

# 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:**

**County:** Marathon

**Municipality:** Rib Mountain, Town

**Facility Number:** 31053

**Reporting Year:** 2018

## 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 items as appropriate using the attachments tab above
  - a. Construction Site Pollution Control Annual Report Summary
  - b. Illicit Discharge Detection and Elimination Annual Report Summary
  - c. Leaf and Yard Waste Management
  - d. Municipal Cooperation Attachment
  - e. Municipal Facility Inspections
  - f. Pollution Prevention Annual Report Summary
  - g. Post-Construction Storm Water Management Annual Report Summary
  - h. Public Education and Outreach Annual Report Summary
  - i. Public Involvement and Participation Annual Report Summary
  - j. Storm Water Consortium/Group Report
  - k. Storm Sewer System Map Annual Report Attachment
  - l. Storm Water Quality Management Annual Report Attachment
  - m. TMDL Attachment
  - n. Winter Road Maintenance
  - o. Other Annual Report Attachment
- 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:** Rib Mountain, Town

**Facility ID # or (FIN):** 31053

**Updated Information:**  Check to update mailing address information

**Mailing Address:** 3700 North Mountain Rd.

**Mailing Address 2:**

**City:** Wausau

**State:** Wisconsin

**Zip Code:** 54401      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:** Scott

**Last Name:** Turner

Select to **update** current contact information

**Title:**

**Mailing Address:** 3700 North Mountain Road

**Mailing Address 2:**

**City:** Wausau

**State:** WI

**Zip Code:** 54401      xxxxx or xxxxx-xxxx

**Phone Number:** 715-848-5123      Ext:      xxx-xxx-xxxx

**Email:** sturner@townofribmountain.org

**Additional Contacts Information (Optional)**

- I&E Program
- IDDE Program
- IDDE Response Procedure Manual

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

- 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

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

**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).

<b>Topic:</b> Detection and elimination of illicit discharges			
<b>Mechanism</b>	<b>Quantity</b> (optional)	<b>Est. People Reached</b> (optional)	<b>Regional Effort?</b> (optional)
<u>Did not focus on this topic this reporting year</u>	<u>Select...</u>	<u>Select...</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

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

<b>Topic:</b> Management of materials that may cause storm water pollution from automobiles, pet waste, household hazardous waste and household practices			
<b>Mechanism</b>	<b>Quantity</b> (optional)	<b>Est. People Reached</b> (optional)	<b>Regional Effort?</b> (optional)
<u>Active distribution of print media (mailings, newsletters, etc)</u>	<u>100 +</u>	<u>100 +</u>	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable audiences targeted for this topic.

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

<b>Topic:</b> Beneficial onsite reuse of leaves and grass clippings/proper use of lawn and garden fertilizers and pesticides			
<b>Mechanism</b>	<b>Quantity</b> (optional)	<b>Est. People Reached</b> (optional)	<b>Regional Effort?</b> (optional)
<u>Active distribution of print media (mailings, newsletters, etc)</u>	<u>100 +</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

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

<b>Topic:</b> 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.

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

<b>Topic:</b> Infiltration of residential storm water runoff from rooftop downspouts, driveways and sidewalks			
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.

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

<b>Topic:</b> 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>Direct one-on-one communication</u>	<u>Select...</u>	<u>Select...</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

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

<b>Topic:</b> 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)
<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.

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

<b>Topic:</b> Promote environmentally sensitive land development designs by developers and designers, including green infrastructure and low impact development			
<b>Mechanism</b>	<b>Quantity</b> (optional)	<b>Est. People Reached</b> (optional)	<b>Regional Effort?</b> (optional)

Did not focus on this topic this reporting year  Select...  Select...  Yes  No

Select all applicable audiences targeted for this topic.

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

<b>Topic:</b> Other (describe): <input type="text"/>			
<b>Mechanism</b>	<b>Quantity</b> (optional)	<b>Est. People Reached</b> (optional)	<b>Regional Effort?</b> (optional)

Select...  Select...  Select...   Yes  No

Select all applicable audiences targeted for this topic.

