

NPDES Small MS4 General Permit (OHQ000002) Annual Reporting Form

Instructions for completing this form:

- OHQ000002 requires that this form be used when submitting annual reports. You may request approval to use your own reporting format.
- Annual Reports are due annually on or before April 1st.
- Complete the form and sign and date the certification statement below.
- If more space is needed than is provided, identify within the provided space that Attachment A, B, C, etc. has been attached.
- If an item of the form is not applicable for your program (such as street sweeping), fill in N/A in the space provided.
- Don't include attachments such as brochures, newspaper clips, sign-in sheets, etc. related to your program with this form. You only need to summarize these within this report. These records must be filed and will be needed during program audits.
- When complete, submit this Annual Report form to the following address:

Ohio Environmental Protection Agency

Division of Surface Water

Storm Water Program - Small MS4

P.O. Box 1049

Small MS4 Annual Report for Year:

Columbus, Ohio 43216-1049

| Ohio EPA Facility Permit Number: | | | | | | |
|---|---|--------------------------------------|---|--|--|--|
| Name of MS4: | | | | | | |
| Primary Contact: | | | | | | |
| Mailing Address: | | | | | | |
| City: | Zip Code: | | County: | | | |
| Telephone Number: | Email Address: | | | | | |
| Include or attach a Table of Organization. Indicate who (ryour program, and if different, each minimum control mea agencies and departments occur. Also, identify any Mem | sure of your program. orandum of Understan | Identify how de dings (MOUs) o | velopment and implementation across multiple positions, r other such agreements that exist. | | | |
| designed to assure that qualified personnel properly gather manage the system, or those persons directly responsible belief, true, accurate and complete. I am aware that there imprisonment for knowing violations. Print Name: | er and evaluate the info e for gathering the infor | ormation submiti mation, the info | ted. Based on my inquiry of the person or persons who rmation submitted is, to the best of my knowledge and | | | |
| Print Title: | | | | | | |
| Signature: | | Dat | e: | | | |
| | | | | | | |





| PUBLIC EDUCATION & OUTREACH | |
|--|--|
| Estimate Your Permit Area's Total Population: | |

| BMP (mechanism) & Responsible Party | Measurable Goal | Theme or Message | Target Audience | % of Target Audience Reached | Summary of Results | Effective (Yes or No) |
|-------------------------------------|-----------------|------------------|-----------------|---------------------------------|--------------------|-----------------------|
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PUBLIC EDUCATION & OUTREACH

• Summarize activities you plan to undertake during the next reporting cycle.

| BMP (mechanism) & Responsible Party | Measurable Goal | Theme or Message | Target Audience | % of Target Audience to be Reached | Summary of Planned Activities | Proposed Schedule |
|-------------------------------------|-----------------|------------------|-----------------|------------------------------------|----------------------------------|-------------------|
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PUBLIC INVOLVEMENT/PARTICIPATION

| BMP (Activity) & Responsible Party | Measurable Goal | Theme or Message | Target Audience | Estimate of People Participated | Summary of Results | Effective (Yes or No) |
|---------------------------------------|-----------------|------------------|-----------------|------------------------------------|--------------------|-----------------------|
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PUBLIC INVOLVEMENT/PARTICIPATION

• Summarize activities you plan to undertake during the next reporting cycle.

| BMP (Activity) & Responsible Party | Measurable Goal | Theme or Message | Target Audience | Estimate of People to Participate | Summary of Planned Activities | Proposed Schedule |
|------------------------------------|-----------------|------------------|-----------------|--------------------------------------|----------------------------------|-------------------|
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ILLICIT DISCHARGE DETECTION & ELIMINATION (IDDE)

| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | Cite Local Code(s | s) Being Used nk for code(s)) | Summary of Resul | ts or Activities | Effective (Yes or No) |
|---|-----------------|--------------------------|---------------------------|----------------------------------|-----------------------|------------------|--------------------------|
| Ordinance or Other Regulatory Mechanism | | | | | | | |
| | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | | Summary of A | Activities or Updates | | Effective (Yes or No) |
| Storm Sewer System Map | | | | | | | |
| | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | | Summary of A | Activities or Updates | | Effective (Yes or No) |
| HSTS Mapping and List | | | | | | | |
| | | Completed | | | | | Effective |
| BMP & Responsible Party | Measurable Goal | (Yes or No) | | Summary of A | Activities or Updates | | (Yes or No) |
| IDDE Plan | | | | | | | |
| | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | # of Outfalls Screened | # of Dry-Weather | d | Discharges: | Effective (Yes or No) |
| Dry-Weather Screening of Outfalls Total # of Outfalls | | | | | Identified* | Eliminated | |
| Total # of Outfalls | | | | | | | |

^{*}Include an attachment which provides schedules for elimination of illicit connections that have been identified but have yet to be eliminated.



