

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

Will you be completing the Annual Report or other submittal type? Annual Report Other

Project Name: MS4 Annual Report - Fort Atkinson

County: Jefferson

Municipality: Fort Atkinson City

Permit Number: S050075

Facility Number: 31422

Reporting Year: 2019

Is this submittal also satisfying an Urban Nonpoint Source Grant funded deliverable? Yes No

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 [Municipal storm water permit eReporting](#) [Exit Form]
- Complete all required fields on the annual report form and upload required attachments
- Attach the following other supporting documents as appropriate using the attachments tab above
 - Public Education and Outreach Annual Report Summary
 - Public Involvement and Participation Annual Report Summary
 - Illicit Discharge Detection and Elimination Annual Report Summary
 - Construction Site Pollution Control Annual Report Summary
 - Post-Construction Storm Water Management Annual Report Summary
 - Pollution Prevention Annual Report Summary
 - Leaf and Yard Waste Management
 - Municipal Facility (BMP) Inspection Report
 - Municipal Property SWPPP
 - Municipally Property Inspection Report
 - Winter Road Maintenance
 - Storm Sewer Map Annual Report Attachment
 - Storm Water Quality Management Annual Report Attachment
 - TMDL Attachment
 - Storm Water Consortium/Group Report

- Municipal Cooperation Attachment
- Other Annual Report Attachment

- Attach the following permit compliance documents as appropriate using the attachments tab above
 - Storm Water Management Program (*S050075-03 general permittees shall have a written storm water management program that describes in detail how the permittee intends to comply with the permit requirements for each minimum control measure. Updated programs are due to the department by March 31, 2021.*)
 - Public Education and Outreach Program
 - Public Involvement and Participation Program
 - Illicit Discharge Detection and Elimination Program
 - Construction Site Pollutant Control Program
 - Post-Construction Storm Water Management Program
 - Pollution Prevention Program
 - Municipal Storm Water Management Facility (BMP) Inventory (*S050075-03 general permittees 2.6.1 - inventory due to the department by March 31, 2021.*)
 - Municipal Storm Water Management Facility (BMP) Inspection and Maintenance Plan (*S050075-03 general permittees 2.6.2 – document due to the department by March 31, 2021.*)

- 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: Fort Atkinson City

Facility ID # or (FIN): 31422

Updated Information: Check to update mailing address information

Mailing Address: 101 N Main St

Mailing Address 2:

City: Fort Atkinson

State: Wisconsin

Zip Code: 53538 xxxxx or xxxxx-xxxx

Primary Municipal Contact Person (Authorized Representative for MS4 Permit)

The "Authorized Representative" or "Authorized Municipal Contact" includes the municipal official that was charged with compliance and oversight of the permit conditions, and has signature authority for submitting permit documents to the Department (i.e., Mayor, Municipal Administrator, Director of Public Works, City Engineer).

Select to **create new** primary contact

First Name: Andy

Last Name: Selle

Select to **update** current contact information

Title: City Engineer

Mailing Address: 101 N Main St

Mailing Address 2:

City: Fort Atkinson

State: WI

Zip Code: 53538-1861 xxxxx or xxxxx-xxxx

Phone Number: 920-563-7760 Ext: xxx-xxx-xxxx

Email: aselle@fortatkinsonwi.net

Additional Contacts Information (Optional)

- I&E Program
- IDDE Program

**Individual with responsibility for:
(Check all that apply)**

- IDDE Response Procedure Manual
- Municipal-wide Water Quality Plan
- Ordinances
- Pollution Prevention Program
- Post-Construction Program
- Winter roadway maintenance

First Name:

Last Name:

Title:

Mailing Address:

Mailing Address 2:

City:

State:

Zip Code:

xxxxx or xxxxx-xxxx

Phone Number:

Ext:

xxx-xxx-xxxx

Email:

1. Does the municipality rely on another entity to satisfy some of the permit requirements? If yes, enter entity name (government, consultant, group/organization).

Yes No

Public Education and Outreach: RRSg

Public Involvement and Participation: RRSg

Illicit Discharge Detection and Elimination:

Construction Site Pollutant Control:

Post-Construction Storm Water Management:

Pollution Prevention

2. Has there been any changes to the municipality's participation in group efforts towards permit compliances (i.e., the municipality has added or dropped consortium membership)?