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

**b.** Brief Public Education and Outreach program information for inclusion in the Annual Report. If your response exceeds the 200 character limit, attach supplemental information on the attachments page.

The Town works with other permitted communities in the North Central Wisconsin Storm water Coalition (NCWSC). Educational information is provided in the Town newsletter.

**Minimum Control Measures - Section 2 : Complete**

**2. Public Involvement and Participation**

**a.** 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

MS4 report is submitted to the Town Board. MS4 Report is also posted on the Town's website: [www.townofribmountain.org](http://www.townofribmountain.org)

Municipal Officials

Staff reports to the Town Board officials and provides updates on storm water activities.

Appropriate Staff ( such as operators, Department heads, and those that interact with public) Department heads also hold weekly meetings and discuss upcoming construction projects or other issues that may include storm water activities.

**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).

<b>Topic:</b> Storm Water Management Plan and/or updates			
<b>Mechanism</b>	<b>Quantity</b> (optional)	<b>Est. People Reached</b> (optional)	<b>Regional Effort?</b> (optional)
<u>Website</u>	<u>Select...</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable participants targeted for this topic.

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

<b>Topic:</b> Storm water related ordinance and/or updates			
<b>Mechanism</b>	<b>Quantity</b> (optional)	<b>Est. People Reached</b> (optional)	<b>Regional Effort?</b> (optional)
<u>Website</u>	<u>Select...</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Government Event (Public Hearing, Council Meeting, etc)</u>	<u>Select...</u>	<u>1 - 9</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable participants targeted for this topic.

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

<b>Topic:</b> MS4 Annual Report			
<b>Mechanism</b>	<b>Quantity</b> (optional)	<b>Est. People Reached</b> (optional)	<b>Regional Effort?</b> (optional)
<u>Government Event (Public Hearing, Council Meeting, etc)</u>	<u>Select...</u>	<u>1 - 9</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Website</u>	<u>Select...</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable participants targeted for this topic.

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

Topic: Volunteer Opportunities			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Clean-up events	Select...	100 +	<input checked="" type="radio"/> Yes <input type="radio"/> No

Select all applicable participants targeted for this topic.

- Agricultural 
  Contractors 
  General Public 
  Public Employees 
  Residential 
  School Groups  
 Business 
  Developers 
  Industries 
  Restaurants 
  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 .

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

c. Brief Public Involvement and Participation program information for inclusion in the Annual Report. If your response exceeds the 200 character limit, attach supplemental information on the attachments page.

Meetings are open to the public and agendas are posted in numerous locations in Central Wisco...

Form 3400-224 (09/17)

## 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   Unsure

municipality eliminate in the reporting year?

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

- |   |                                |
|---|--------------------------------|
| <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 checked="" type="checkbox"/> No Enforcement Action Taken       | <input type="text" value="0"/> |

Additional Information: \_\_\_\_\_

h. Brief Illicit Discharge Detection and Elimination program information for inclusion in the Annual Report. If your response exceeds the 200 character limit, attach supplemental information on the attachments page.

The appropriate staff and/or consultants enforces the Town's Stormwater Management Plan. All outfalls were field sampled and inspected. No complaints were received.

Form 3400-224 (09/17)

### Minimum Control Measures - Section 4 : Complete

#### 4. Construction Site Pollutant Control

- a. How many total construction sites were active at any point   Unsure in the reporting year?
- b. How many construction sites did the municipality issue   Unsure permits for in the reporting year?
- c. Do the above numbers include sites <1 acre?  Yes  No  Unsure
- d. How many erosion control inspections did the municipality   Unsure complete in the reporting year?

e. What types of enforcement actions does the municipality have available  Unsure to compel compliance with the regulatory mechanism? Check all that apply and enter the number of each used in the reporting year.

