Submittal of Annual Reports and other Compliance Documents for Municipal Separate Storm Sewer System (MS4) Permits

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. After 120 days your draft is **deleted.**

Reporting Information

Submittal Type: Annual Report

Project Name: UW-Green Bay Annual Report 2018

County: Brown

Municipality: University of Wisconsin

Green Bay

Facility Number: 37165

Reporting Year: 2017

Required Attachments and Supplemental Information

Please complete the contents of each tab to submit your MS4 permit compliance document. The information included in this checklist is necessary for a complete submittal. A complete and detailed submittal will help us review about your MS4 permit document. To help us make a decision in the shortest amount of time possible, the following information must be submitted:

Annual Report

- Review related web site and instructions for <u>Municipal storm water permit eReporting</u> [Exit Form]
- Attach the following items as appropriate using the attachments tab above
 - Construction Site Pollution Control Annual Report Summary
 - Illicit Discharge Detection and Elimination Annual Report Summary
 - Leaf and Yard Waste Management
 - o Municipal Cooperation Attachment
 - Municipal Facility Inspections
 - o Pollution Prevention Annual Report Summary
 - o Post-Construction Storm Water Management Annual Report Summary
 - Public Education and Outreach Annual Report Summary
 - o Public Involvement and Participation Annual Report Summary
 - Storm Water Consortium/Group Report
 - Storm Sewer Map Annual Report Attachment
 - Storm Water Quality Management Annual Report Attachment
 - TMDL Attachment
 - Winter Road Maintenance
 - o Other Annual Report Attachment
- Complete all required forms and upload required attachments
- Sign and Submit form

Municipal Contact Information- Complete

Notice: Pursuant to s. NR 216.07(8), Wis. Adm. Code, an owner or operator of a Municipal Separate Storm Sewer System (MS4) is required to submit an annual report to the Department of Natural Resources (Department) by March 31 of each year to report on activities for the previous calendar year ("reporting year"). This form is being provided by the Department for the user's convenience for reporting on activities undertaken in each reporting year of the permit term. Personal information collected will be used for administrative purposes and may be provided to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.]. **Note:** Compliance items must be submitted using the Attachments tab.

Municipality Information				
Name of Municipality	University of Wisconsin Green Bay			
Facility ID # or (FIN):	37165			
Updated Information:	☐ Check to update mailing address information			
Mailing Address:	2420 Nicolet Drive			
Mailing Address 2:				
City:	Green Bay			
State:	Wisconsin			
Zip Code:	54311-7001 xxxxx or xxxxx-xxxx			
the municipality has added or dropped co Yes No Unsure	pality's participation in group efforts towards permit c nsortium membership)? (Authorized Representative for MS4 Permit)	ompliances (i.e.,		
rimary wamcipal contact reison	Select to <i>create new</i> primary contact			
First Name:	Sheryl			
	Van Gruensven			
2000 110.1110	☐ Select to <i>update</i> current contact information			
Title:				
Mailing Address:	2420 Nicolet Drive			
Mailing Address 2:				
City:	Green Bay			
State:	<u>WI</u>			
Zip Code:	54311 xxxxx or xxxxx-xxxx			
Phone Number:	920-465-2210 Ext: xxx-xxx			
Email:	vangrues@usgb.edu			

Additional Contacts Information (Optional)

	☐ I&E Program
	✓ IDDE Program
	☐ IDDE Response Procedure Manual
Individual with responsibility for:	Municipal-wide Water Quality Plan
(Check all that apply)	☐ Ordinances
	✓ Pollution Prevention Program
	☐ Post-Construction Program
	✓ Winter roadway maintenance
First Name:	Paul
Last Name:	Pinkston
Title:	Dir of Facilities
Mailing Address:	2420 Nicolet Drive
Mailing Address 2:	
City:	Green Bay
State:	<u>WI</u>
Zip Code:	54311 xxxxx or xxxxx-xxxx
Phone Number:	920-465-2373 Ext: xxx-xxxx
Email:	pinkstop@uwgb.edu

Minimum Control Measures- Section 1: Complete

1. Public Education and Outreach

year

a. Complete the following information on Public Education and Outreach Activities related to storm water. Select the Mechanism that best describes how the topic message was conveyed to your population. Use the **Add Activity** to add multiple Mechanisms. For Quantity, choose the range for the number of Mechanisms chosen (i.e., number of workshops, events). Quantity and Estimated People reached are both optional.

Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)	
Topic: Detection and elimination of illi	cit discharg	ges		
Website	Select		○ Yes ○ No	
Topic: Management of materials that household hazardous waste and house	=		n from automobi	les, pet waste,
Website	Select		○ Yes ○ No	
Topic : Beneficial onsite reuse of leaves and pesticides	s and grass	clippings/proper use	e of lawn and gard	len fertilizers
<u>Other</u>	Select		○ Yes ○ No	
Topic : Management of stream banks a restore and enhance the ecological va	lue of wate			e erosion and
<u>Did not focus on this topic this reporting</u> <u>year</u>	<u>Select</u>		○ Yes ○ No	
Topic : Infiltration of residential storm sidewalks	water runc	off from rooftop dow	nspouts, driveway	ys and
Website	Select		\bigcirc Yes \bigcirc No	
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)	
Topic : Inform and where appropriate of maintenance of construction site eros how to design, install and maintain the	ion control	•	- '	
Did not focus on this topic this reporting year	Select		○ Yes ○ No	
Topic : Identify businesses and activitie				
where appropriate, educate specific a		n methods of storm v		evention
Did not focus on this topic this reporting	Select		○ Yes ○ No	

<u>Other</u>	Select		○ Yes ○ No)
Topic: Other (describe):				
Select	Select		○ Yes ○ No)
b . Any other Public Education armay be added here or attached			inclusion in th	ne Annual
We will be assessing the option help disseminate outreach mat	_	with Fox-Wolf Wate	shed Alliance	to
				Form 340
Minimum Control Measures - 	Section 2 · Com			
TVIIIIIII COINTOI IVICASAICS	Section 2. Com	plete		
2. Public Involvement and Part		plete		
	ticipation y has kept the fo	llowing local officials	•	l staff ap
2. Public Involvement and Parta. Describe how the municipalit	ticipation y has kept the fo	llowing local officials	•	l staff ap
2. Public Involvement and Parta. Describe how the municipalit the municipal storm water disch	ticipation y has kept the fo	llowing local officials	•	l staff ap
2. Public Involvement and Part a. Describe how the municipalit the municipal storm water disch	ticipation y has kept the fo	llowing local officials	•	I staff ap
2. Public Involvement and Parta. a. Describe how the municipalithe municipal storm water discharge Elected Officials N/A	ticipation y has kept the fo	llowing local officials	•	l staff ap
2. Public Involvement and Part a. Describe how the municipalit the municipal storm water disch Elected Officials N/A Municipal Officials	ticipation y has kept the fo	llowing local officials	•	l staff app

b. Complete the following information on Public Involvement Activities related to storm water. Select the mechanism that best describes how the topic message was conveyed to your population. Use the Add Activity to add multiple mechanisms. For Quantity, choose the range for number Mechanisms chosen (i.e., number of workshops, events). Quantity and Estimated People reached are both optional.

Mechanism Quantity Est. People Reached Regional Effort?