Yes No

Missing Information

Do not close your work until you SAVE.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7.

Form 3400-224 (08/19)

Minimum Control Measures- Section 1 : Complete

1. Public Education and Outreach

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).

Topic: Detection and elimination of illicit discharges			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Social media posts</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<u>Educational activities (School presentations, summer camps, etc)</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<u>Informational booth at event</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

Topic: Management of materials that may cause storm water pollution from automobiles, pet waste, household hazardous waste and household practices			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Social media posts</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<u>Educational activities (School presentations, summer camps, etc)</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<u>Informational booth at event</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

Topic: Beneficial onsite reuse of leaves and grass clippings/proper use of lawn and garden fertilizers and pesticides			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Social media posts</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No

Informational booth at event Select... Select... Yes No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

Topic: Management of stream banks and shorelines by riparian landowners to minimize erosion and restore and enhance the ecological value of waterways

Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Did not focus on this topic this reporting year</u>	<u>Select...</u>	<u>Select...</u>	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

Topic: Infiltration of residential storm water runoff from rooftop downspouts, driveways and sidewalks

Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Social media posts</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<u>Educational activities (School presentations, summer camps, etc)</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<u>Informational booth at event</u>	<u>Select...</u>	<u>Select...</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

Topic: Inform and where appropriate educate those responsible for the design, installation, and maintenance of construction site erosion control practices and storm water management facilities on how to design, install and maintain the practices

Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Did not focus on this topic this reporting year</u>	<u>Select...</u>	<u>Select...</u>	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

Topic: Identify businesses and activities that may pose a storm water contamination concern, and where appropriate, educate specific audiences on methods of storm water pollution prevention

Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
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Did not focus on this topic this reporting year Select... Select... Yes No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

Topic: Promote environmentally sensitive land development designs by developers and designers, including green infrastructure and low impact development

Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
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Direct one-on-one communication 1 - 9 10 - 19 Yes No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

Topic: Other (describe):

Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
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Select... Select... Select... Yes No

Select all applicable audiences targeted for this topic.

- Contractors General Public Public Employees Residential School Groups
 Business Developers Industries Other:

b. Brief Public Education and Outreach program information for inclusion in the Annual Report. If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

Please see the annual report of the Rock River Stormwater Group

Missing Information

Do not close your work until you **SAVE**.

Minimum Control Measures - Section 2 : Complete

2. Public Involvement and Participation

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 number Mechanisms chosen (i.e., number of workshops, events).

Topic: Storm Water Management Plan and/or updates			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Presentation of Storm Water Information	1 - 9	10 - 19	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable participants targeted for this topic.

- Contractors
 General Public
 Public Employees
 Residential
 School Groups
 Business
 Developers
 Industries
 Other:

Topic: Storm water related ordinance and/or updates			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
None	Select...	Select...	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable participants targeted for this topic.

- Contractors
 General Public
 Public Employees
 Residential
 School Groups
 Business
 Developers
 Industries
 Other:

Topic: MS4 Annual Report			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Presentation of Storm Water Information	1 - 9	1 - 9	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable participants targeted for this topic.

- Contractors
 General Public
 Public Employees
 Residential
 School Groups
 Business
 Developers
 Industries
 Other:

Topic: Volunteer Opportunities			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Clean-up events	1 - 9	10 - 19	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable participants targeted for this topic.

- Contractors
 General Public
 Public Employees
 Residential
 School Groups
 Business
 Developers
 Industries
 Other:

Topic: Other (describe) : <input type="text"/>			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Select...	Select...	Select...	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable participants targeted for this topic .

- Contractors
 General Public
 Public Employees
 Residential
 School Groups
 Business
 Developers
 Industries
 Other:

b. Brief Public Involvement and Participation program information for inclusion in the Annual Report.

