. Number of publicly-owned detention/retention ponds and underground detention added: 1
 4. Number of storm drain lines added (state if miles or linear feet): 2,184
 - B. Provide the number of structures inventoried and mapped to date:
 1. Total number of catch basins: 264
 2. Total number of ditches (state if miles or linear feet): 94,889
 3. Total number of publicly-owned detention/retention ponds and underground detention: 2
 4. Total number of storm drain lines (state if miles or linear feet): 56,169.9 LF
 - C. New permittees: Provide the status of the inventory development: Click here to enter text.
5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☐ No ☐

B. If not, please explain why: [Click here to enter text.](#)

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: [Click here to enter text.](#)

B. Date(s) for any BMP activities completed during this reporting period: [Click here to enter text.](#)

C. Did you comply with the implementation schedule in the SWMP? Yes ☐ No ☐

D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☐ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☐ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☐

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2 (Table 4.2.6, BMP #2)**
2. **BMP Title: MS4 Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: Inspect a minimum of 20% of the structures annually, ensuring that 100% of the structures are inspected within the 5-year permit term.**
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Provide the status of inspections performed between 2023-2027:**

Catch Basins

| Year | Total Number Catch Basins | Number Catch Basins Inspected | % Inspected |
|--------------|---------------------------|-------------------------------|-------------|
| 2023 | 206 | 68 | 33% |
| 2024 | 264 | 82 | 31% |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

Pipes

| Year | Total Pipes Number or Length (specify ft. or miles) | Number of Pipes or Length Inspected (specify ft. or miles) | % Inspected |
|--------------|---|--|-------------|
| 2023 | 53,985.9 LF | 4,355.3 LF | 8% |
| 2024 | 1,059 | 263 pipes | 24% |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

Ditches

| Year | Total Ditches Number or Length (specify ft. or miles) | Number of Ditches or Length Inspected (specify ft. or miles) | % Inspected |
|------|---|--|-------------|
| 2023 | 94,889 LF | 3,047.3 LF | 3.2% |
| 2024 | 730 Ditches | 146 Ditches | 20% |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |

| | | | |
|--------------|--|--|--|
| Total | | | |
|--------------|--|--|--|

Publicly-Owned Detention/Retention Ponds and Underground Detention

| Year | Total Number Structures | Number Structures Inspected | % Inspected |
|--------------|--------------------------------|------------------------------------|--------------------|
| 2023 | 1 | 1 | 100% |
| 2024 | 2 | 2 | 100% |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

5. Documentation

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

6. Implementation Schedule

A. BMP activities completed during this reporting period: The City conducted inspections of the MS4 structures. The inspections were documented on inspection checklists. Inventory spreadsheets showing the structures inspected and completed inspections checklist are attached.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. BMP Effectiveness

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 3 (Table 4.2.6, BMP #3)**
2. **BMP Title:** MS4 Maintenance Program
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Conduct maintenance on MS4 structures as needed on an annual basis.
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Provide the status of maintenance performed on MS4 structures during the reporting period:**
 - A. The number of catch basins maintained (including cleaning): 5
 - B. The number of ditches maintained (miles or linear feet): 20 Miles
 - C. The number of detention/retention ponds and underground detention maintained: 2
 - D. The number of storm drain lines maintained (miles or linear feet): 380 ft
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐
 - B. If not, please explain why: N/A
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: During the December 4, 2024, inspection of the City owned ponds, it was determined that maintenance was needed. Work crews mowed and cut the vegetation back that same that same week. A copy of the inspection form and photographs documenting the maintenance are attached. During inspections of MS4 structures, any maintenance needed was noted and a work order was prepared. The work orders are attached, along with photos of the structures.
 - B. Date(s) for any BMP activities completed during this reporting period: January – December 2024
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 4 (Table 4.2.6, BMP #4)**
2. **BMP Title:** Street and Parking Lot Cleaning
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Conduct litter removal activities at least once during the reporting period.
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐
 - B. If not, please explain why: N/A
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The City picked up litter along roadways during 6 months of the year. This resulted in 78 bags of litter being picked up for a total of 1,060 pounds of litter. Log sheets for the debris removal are attached.
 - B. Date(s) for any BMP activities completed during this reporting period: January – December 2024
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes ☒ No ☐
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☒ No ☐
 - D. If yes, please explain: N/A