	(optional)	(optior	nal)	(op	tional)
Topic: Storm Water Manageme	ent Plan and/or upd	ates			
<u>Website</u>	Select		(⊃ Yes	\bigcirc No
		_			
Topic : Storm water related ord		tes		○ Vos	○ No
<u>None</u>	<u>Select</u>			O Yes	○ No
Topic : MS4 Annual Report					
Website	<u>Select</u>			○ Yes	\bigcirc No
None	Select			○ Yes	\bigcirc No
None	Select			○ Yes	○ No
	L				
Topic : Volunteer Opportunities				~ · ·	O 11
<u>Clean-up events</u>	<u>Select</u>			○ Yes	No
Topic : Other (describe) : catch	n basin covers				
Storm drain stenciling	Select			○ Yes	No
Materials are available for class university professors.					
					Foi
Minimum Control Measures -	Section 3: Comple	ete			. 0.
3. Illicit Discharge Detection a	and Elimination				
a. How many total outfalls doe	es the municipality h	ave?	3		☐ Unsure
b. How many outfalls did the	municipality evaluat	e as part	3		☐ Unsure
of their routine ongoing fiel		1?			- -
c. How many were confirmed	illicit discharges?		0		Unsure
d. How many illicit discharge of municipality receive?	omplaints did the		0		Unsure
e. How many were confirmed	illicit discharges?		0		Unsure
f. How many of the identified municipality eliminate in the	•	the	0		Unsure
g. How many of the following use to enforce its illicit disch		nisms did	the muni	cipality	Unsur

0

✓ Verbal Warning

	✓ Written Warning (including email)	0		
	✓ Notice of Violation	0		
	✓ Civil Penalty/ Citation	0		
h.	Any other Illicit Discharge Detection and Einclusion in the Annual Report may be adopage.			ents
	napter 18 of the University of Wisconsin System icit discharge situations.	Administrative Cod	le defines parameters	for
				Form 3400-224 (09/17)
	linimum Control Measures - Section 4: C	Complete		
	. Construction Site Pollutant Control			
a.	How many total construction sites were a in the reporting year?	ictive at any point	1	Unsure
b.	How many construction sites did the mun permits for in the reporting year?	nicipality issue	0	Unsure
c.	Do the above numbers include sites <1 ac	cre?	○Yes	ure
d.	How many erosion control inspections did complete in the reporting year?	d the municipality	√ (Jnsure
e.	What types of enforcement actions does to compel compliance with the regulatory apply and enter the number of each used	y mechanism? Ch	eck all that	Unsure
	✓ Verbal Warning	0		
	✓ Written Warning (including email)	0		
	\square Notice of Violation			
	☐ Civil Penalty/ Citation			
	✓ Stop Work Order	0		
	☐ Forfeiture of Deposit			
	☐ No Authority			
	☐ Other - Describe below			
	Any other Construction Site Pollutant Con the Annual Report may be added here or W-Green Bay complies with Department of Adm	attached on the	attachments page.	
	nd Management master specification within Cha		or racingles bevelop	

f.

a. Ho	w many new construction sites with new s	tructural storm	0	☐ Unsure
	ter management practices have received lo		0	
	w many privately owned storm water facili re completed in the reporting year?	ity inspections		✓ Unsure
to	nat types of enforcement actions does the compel compliance with the regulatory me ply and enter the number of each used in t	echanism? Checl	k all that	□ Unsure
✓	Verbal Warning	0		
✓	Written Warning (including email)	0		
	Notice of Violation			
	Civil Penalty/ Citation			
	Forfeiture of Deposit			
	Complete maintenance			
✓	Bill responsible part	0		
	No Authority			
	Other - Describe below			
	y other Post-Construction Storm Water Ma lusion in the Annual Report may be added ge.			
	reen Bay complies with the Department of Adm opment and Management specifications.	inistration's Divisio	on of Facilities	

6. Pollution Prevention Storm Water Management Facility Inspections (ponds, biofilters, etc.) ☐ Not Applicable a. Enter the total number of municipally owned or operated Unsure 4 structural storm water facilities? b. How many new municipally owned storm water facilities were ☐ Unsure 0 installed in the reporting year? c. How many municipally owned storm water devices were inspected Unsure in the reporting year? d. How many of these facilities required maintenance? Unsure 0 If so, attach report on attachments page.