If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

Missing Information

Do not close your work until you **SAVE**.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (09/19)

Minimum Control Measures - Section 3 : Complete

3. Illicit Discharge Detection and Elimination

- a. How many total outfalls does the municipality have? Unsure
- b. How many outfalls did the municipality evaluate as part of their routine ongoing field screening program? Unsure
- c. From the municipality's routine screening, how many were confirmed illicit discharges? Unsure
-
- d. How many illicit discharge complaints did the municipality receive? Unsure
- e. From the complaint received, how many were confirmed illicit discharges? Unsure
- f. How many of the identified illicit discharges did the municipality eliminate in the reporting year? Unsure

(If the sum of 3.c. and 3.e. does not equal 3.f., please explain below.)

- g. How many of the following enforcement mechanisms did the municipality use to enforce its illicit discharge ordinance? Check all that apply and enter the number of each used in the reporting year. Unsure

<input checked="" type="checkbox"/> Verbal Warning	10
<input checked="" type="checkbox"/> Written Warning (including email)	133
<input checked="" type="checkbox"/> Notice of Violation	3
<input checked="" type="checkbox"/> Civil Penalty/ Citation	1

Additional Information: _____

h. Brief Illicit Discharge Detection and Elimination program information for inclusion in the Annual Report. If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

Most of our efforts have been aimed at sending letters for grass in the street. We had one oil spill washed into the storm sewer by a local business that was addressed with a violation.

Missing Information

Do not close your work until you **SAVE**.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (08/19)

Minimum Control Measures - Section 4 : Complete

4. Construction Site Pollutant Control

- a. How many total construction sites were active at any point in the reporting year? Unsure
- b. How many construction sites did the municipality issue permits for in the reporting year? Unsure
- c. Do the above numbers include sites <1 acre? Yes No Unsure
- d. How many erosion control inspections did the municipality complete in the reporting year? Unsure
- e. What types of enforcement actions does the municipality have available to compel compliance with the regulatory mechanism? Check all that apply and enter the number of each used in the reporting year. Unsure

<input type="checkbox"/> No Authority	
<input checked="" type="checkbox"/> Verbal Warning	18
<input checked="" type="checkbox"/> Written Warning (including email)	4
<input checked="" type="checkbox"/> Notice of Violation	2
<input checked="" type="checkbox"/> Civil Penalty/ Citation	0
<input checked="" type="checkbox"/> Stop Work Order	1
<input type="checkbox"/> Forfeiture of Deposit	0
<input type="checkbox"/> Other - Describe below	

f. Brief Construction Site Pollutant Control program information for inclusion in the

Annual Report . If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

The building inspector monitors all residential construction sites. The City engineer monitors all commercial sites

Missing Information

Do not close your work until you **SAVE**.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (08/19)

Minimum Control Measures - Section 5 : Complete

5. Post-Construction Storm Water Management

- a. How many sites with new structural storm water management facilities* have received local approval ? Unsure

*Engineered and constructed systems that are designed to provide storm water quality control such as wet detention ponds, constructed wetlands, infiltration basins, grassed swales, permeable pavement, catch basin sumps, etc.

- b. How many privately owned storm water management facilities were inspected in the reporting year ? Unsure

Inspections completed by private land owners should be included in the reported number.

- c. What types of enforcement actions does the municipality have available to compel compliance with the regulatory mechanism? Unsure

Check all that apply and enter the number of each used in the reporting year.

- | | |
|---|--------------------------------|
| <input type="checkbox"/> No Authority | |
| <input checked="" type="checkbox"/> Verbal Warning | <input type="text" value="0"/> |
| <input checked="" type="checkbox"/> Written Warning (including email) | <input type="text" value="0"/> |
| <input checked="" type="checkbox"/> Notice of Violation | <input type="text" value="0"/> |
| <input checked="" type="checkbox"/> Civil Penalty/ Citation | <input type="text" value="0"/> |
| <input type="checkbox"/> Forfeiture of Deposit | <input type="text"/> |
| <input checked="" type="checkbox"/> Complete Maintenance | <input type="text" value="0"/> |
| <input type="checkbox"/> Bill Responsible Party | <input type="text"/> |
| <input type="checkbox"/> Other - Describe below | <input type="text"/> |

- d. Brief Post-Construction Storm Water Management program information for inclusion in the Annual Report . If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

Missing Information

Do not close your work until you SAVE.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (08/19)

Minimum Control Measures - Section 6 : Complete

6. Pollution Prevention

Storm Water Management Facility Inspections (ponds, biofilters, etc.) Not Applicable