1. **BMP # 5 (Table 4.2.6, BMP #5)**
2. **BMP Title:** Employee Training
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Hold one employee training event annually.
 - A. Did you comply with the measurable goal? Yes ☒ No ☐
 - B. If not, explain why you did not comply with the measurable goal: N/A
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐
 - B. If not, please explain why: N/A
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: On November 1, 2024, employee training was conducted. The training consisted of watching a video from the internet titled "Municipal Pollution Employee Training" sign in sheet is provided.
 - B. Date(s) for any BMP activities completed during this reporting period: November 1, 2024
 - C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐
 - D. If not, please explain why: N/A
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes ☒ No ☐
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒
 - D. If yes, please explain: N/A

1. **BMP # 6 (Table 4.2.6, BMP #6)**

2. **BMP Title: Waste Disposal**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Ensure that 100% of debris and litter collected from City streets and the MS4 structures is properly disposed of in the Barrow County Landfill.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: Click here to enter text.

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City maintains a dedicated 30-cubic yard dumpster for all MS4 Waste, including debris removed from the MS4 structures and litter removed from City streets. The dumpster was taken to the landfill four times during the reporting period for total disposal of 17.36 tons of waste. A spreadsheet showing waste disposal information is attached.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☐

D. If yes, please explain: N/A

1. **BMP # 7 (Table 4.2.6, BMP #7)**

2. **BMP Title:** New Flood Management Projects

3. **Provide the measurable goal from the Permit and/or approved SWMP:** Ensure that 100% of projects are assessed for water quality impacts during the design phase.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☐ No ☒

B. If not, please explain why: The development projects reviewed during the reporting period did result in new flood management projects.

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City approved 4 sets of plans for new projects. During the review, it was determined that two of the projects required construction of a detention pond.

B. Date(s) for any BMP activities completed during this reporting period: January – December 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 8 (Table 4.2.6, BMP #8)**

2. **BMP Title:** Existing Flood Management Projects

3. **Provide the measurable goal from the Permit and/or approved SWMP:** Assess the two City owned pond within the 5 – year permit term.

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Status of previously assessed projects**

| Structure | Date of Assessment | Results of Assessment | Status of Retrofitting |
|-----------|--------------------|-----------------------|------------------------|
| | | | |
| | | | |
| | | | |

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☐ No ☒

B. If not, please explain why: The assessment of the one City-owned Pond was not performed during this reporting period. The pond will be assessed in a future reporting period, prior to the 2027 permit expiration.

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: N/A

B. Date(s) for any BMP activities completed during this reporting period: N/A

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

1. **BMP # 9 (Table 4.2.6, BMP #9)**

2. **BMP Title: Municipal Facilities**

3. **Provide the measurable goal from the Permit and/or approved SWMP: Annually update the inventory of municipal facilities. Conduct inspections on at least 5% of the municipal facilities annually, ensuring that 100% of the facilities are inspected within the 5- year permit term.**

A. Did you comply with the measurable goal? Yes ☒ No ☐

B. If not, explain why you did not comply with the measurable goal: N/A

4. **Inventory and Inspection**

A. Inventory

1. Was an inventory of municipal facilities with the potential to cause pollution updated during the reporting period? Yes ☒ No ☐
2. A copy of the inventory must be submitted with the annual report. Is the inventory attached? Yes ☒ No ☐
3. If the inventory is not attached, explain why: N/A

B. Inspection

1. Provide the status of inspections performed on municipal facilities between 2023-2027:

Municipal Facilities

| Year | Total Number Municipal Facilities | Number Inspected | % Inspected |
|--------------|--------------------------------------|------------------|-------------|
| 2023 | 12 | 12 | 100% |
| 2024 | 14 | 14 | 100% |
| 2025 | | | |
| 2026 | | | |
| 2027 | | | |
| Total | | | |

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes ☒ No ☐

B. If not, please explain why: N/A

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: The City inspected 12 municipal facilities during the reporting period.