ILLICIT DISCHARGE DETECTION & ELIMINATION (IDDE)

• Summarize activities you plan to undertake for the next reporting cycle.

| BMP & Responsible Party | Measurable Goal | Summary of Planned Activities | Proposed Schedule |
|---|-----------------|-------------------------------|-------------------|
| Ordinance or Other Regulatory Mechanism | | | |
| | | | |
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| Storm Sewer System Map | | | |
| | | | |
| HSTS Mapping and List | | | |
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| IDDE Plan | | | |
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| Dry-Weather Screening of Outfalls | | | |
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CONSTRUCTION SITE RUNOFF CONTROL

| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | Cite Loc (If availab | al Code ole, web | (s) Beir link for | ng Used code(s)) | Summary of Results or Activities | Effective (Yes or No) |
|--|-----------------|--------------------------|---------------------------------------|---------------------|----------------------|------------------------|----------------------------------|--------------------------|
| Ordinance or Other Regulatory Mechanism | | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | Star | ndards E | Being U | sed | Summary of Results or Activities | Effective (Yes or No) |
| Sediment and Erosion Control Requirements | | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | | Comp | laints | | Summary of Results or Activities | Effective |
| | | (res or No) | Received | k | Follo | wed-Up On | - | (Yes or No) |
| Complaint Process | | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | # of Applica Sites Requir Plans | nble ring | | of Plans eviewed | Summary of Results or Activities | Effective (Yes or No) |
| Site Plan Review Procedures | | | | | | | | |
| | | | Site In | spection | ns Parf | ormed | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | # of Applicable Sites | # Perfo | | Avg. Frequency | Summary of Results or Activities | Effective (Yes or No) |
| Site Inspection Procedures | | | | | | | | |
| | | Completed | | Violat | tions | | | Effective |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | # of Violati Letters | on | | Enforcement Actions | Summary of Results or Activities | Effective (Yes or No) |
| Enforcement Procedures | | | | | | | | |
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^{*}Include an attachment which identifies applicable sites within your jurisdiction for this reporting period.



CONSTRUCTION SITE RUNOFF CONTROL

• Summarize activities you plan to undertake during the next reporting cycle.

| BMP & Responsible Party | Measurable Goal | Summary of Planned Activities | Proposed Schedule |
|---|-----------------|-------------------------------|-------------------|
| Ordinance or Other Regulatory Mechanism | | | |
| | | | |
| Sediment and Erosion Control Requirements | | | |
| | | | |
| Complaint Process | | | |
| | | | |
| Site Plan Review Procedures | | | |
| | | | |
| Site Inspection Procedures | | | |
| | | | |
| Enforcement Procedures | | | |
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POST-CONSTRUCTION STORM WATER MANAGEMENT IN NEW DEVELOPMENT AND REDEVELOPMENT

| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | Cite Local Co (If available, w | ode(s) Being Used veb link for code(s)) | Summary of Results or Activities | Effective (Yes or No) | | |
|--|-----------------|--------------------------|---|---|----------------------------------|---|--|-----------|
| Ordinance or Other Regulatory Mechanism | | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | | -Structural Standards Being Used | Summary of Results or Activities | Effective (Yes or No) | | |
| Post-Construction Requirements | | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | # of Applicable Sites Requiring Post- Const. BMPs | # of Plans Reviewed | Summary of Results or Activities | Effective (Yes or No) | | |
| Site Plan Review Procedures | | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | | Site Inspections Performed Summary of Resu | | Effective (Yes or No) | | |
| Site Inspection Procedures | | (163 of 140) | # Performed | Avg. Frequency | | (103 01 140) | | |
| | | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed | Vi | Violations Summary of Results or Activities | | Violations Summary of Results or Activiti | | Effective |
| | | (Yes or No) | # of Violation Letters | # of Enforcement Actions | , | (Yes or No) | | |
| Enforcement Procedures | | | | | | | | |
| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | # of Sites Requiring Plans/Agreements | # of Plans Developed/Agreements in Place | Summary of Results or Activities | Effective (Yes or No) | | |
| Long-Term O&M Plans/Agreements | | | | | | | | |
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POST-CONSTRUCTION STORM WATER MANAGEMENT IN NEW DEVELOPMENT AND REDEVELOPMENT