- a. Enter the total number of municipally owned or operated structural storm water management facilities? Unsure
- b. How many new municipally owned storm water management facilities were installed in the reporting year? Unsure
- c. How many municipally owned storm water management facilities were inspected in the reporting year? Unsure
- d. What elements are looked at during inspections (250 character limit)?
- e. How many of these facilities required maintenance? Unsure

Public Works Yards & Other Municipally Owned Properties (SWPPP Plan Review) Not Applicable

- f. How many inspections of municipal properties have been conducted in the reporting year? Unsure
- g. Have amendments to the SWPPPs been made? Yes No Unsure
- h. If yes, describe what changes have been made (200 character limit):

Collection Services - *Street Sweeping / Cleaning Program* Not Applicable

- i. Did the municipality conduct street sweeping/cleaning during the reporting year?
 Yes No Unsure
- j. If known, how many tons of material was removed? Unsure
- k. Does the municipality have a low hazard exemption for this material? Yes No
- l. 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 Applicable

Collection Services - *Catch Basin Sump Cleaning Program* Not Applicable

- m. Did the municipality conduct catch basin sump cleaning during the reporting year?
 Yes No Unsure
- n. How many catch basin sumps were cleaned in the reporting year? Unsure
- o. If known, how many tons of material was collected? Unsure
- p. Does the municipality have a low hazard exemption for this material? Yes No
- q. 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

Collection Services - *Leaf Collection Program* Not Applicable

- r. Does the municipality conduct curbside leaf collection? Yes No Unsure
- s. Does the municipality notify homeowners about pickup? Yes No Unsure
- t. Where are the residents directed to store the leaves for collection?
 Pile on terrace Pile in street Bags on terrace Unsure
 Other - Describe _____
- u. What is the frequency of collection?
3x / season Nov 1 - Dec 15
- v. Is collection followed by street sweeping/cleaning? Yes No Unsure

Winter Road Management Not Applicable

*Note: We are requesting information that goes beyond the reporting year, answer the best you can.

- w. How many lane-miles of roadway is the municipality responsible for doing snow and ice control? Unsure
- x. Provide amount of de-icing products used by month last winter season?
 Solids (tons) (ex. sand, or salt-sand)

Product	Oct	Nov	Dec	Jan	Feb	Mar
Salt	<input type="text" value="0"/>	<input type="text" value="24"/>	<input type="text" value="48"/>	<input type="text" value="250"/>	<input type="text" value="388"/>	<input type="text" value="36"/>

Liquids (gallons) (ex. brine)

	Oct	Nov	Dec	Jan	Feb	Mar
Brine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="90"/>	<input type="text" value="1111"/>	<input type="text" value="2285"/>	<input type="text" value="210"/>

- y. Was salt applying machinery calibrated in the reporting year? Yes No Unsure
- z. Have municipal personnel attended salt reduction strategy Yes No Unsure

training in the reporting year?

Unsure

If yes, describe what training was provided (250 character limit):

When:

How many attended:

Internal (Staff) Education & Communication

- aa. Has training or education been held for municipal or other personnel involved in implementing each of the pollution prevention program elements? Yes No Unsure

If yes, describe what training was provided (250 character limit):

When:

How many attended:

- ab. Describe how the municipality has kept the following local officials and municipal staff aware of the municipal storm water discharge permit programs and its requirements.

Elected Officials

We provide an annual stormwater report to the City Council

Municipal Officials

Most are present for the annual stormwater report to the City Council

Appropriate Staff (such as operators, Department heads, and those that interact with public)

Department Heads receive very little stormwater information

- ac. Brief Pollution Prevention program information for inclusion in the Annual Report . If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

Missing Information

Do not close your work until you **SAVE**.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (08/19)

Minimum Control Measures - Section 7 : Complete

7. Storm Sewer System Map

- a. Did the municipality update their storm sewer map this year? Yes No Unsure

If yes, check the areas the map items that got updated or changed:

- Storm water treatment facilities
 Storm pipes
 Vegetated swales

Outfalls

Other - Describe below

- b. Brief Storm Sewer System Map information for inclusion in the Annual Report. If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

We did lay a hundred or so feet of additional pipe for a street project, but have not updated the GIS map with this information. All other large scale info remains the same.