- |   |                                |
|---|--------------------------------|
| <input checked="" type="checkbox"/> Verbal Warning                    | <input type="text" value="6"/> |
| <input checked="" type="checkbox"/> Written Warning (including email) | <input type="text" value="2"/> |
| <input type="checkbox"/> Notice of Violation                          | <input type="text"/>           |
| <input type="checkbox"/> Civil Penalty/ Citation                      | <input type="text"/>           |
| <input type="checkbox"/> Stop Work Order                              | <input type="text"/>           |
| <input type="checkbox"/> Forfeiture of Deposit                        | <input type="text"/>           |
| <input type="checkbox"/> No Authority                                 | <input type="text"/>           |
| <input type="checkbox"/> Other - Describe below                       | <input type="text"/>           |

- f. Brief Construction Site Pollutant Control program information for inclusion in the Annual Report . If your response exceeds the 200 character limit, attach supplemental information on the attachments page.

The appropriate staff and/or consultants enforces the Town's Stormwater Management Plan. Review/Inspect potential sources on a regular basis during construction.

Form 3400-224 (09/17)

**Minimum Control Measures - Section 5 : Complete**

**5. Post-Construction Storm Water Management**

- a. How many new construction sites with new structural storm water management practices\* have received local approvals ?   Unsure

\*Structural practices, techniques or devices employed to avoid or minimize soil, sediment or pollutants carried in runoff to waters of the state (such as ponds, swales, infiltration basins, permeable pavement, catch basin sumps, etc.)

- b. How many privately owned storm water facility inspections were completed in the reporting year ?   Unsure

- 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 checked="" type="checkbox"/> | Verbal Warning                    | <input style="width: 90%; border: 1px solid black;" type="text" value="0"/> |
| <input checked="" type="checkbox"/> | Written Warning (including email) | <input style="width: 90%; border: 1px solid black;" type="text" value="0"/> |
| <input type="checkbox"/>            | Notice of Violation               | <input style="width: 90%; border: 1px solid black;" type="text"/>           |
| <input type="checkbox"/>            | Civil Penalty/ Citation           | <input style="width: 90%; border: 1px solid black;" type="text"/>           |
| <input checked="" type="checkbox"/> | Forfeiture of Deposit             | <input style="width: 90%; border: 1px solid black;" type="text" value="0"/> |
| <input type="checkbox"/>            | Complete Maintenance              | <input style="width: 90%; border: 1px solid black;" type="text"/>           |
| <input type="checkbox"/>            | Bill Responsible Party            | <input style="width: 90%; border: 1px solid black;" type="text"/>           |
| <input type="checkbox"/>            | No Authority                      | <input style="width: 90%; border: 1px solid black;" type="text"/>           |
| <input type="checkbox"/>            | Other - Describe below            | <input style="width: 90%; border: 1px solid black;" type="text"/>           |

- d. Brief Post-Construction Storm Water Management program information for inclusion in the Annual Report . If your response exceeds the 200 character limit, attach supplemental information on the attachments page.

Stormwater management facilities are still under construction. Summer 2019 completion.

Form 3400-224 (09/17)

**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 facilities?   Unsure
- b. How many new municipally owned storm water facilities were installed in the reporting year?   Unsure
- c. How many municipally owned storm water devices were inspected in the reporting year?   Unsure
- d. What elements are looked at during inspections (200 character limit)?

Debris/vegetation removal required, function of facility, outlet structure performance

- 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 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 Delivery by Property Owner to Yard Waste Site
- u. What is the frequency of collection?  
NA
- 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
<u>Salt/sand mix</u>	<input type="text" value="0"/>	<input type="text" value="200"/>	<input type="text" value="400"/>	<input type="text" value="400"/>	<input type="text" value="600"/>	<input type="text" value="200"/>

Liquids (gallons) (ex. brine)

	Oct	Nov	Dec	Jan	Feb	Mar
<u>Brine</u>	<input type="text" value="0"/>					

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

If yes, describe what training was provided (200 character limit):

When:  How many attended:

Internal (Staff) Education & Communication

- aa. Has training or education on SWPPPs for municipal facilities  Yes  No

been held for municipal or other personnel? Unsure

If yes, describe what training was provided (200 character limit):

When:

How many attended:

ab. Brief Pollution Prevention program information for inclusion in the Annual Report. If your response exceeds the 200 character limit, attach supplemental information on the attachments page.