• Summarize activities you plan to undertake for the next reporting cycle.

| BMP & Responsible Party | Measurable Goal | Summary of Planned Activities | Proposed Schedule |
|---|-----------------|-------------------------------|-------------------|
| Ordinance or Other Regulatory Mechanism | | | |
| | | | |
| Post-Construction Requirements | | | |
| | | | |
| Site Plan Review Procedures | | | |
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| Site Inspection Procedures | | | |
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| Enforcement Procedures | | | |
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| Long-Term O&M Plans/Agreements | | | |
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POLLUTION PREVENTION/GOOD HOUSEKEEPING FOR MUNICIPAL OPERATIONS

| BMP & Responsible Party | Measurable Goal | Completed (Yes or No) | Topic(s) | | argeted Audience # of Employed Attended | | Summary of Activity | Effective (Yes or No) |
|--------------------------------|---|--------------------------|---|---|--|---|------------------------------------|--------------------------|
| Employee Training Program | | | | | | | | |
| | List of Municipal Facilities Subject to Program | | | O&M Procedures Developed for Facilities (Yes or No) | | # of Facility Inspections Performed | Frequencies of Such Inspections | |
| | | | | | | | | |
| | Summarize N | Maintenance Activities a | and Schedules | | | Summarize Acti | vities Performed | |
| MS4 Maintenance | | | | | | | | |
| | Procedures Deve | | Document Amounts of Wastes Properly Disposed | | | | | |
| Disposal of Wastes | | | | | | | | |
| | Covered (Yes or No) | | Tons Used | | Summarize Measures Taken to Minimize Usage | | | |
| Road Salt | | | | | | | | |
| | Procedures Developed (Yes or No) | | Gallons Used | | Summarize Measures Taken to Minimize Usage | | | |
| Pesticide & Herbicide Usage | | | | | | | | |
| | Procedures Developed (Yes or No) | | Pounds Used | Summarize Measures | | Summarize Measures T | aken to Minimize Usage | |
| Fertilizer Usage | | | | | | | | |
| | Procedures Deve | | Document Amount of Material Collected and Properly Disposed | | | | | |
| Street Sweeping | | | | | | | | |
| Flood Management | | Summarize any Ne | ew or Existing Flood Mar | nagement Project | s that w | ere Assessed for Impac | ts on Water Quality | |
| Flood Management Projects | | | | | | | | |



POLLUTION PREVENTION/GOOD HOUSEKEEPING FOR MUNICIPAL OPERATIONS

• Summarize activities you plan to undertake for the next reporting cycle.

| BMP & Responsible Party | Measurable Goal | Summary of Planned Activities | Proposed Schedule |
|---------------------------------------|-----------------|-------------------------------|-------------------|
| Employee Training Program | | | |
| | | | |
| List of Facilities Subject to Program | | | |
| | | | |
| MS4 Maintenance | | | |
| | | | |
| Disposal of Wastes | | | |
| | | | |
| Road Salt | | | |
| | | | |
| Pesticide & Herbicide Usage | | | |
| | | | |
| Fertilizer Usage | | | |
| | | | |
| Street Sweeping | | | |
| | | | |
| Flood Management Projects | | | |
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| PROPOSED CHANGES TO YOUR SWMP (IF ANY) Summarize any proposed changes to your SWMP, including changes to any BMPs or any identified measurable goals that apply to the program elements. If you fail to satisfy measurable goals for the reporting year, please explain why. | | | | | | | | |
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| ANCES GRANTED (IF ANY) | | | | | | | | |
| Identify and summarize any variances granted under your storm water program. | | | | | | | | |
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