Public Works Yards $\&$ Other Municipally Owned Properties (SWPPP Plan Review) \square Not Ap	plicable
e. How many inspections of municipal properties been conducted in the reporting year?	
f. Have amendments to the SWPPPs been made? ○ Yes ● No ○ Unsure	
Collection Services - Street Sweeping / Cleaning Program ☐ Not Applicable	
g. Did the municipality conduct street sweeping/cleaning during the reporting year?● Yes ○ No ○ Unsure	
h. If known, how many tons of material was removed? \Box Unsure	
 i. If street cleaning is identified as a storm water best management practice in the pollutant loading analysis, was street cleaning completed at the assumed frequency? Yes 	
○ No - Explain	
Not ApplicableUnsure	
Collection Services - Catch Basin Sump Cleaning Program Not Applicable	
 j. Did the municipality conduct catch basin sump cleaning during the reporting year? ● Yes ○ No ○ Unsure 	
k. How many catch basin sumps were cleaned in the reporting year?	
I. If known, how many tons of material was removed? ☑ Unsure	
 m. If catch basin sump cleaning is identified as a storm water best management practice in the pollutant loading analysis, was cleaning completed at the assumed frequency? Yes No - Explain 	
○ Not Applicable○ Unsure	
Collection Services - <i>Leaf Collection Program</i> □ Not Applicable	
n. Does the municipality conduct curbside leaf collection? • Yes • No • Unsure	
o. Does the municipality notify homeowners about pickup? ○ Yes ● No ○ Unsure	
Where are the residents directed to store the leaves for collection?	
☐ Pile on terrace ☐ Pile in street ☐ Bags on terrace ☐ Unsure	
✓ Other - Describe	
not a residential MS4	
p. What is the frequency of collection?	
many times each fall	

q. Is collection followed by street swe	eping/cleaning?	○ Yes ● No ○ Unsure
Winter Road Management ☐ Not Ap	plicable	
*Note: We are requesting information that r. How many lane-miles of roadway is responsible for doing snow and ice s. Provide amount of de-icing product	s the municipality control? ts used by month last win	16 Unsure
Solids (tons) (ex. sand, or salt-sand) Oct 0 Nov 10 Dec 96 Liquids (gallons) (ex. brine)) Jan 73 Feb 70	March* 0
Oct 0 Nov 0 Dec 0 t Was salt applying machinery calibra	Jan 120 Feb 28 ated in the reporting year	
 u. Have municipal personnel attended training in the reporting year? If yes, describe what training was p 	_	○ Yes ● No ○ Unsure
When:	How many attended:	
Internal (Staff) Education & Commun	ication	
v. Have training or education on SWP been held for municipal or other per lf yes, describe what training was p	ersonnel?	S ○ Yes ● No ○ Unsure
When:	How many attended:	
Additional Pollution Prevention Infor	mation	
w. Any other Pollution Prevention pro added here or attached on the attach	=	usion in the Annual Report may be
We utilize a computerized maintenance m and materials for our catch basins, culverts on site. Our leafy debris is picked up and d	s, outfalls, and inlets. Our gra	ss clippings are mulched
		Form 3400-224 (09/17
Minimum Control Measures - Section	n 7 : Complete	FUIII 3400-224 (03/ 17
7. Storm Sewer System Map		
 a. Did the municipality update their st If yes, check the areas the map items th Storm water treatment facilities Storm pipes Vegetated swales 	• • •	? ○ Yes • No ○ Unsure

	☐ Outfalls
	☐ Other - Describe below
L	Annual bar Change Course Contain Manainformation for including in the Annual Depart
	Any other Storm Sewer System Map information for inclusion in the Annual Report may be added here or attached on the attachments page.
Th	ere will be a new storm water collection system underneath the new soccer turf field. This will

be collected and directed into the existing storm water detention ponds.

Final Evaluation - Complete

Fiscal Analysis

Complete the fiscal analysis table provided below. For municipalities that do not break out funding into permit program elements, please enter the monetary amount to your best estimate of what funding may be going towards these programs.