Formal SWPPP training with staff is scheduled for Spring 2019. Salt use is minimized and is applied at a 4:1 sand/salt mixture.

Form 3400-224 (09/17)

## 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 200 character limit, attach supplemental information on the attachments page.

The Town continues to update the storm sewer system maps. Additional field work and verification is ongoing. Data has been collected from approximately 95% of the Town. Maps are now available.

**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.

<b>Annual Expenditure</b> Reporting Year	<b>Budget</b> Reporting Year	<b>Budget</b> Upcoming Year	<b>Source of Funds</b>
---	---------------------------------	--------------------------------	------------------------

**Element:** Public Education and Outreach

2500	2500	2500	<u>General revenue fund</u>
------	------	------	-----------------------------

**Element:** Public Involvement and Participation

500	0	0	<u>General revenue fund</u>
-----	---	---	-----------------------------

**Element:** Illicit Discharge Detection and Elimination

500	0	0	<u>General revenue fund</u>
-----	---	---	-----------------------------

**Element:** Construction Site Pollutant Control

1000	0	2500	<u>General revenue fund</u>
------	---	------	-----------------------------

**Element:** Post-Construction Storm Water Management

1000	0	0	<u>General revenue fund</u>
------	---	---	-----------------------------

**Element:** Pollution Prevention

500	0	0	<u>General revenue fund</u>
-----	---	---	-----------------------------

**Element:** Storm Water Quality Management

500	0	0	<u>General revenue fund</u>
-----	---	---	-----------------------------

**Element:** Storm Sewer System Map

2500	2500	2500	<u>General revenue fund</u>
------	------	------	-----------------------------

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

Specific elements are not budgeted. Estimated costs are included.

**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

### **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 200 character limit, attach supplemental information on the attachments page.

The Town continues to review storm water practices to improve water quality and improve inspection frequency and documentation.

**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
- 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

## 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 Documents

#### AR\_SWMapFIN

 File Attachment

[TownofRibMtn36X36StormSystemMaps\\_Mar2018.pdf](#)

#### AR\_IDDEFIN

 File Attachment

[IDDEOutfallMonitoring140802\\_tech\\_memoSummary.pdf](#)

#### AR\_MuniSWPPFFIN

 File Attachment

[TownofRibMountainPollutionPreventionPlanPublicWorksFacilityMarch2018.pdf](#)

#### AR\_MuniSWPPFFIN

 File Attachment

[TownofRibMountainPollutionPreventionPlanYardWasteSiteMarch2018.pdf](#)

#### AR\_SWMapFIN

 File Attachment

[2\\_109459003\\_Map2\\_LandUse\\_pdf.pdf](#)

#### AR\_SWMapFIN

 File Attachment

[2\\_209459003\\_Map5\\_ExistingBMPs\\_pdf.pdf](#)

#### AR\_SWQMFIN

 File Attachment

[2\\_2PondTableTownofRibMountainStormwaterQualityPlanReportFinal171222-3\\_pdf.pdf](#)

#### AR\_SWMapFIN

 File Attachment

[2\\_309459003\\_Map4\\_Swales\\_pdf.pdf](#)

#### AR\_MuniCoopFIN

 File Attachment

[NCWSCMOA2020-2026.pdf](#)

(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 [HERE](#).

### Terms and Conditions

**Certification:** I hereby certify that I am an authorized representative of the municipality covered under Rib Mountain, Town 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).

Authorized Signature.

Signed by : i:0#.f|wamsmembership|tturner1969 on 2019-03-26T13:23:00

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.