B. Date(s) for any BMP activities completed during this reporting period: September 2024

C. Did you comply with the implementation schedule in the SWMP? Yes ☒ No ☐

D. If not, please explain why: N/A

7. BMP Effectiveness

A. Do you consider this BMP to be effective? Yes ☒ No ☐

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue ☒ Revise ☐

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes ☐ No ☒

D. If yes, please explain: N/A

Note: You must complete a BMP annual report page for any additional Pollution Prevention/Good Housekeeping BMPs contained in your SWMP.

Enforcement Response Plan
Section 4.3

1. You were required to develop an Enforcement Response Plan (ERP) and submit the document to EPD. Have you completed ERP development? Yes ☒ No ☐
2. If yes, provide the date of submittal to EPD: 12/1/2019
3. If no, explain the reason for the delay and provide the status of the ERP development: N/A
4. Was the ERP updated during the reporting period? Yes ☐ No ☒
If yes, is a copy attached? Yes ☐ No ☐

Impaired Waters
Section 4.4

1. You are required to develop either an Impaired Waters Plan (population <10,000) or a Monitoring and Implementation Plan (population >10,000). Check which one you are required to develop:

- ☒ Impaired Waters Plan
☐ Monitoring and Implementation Plan

2. For existing permittees, including those permittees designated on March 7, 2014, you were required to submit the relevant Plan by a previous deadline date. (Note: newly designated permittees must submit a plan within 4 years of designation). Have you completed development of the Plan?

Yes ☐ No ☒

3. If yes, provide the date of submittal to EPD: Click here to enter a date.

4. If no, provide the status of the Plan development: There are no impaired waters within the City

5. You are required to check the latest 305(b)/303(d) list to determine if newly listed waters are within your jurisdiction. Have you reviewed this list? Yes ☒ No ☐

6. If newly listed waters have been identified, you must revise your Plan. If a Plan revision is required, provide a copy of the completed Plan. If the Plan has not yet been completed, provide the status and the projected date for submittal to EPD: N/A

7. For permittees with an Impaired Waters Plan:

- A. Provide the following for each impaired water located within the MS4 jurisdictional area that are located on the latest 303(d) list:

| Name of Water | Pollutant of Concern |
|-------------------------------------|----------------------|
| No impaired waters within the City. | |
| | |
| | |
| | |
| | |

- B. You are required to provide an assessment of the effectiveness of the best management practices chosen to address each pollutant of concern. Is the assessment attached?

Yes ☐ No ☐

8. For permittees with a Monitoring and Implementation Plan:

- A. Provide the following information for each impaired water located within the MS4 jurisdictional area that are included on the latest 305(b)/303(d) list:

| Name of Water | Pollutant of Concern | Monitoring Location | Sampling Frequency |
|---------------|----------------------|---------------------|--------------------|
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- B. You are required to provide monitoring data obtained for each pollutant of concern. Is the monitoring data attached? Yes ☐ No ☐
- C. You are required to provide an assessment of the data trends over time for each pollutant of concern regarding the status of the water quality. Is the assessment attached?
Yes ☐ No ☐
- D. You are required to provide an assessment of the effectiveness of the best management practices chosen to address each pollutant of concern. Is the assessment attached?
Yes ☐ No ☐

Sharing Responsibility
Section 4.5

1. Are you sharing responsibility for implementation of any part of the SWMP with another entity? Yes ☐ No ☒
2. If yes, provide the name of the entity: N/A
3. Are you performing tasks for another entity? Yes ☐ No ☒
4. Is another entity is performing tasks on your behalf? Yes ☐ No ☒
5. If you answered "Yes" to either question #3 or #4, describe what tasks are being performed by which entity: Click here to enter text.
6. You must provide a copy of a signed written agreement. Was an agreement included with the SWMP? Yes ☐ No ☒

Phase II Municipal Separate Storm Sewer System (MS4)

2024 Annual Report

February 10, 2025

Addenda provided on separate flash drive.