Missing Information

Do not close your work until you SAVE.

Form 3400-224 (08/19)

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
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Element: Public Education and Outreach

2500	2500	2500	<u>Storm water utility</u>
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Element: Public Involvement and Participation

2500	2500	2500	<u>Storm water utility</u>
------	------	------	----------------------------

Element: Illicit Discharge Detection and Elimination

5000	5000	5000	<u>Storm water utility</u>
------	------	------	----------------------------

Element: Construction Site Pollutant Control

10000	10000	10000	<u>Storm water utility</u>
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Element: Post-Construction Storm Water Management

30000	30000	30000	<u>Storm water utility</u>
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Element: Pollution Prevention

95893	95893	98487	<u>Storm water utility</u>
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Element: Storm Water Quality Management

40000	40000	41500	<u>Storm water utility</u>
-------	-------	-------	----------------------------

Element: Storm Sewer System Map

5000	5000	5000	<u>Storm water utility</u>
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Other (describe)

Select...

Please provide a justification for a "0" entered in the Fiscal Analysis

Water Quality

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

Yes No Unsure If Yes, explain below:

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

Yes No Unsure If Yes, explain below:

c: Have any of the receiving waters that the municipality discharges to been added to the impaired waters list during the reporting year?

Yes No Unsure

d: Has the municipality evaluated their storm water practices to reduce the pollutants of concern?

Yes No Unsure

Total Maximum Daily Loads (TMDLs)

The permittee Fort Atkinson City is subject to the following approved TMDLs: Rock River Basin and/or Beaver Dam Lake

Select one option below. The permittee intends to comply with the following permit requirement to show progress towards meeting the (Appendix A) TMDL:

Request department concurrence that they are currently meeting the TMDL pollutant reductions in all applicable reachsheds (A.2).

Demonstrate that they will meet the TMDL pollutant reductions in all applicable reachsheds by October 31, 2023 (A.4).

Follow the TMDL Compliance Plan which received Department concurrence prior to April 30, 2019 (A.3.1).

Participate in an approved Adaptive Management Project (A.3.2).

Submit a TMDL Implementation Plan describing planned progress over current permit term by October 31, 2021 (A.5). Do you intend to select A.5.2 or A.5.3 to meet this permit requirement?

A.5.2 – Additional 20% Total Suspended Solids (TSS), 10% Total Phosphorus (TP) reduction from current ch. NR 151, Wis. Adm. Code, standards

A.5.3 – Optimize measures

Additional Information

Based on the municipality's storm water program evaluation, describe any proposed changes to the

municipality's storm water program. If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

Do not close your work until you SAVE.

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Form 3400-224 (08/19)

Requests for Assistance on Understanding Permit Programs

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

Please select all that apply:

- Public Education and Outreach
- Public Involvement and Participation
- Illicit Discharge Detection and Elimination
- Construction Site Pollutant Control
- Post-Construction Storm Water Management
- Pollution Prevention
- Storm Water Quality Management
- Storm Sewer System Map
- Water Quality Concerns
- Compliance Schedule Items Due
- MS4 Program Evaluation

Do not close your work until you **SAVE**.

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) - [Help reduce file size and trouble shoot file uploads](#)

*Required Item

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

Attach - Other Supporting Documents

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

Attach - Permit Compliance Documents

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

Missing Information

Draft and Share PDF Report with Municipality's Governing Body.

Press the button below to create a PDF. The PDF will be sent to the email address associated with the WAMS ID that is signed in. After the annual report has been approved by the governing body, you will have to come back to the MS4 eReporting system to submit the report to the DNR.

[Draft and Share PDF Report with Municipality's Governing Body](#)

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 [HERE](#).

Terms and Conditions

Certification: I hereby certify that I am an authorized representative of the municipality covered under Fort Atkinson City 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)

- Authorized municipal contact using WAMS ID.
- Delegation of Signature Authority (Form 3400-220) for agent signing on the behalf of the authorized municipal contact.
- Agent seeking to share this item with authorized municipal contact (authorized municipal contact must get WAMS id and complete signature).

Name:

Title:

Authorized Signature.

- I accept the above terms and conditions.

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.