Annual Expenditure Reporting Year	Budget Reporting Year	Budget Upcoming Year	Source of Funds
Element: Public	Education and Out	reach	
500	500	500	<u>Other</u>
Element: Public	Involvement and F	Participation	
0	0	0	<u>Other</u>
Element: Illicit D	oischarge Detection	n and Elimination	n
2000	2000	2000	<u>Other</u>
Element: Constr	uction Site Polluta	nt Control	
0	0	0	<u>Other</u>
Flement: Post-C	Construction Storm	Water Manage	ment
0	0	0	<u>Other</u>
Element: Pollut	ion Prevention		
10000	10000	9000	<u>Other</u>
Flement: Storm	Water Quality Mar	nagement	
15000	30000	500	<u>Other</u>
Flement: Storm	Sewer System Maj		
0	0	0	<u>Other</u>
Other (describe)			
			Select

Water Quality

a: Were there any known water quality improvements or degradation in the receiving waters to which the municipality's storm sewer system directly discharges to?

○Yes	○ No • Unsure	If Yes, explain below:	
waters	any of the receiving list during the report	g waters that the municipality discharges to been added to t ting year?	he impaired
	he municipality evalu ○No ○Unsure	uated their storm water practices to reduce the pollutants o	of concern?
Additio	onal Information		
	• •	storm water program evaluation in Part II, describe any pro's storm water program.	pposed

Requests for Assistance on Improving Permit Programs

Would municipality like the Department to contact them about providing more information on developing or improving any of the Municipal Separate Storm Sewer Permit programs?

Please select all that apply:				
☑ Public Involvement				
☑ Illicit Discharge Detection and Elimination				
☐ Post-Construction Storm Water Management				
✓ Storm Water Quality Management				
✓ Storm Sewer System Map				
☐ Construction Site Pollutant Control				
☑ Pollution Prevention				
☐ Water Quality Concerns				
☐ Compliance Schedule Items Due				
✓ MS4 Program Evaluation				

Required Attachments and Supplemental Information

Any other MS4 program information for inclusion in the Annual Report may be attached on here. Use the Add Additional Attachments to add multiple documents.

Upload Required Attachments (15 MB per file limit) - <u>Help reduce file size and trouble shoot file uploads</u>
*Required Item

Note: To replace an existing file, use the 'Click here to attach file ' link or press the to delete an item.

Attach Documents		
■ File Attachment		

(To remove additional items, use your cursor to hover over the attachment section. When the drop down arrow appears, select remove item)

Sign and Submit Your Application

Steps to Complete the signature process

- 1. Read and Accept the Terms and Conditions
- 2. Press the Submit and Send to the DNR button

NOTE: For security purposes all email correspondence will be sent to the address you used when registering your WAMS ID. This may be a different email than that provided in the application. For information on your WAMS account click <u>HERE</u>.

Terms and Conditions

Certification: I hereby certify that I am an authorized representative of the municipality covered under University of Wisconsin Green Bay MS4 Permit for which this annual report or other compliance document is being submitted, and that the information contained in this submittal and all attachments were gathered and prepared under my direction or supervision. Based on my inquiry of the person or persons under my direction or supervision involved in the preparation of this document, to the best of my knowledge, the information is true, accurate, and complete. I further certify that the municipality's governing body or delegated representatives have reviewed or been apprised of the contents of this annual report. I understand that Wisconsin law provides severe penalties for submitting false information.

Signee (must check current role prior to accepting terms and conditions)

- O Authorized municipal contact using WAMS ID.
- Delegation of Signature Authority (Form 3500-123) for agent signing on the behalf of the authorized municipal contact.
- O Agent seeking to share this item with authorized municipal contact (authorized municipal contact must get WAMS id and complete signature).

Delegation of Signature Authority



signeddelegation.pdf

Submission of this form constitutes notice by the authorized municipal contact that the person electronically signing the MS4 eReport is authorized to do so on behalf of the authorized municipal contact. <u>Please download form 3500-123</u> and sign and attach it above..

Authorized Signature.

Signed by: i:0#.f|wamsmembership|gbstorm1 on 2018-03-21T10:37:52

✓ I accept the above terms and conditions.

You have already signed and submitted this application to the DNR. Please contact

the Wisconsin DNR for assistance.

After providing the final authorized signature, the system will send an email to the authorized party and any agents. This email will include a copy to the final read only version of this application.