

APPENDIX B

Delaware Department of Natural Resources and Environmental Control National Pollutant Discharge Elimination System MS4 Report Form (Phase I and II)

Information to be completed by permittees and other parties as identified in any existing memoranda of agreement as part of the most current permit.

MS4 Information

Name of MS4

Name of Contact Person (First)

(Last)

(Title)

Telephone (including area code)

Email

Mailing Address

City

State

ZIP code

What size population does your MS4 serve? _____

What is the reporting period for this report? (mm/dd/yyyy) From _____ to _____

Federal NPDES Permit Number _____

State NPDES Permit Number _____

1. Public Education and Public Participation

A. Is your public education program targeting specific pollutants and sources of those pollutants? Yes No

B. If yes, what are the specific sources and/or pollutants addressed by your public education program?

C. Note specific successful outcome(s) (e.g., quantified reduction in fertilizer use; NOT tasks, events, publications) fully or partially attributable to your public education program during this reporting period.

D. Do you have an advisory committee or other body comprised of the public and other stakeholders that provides regular input on your stormwater program? Yes No

2. Illicit Discharge Detection and Elimination

- A. Identify the number of outfalls in your storm sewer system. _____
- B. Do you have documented procedures, including frequency, for screening outfalls? Yes No
- C. How many outfalls were screened for dry weather discharges during this reporting period? _____
- D. How many outfalls have been screened for dry weather discharges at any time since you obtained MS4 permit coverage? _____
- E. What is your frequency for screening outfalls for illicit discharges? Describe any variation based on size/type.

- F. Do you have an ordinance or other regulatory mechanism that effectively prohibits illicit discharges? Yes No
- G. Do you have an ordinance or other regulatory mechanism that provides authority for you to take enforcement action and/or recover costs for addressing illicit discharges? Yes No
- H. During this reporting period, how many illicit discharges/illegal connections have you discovered? _____
- I. Of those illicit discharges/illegal connections that have been discovered or reported, how many have been eliminated?

- J. How often do municipal employees receive training on the illicit discharge program? _____

3. Stormwater Management During Construction

- A. Other than the state Sediment and Stormwater Regulations, do you have an ordinance or other regulatory mechanism stipulating:
- | | | |
|---|------------------------------|-----------------------------|
| Construction site stormwater requirements | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other construction waste control requirements | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Requirement to submit construction plans (stormwater quality/quantity) for review | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Re-development | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Enforcement authority | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
- B. Do you have written procedures for:
- | | | |
|------------------------------|------------------------------|-----------------------------|
| Reviewing construction plans | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Performing inspections | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Responding to violations | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
- C. Identify the number of active construction sites ≥ 1 acre in operation in your jurisdiction at any time during the reporting period. _____
- D. How many of the sites identified above did you inspect during this reporting period? _____
- E. Describe, on average, the frequency with which your program conducts construction site inspections on each site.

- F. Describe, on average, the frequency with which Certified Construction Reviewers (CCRs) conduct construction site inspections.

- G. Do you prioritize certain construction sites for more frequent inspections? Yes No

If Yes, based on what criteria? _____

H. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- | | | | |
|------------------------------|-----------------------|---------|---------------------------------------|
| <input type="checkbox"/> Yes | Notice of violation | # _____ | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Administrative fines | # _____ | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Stop Work Orders | # _____ | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Civil penalties | # _____ | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Criminal actions | # _____ | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Administrative orders | # _____ | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Other _____ | # _____ | |

I. Do you use an electronic tool (e.g., GIS, data base, spreadsheet) to track the locations, inspection results, and enforcement actions of active construction sites in your jurisdiction? Yes No

J. What are the 3 most common types of violations documented during this reporting period?

K. What are your criteria for determining which new/re-development stormwater plans you will review (e.g., all projects, projects disturbing greater than one acre, etc.) _____

L. Do you require water quality or quantity design standards or performance standards, either directly or by reference to a state or other standard, be met for new development and re-development? Yes No

- M. Do these performance or design standards require that pre-development hydrology be met for:
- | | | |
|----------------------|------------------------------|-----------------------------|
| Flow volumes | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Peak discharge rates | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Discharge frequency | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Flow duration | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

N. How many development and redevelopment project plans were reviewed during the reporting period to assess impacts to water quality and receiving stream protection? _____

O. How many of the plans identified were approved? _____

P. How often do municipal employees receive training on the construction program? _____

4. Post Construction Stormwater Management

- A. Other than the Delaware Sediment and Stormwater Regulations, do you have an ordinance or other regulatory mechanism for long-term operation and maintenance of stormwater management controls? Yes No
- B. Have you completed a GIS layer of all outfalls and receiving waters of your storm sewer system? Yes No
- C. Have you completed a GIS layer of all storm drain pipes and other conveyances in the storm sewer system? Yes No

- D. How many privately owned permanent stormwater practices/facilities exist within your jurisdiction? _____
- E. How many privately owned permanent stormwater management practices/facilities were inspected during the reporting period? _____
- F. What percentage of the practices/facilities identified in were found to have inadequate maintenance? _____
- G. How long do you give operators to remedy any operation and maintenance deficiencies identified during inspections?

- H. Do you have authority to take enforcement action for failure to properly operate and maintain stormwater practices/facilities? Yes No

5. Good Housekeeping

- A. Please list facility types in which stormwater pollution prevention plans (or an equivalent plan) have been developed:
- B. Are stormwater inspections conducted at these facilities?
- C. If Yes, at what frequency are inspections conducted? _____
- D. List activities for which operating procedures or management practices specific to stormwater management have been developed (e.g., road repairs, catch basin cleaning).
- E. Do you prioritize certain municipal activities and/or facilities for more frequent inspection? Yes No
- F. If Yes, which activities and/or facilities receive most frequent inspections? _____
- G. Do all municipal employees and contractors overseeing planning and implementation of stormwater-related activities receive comprehensive training on stormwater management?
- H. If yes, do you also provide regular updates and refreshers? Yes No
- I. If so, how frequently and/or under what circumstances? _____

Certification Statement and Signature

I certify that all information provided in this report is, to the best of my knowledge and belief, true, accurate and complete. Yes No

Federal regulations require this application to be signed as follows: **For a municipal, State, Federal, or other public facility:** by either a principal executive or ranking elected official.

Name of Certifying Official, Title

Date (mm/dd/yyyy)