

**Phase II Municipal Separate Storm Sewer System (MS4)
Annual Report Form**

Cover Page

Part 1. General Information:

1. Permittee Name: City of Cordele
2. Mailing Address: 808 East 11th Avenue, Cordele, Georgia 31015
3. Contact Person: Steve Fulford, Public Works Director
4. E-Mail Address: stevefulford@cityofcordele.com
5. Telephone Number: 229-276-2981
6. Reporting Year (January 1–December 31): 2018

Part 2. Status of Storm Water Management Program:

1. Has your storm water management program to comply with the 2017 NPDES Permit been approved? Yes No
2. If yes, provide the approval date: August 6, 2018
3. If no, provide the date of the last submittal:

Part 3. Certification Statement:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature: 

Printed Name: Steve Fulford

Title: Public Works Director Date: Jan 25, 2019

Public Education and Outreach
Minimum Control Measure
(Table 4.2.1)

1. **BMP # 1**
2. **BMP Title:** Brochure Distribution
3. **Provide the measurable goal from SWMP:** Number of brochures distributed at meetings, presentation, City Hall, and similar public places on an annual basis.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Brochure distribution
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2**

2. **BMP Title: Municipal Website**

3. **Provide the measurable goal from SWMP:** A site counter will be used to monitor the number of visitors to the stormwater section specifically. The number of visitors to the page as of December 31st (or the last working day of the year) will be used for the total number. Counter can then be reset to 0 for the next reporting period. If the counter can not be reset, then the previous year's total count will be deducted from the count of the next reporting year's total for the adjusted total value.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No

B. If not, please explain why: [Click here to enter text.](#)

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: Website creation and updates

B. Date(s) for any BMP activities completed during this reporting period: 10/1/2018

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3**
2. **BMP Title:** Presentation on Stormwater Issues
3. **Provide the measurable goal from SWMP:** At least one presentation will be presented annually.
 - C. Did you comply with the measurable goal? Yes No
 - D. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - C. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - E. BMP activities completed during this reporting period: Presentation on the new SWMP
 - F. Date(s) for any BMP activities completed during this reporting period: 12/12/2018
 - G. Did you comply with the implementation schedule in the SWMP? Yes No
 - H. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - E. Do you consider this BMP to be effective? Yes No
 - F. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - G. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - H. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4**
2. **BMP Title:** Utility Bill Insert
3. **Provide the measurable goal from SWMP:** A brief message will be included on a City of Cordele Utility Bill at least once annually, but at the most monthly.
 - E. Did you comply with the measurable goal? Yes No
 - F. If not, explain why you did not comply with the measurable goal: No message was added to utility bills due to time constraints.
4. **Documentation**
 - E. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - F. If not, please explain why: No message was added to utility bills due to time constraints.
5. **Implementation Schedule**
 - I. BMP activities completed during this reporting period: Note attached to utility bills of every resident.
 - J. Date(s) for any BMP activities completed during this reporting period: 1/22/2019. City engineer was out November and December, 2018, with a broken hip; therefore, note was attached to bills in January, 2019, rather than the planned November or December.
 - K. Did you comply with the implementation schedule in the SWMP? Yes No
 - L. If not, please explain why: Note was attached to bills in January, 2019, due to reasons stated above.
6. **BMP Effectiveness**
 - I. Do you consider this BMP to be effective? Yes No
 - J. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - K. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - L. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Public Education BMPs contained in your SWMP. Permittees with a population greater than 10,000 at the time of this permit issuance must complete four (4) BMPs.

Public Involvement/ Participation
Minimum Control Measure
(Table 4.2.2)

1. **BMP # 1**
2. **BMP Title:** Stormwater Technical Advisory Committee (SWTAC)
3. **Provide the measurable goal from SWMP:** The SWTAC will meet annually, as needed, for both advisory and appeals.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: SWTAC Meeting
 - B. Date(s) for any BMP activities completed during this reporting period: 12/12/2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2**
2. **BMP Title:** Great American Cleanup
3. **Provide the measurable goal from SWMP:** Activities to allow for volunteer involvement, and a record of the activities undertaken, and man-hours contributed.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: The effects of Hurricane Michael on the area caused the event to be canceled for the 2018 season. Hazardous conditions prohibited the activity to occur.
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: Cleanup canceled due to Hurricane Michael.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: None.
 - B. Date(s) for any BMP activities completed during this reporting period: None
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: The effects of Hurricane Michael on the area caused the event to be canceled for the 2018 season. Hazardous conditions prohibited the activity to occur.
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it from the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3**
2. **BMP Title:** Rivers Alive
3. **Provide the measurable goal from SWMP:** Activities that allow for volunteer involvement, and a record of the activities undertaken, and man-hours contributed.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: The effects of Hurricane Michael on the area caused the event to be canceled for the 2018 season. Hazardous conditions prohibited the activity to occur.
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: Event canceled due to Hurricane Michael
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: None
 - B. Date(s) for any BMP activities completed during this reporting period: None
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: The effects of Hurricane Michael on the area caused the event to be canceled for the 2018 season. Hazardous conditions prohibited the activity to occur.
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it from the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4**
2. **BMP Title:** Gum Creek Bridge Cleanup
3. **Provide the measurable goal from SWMP:** Activities that allow for volunteer involvement, and a record of the activities undertaken, and man-hours contributed.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: The effects of Hurricane Michael on the area caused the event to be canceled for the 2018 season. Hazardous conditions prohibited the activity to occur.
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: The effects of Hurricane Michael on the area caused the event to be canceled for the 2018 season. Hazardous conditions prohibited the activity to occur.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: [Click here to enter text.](#)
 - B. Date(s) for any BMP activities completed during this reporting period: [Click here to enter text.](#)
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: The effects of Hurricane Michael on the area caused the event to be canceled for the 2018 season. Hazardous conditions prohibited the activity to occur.
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it from the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Public Involvement/Participation BMPs contained in your SWMP. Permittees with a population greater than 10,000 at the time of this permit issuance must complete four (4) BMPs.

Illicit Discharge Detection and Elimination
Minimum Control Measure
(Table 4.2.3)

1. **BMP # 1 (Table 4.2.3, BMP #1)**
2. **BMP Title: Legal Authority**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The City will adopt or revise its Ordinance and Regulation, and if necessary modify the ordinance during the reporting period. If the ordinance is revised during the reporting period, the City will submit a copy of the ordinance with the Annual Report.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Ordinance Status**
 - A. Did you adopt or revise the ordinance during the reporting period? Yes No
 - B. If yes, provide the date of adoption: [Click here to enter text.](#)
 - C. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes No
 - D. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Ordinance review
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it from the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2 (Table 4.2.3, BMP #2)**
2. **BMP Title: Outfall Map and Inventory**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will update the inventory and map showing any outfalls added during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Outfall Inventory**
 - A. Provide the number of outfalls added or deleted from the inventory during the reporting period:
Number added: 189
Number deleted: 0
 - B. Provide the total number of outfalls identified to date: 189
 - C. Is the outfall mapping completed? Yes No
 - D. If not, explain the reason why, and provide the status of the mapping: This is an ongoing process to correct a misunderstanding in the State's definition of an outfall. The actual number and definition of outfalls are still being studied.
 - E. If not, provide the projected completion date: [Click here to enter a date.](#)
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Review of the outfall map and revisions as needed
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

- A. Do you consider this BMP to be effective? Yes No
- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
- D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3 (Table 4.2.3, BMP #3)**
2. **BMP Title: IDDE Plan**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The City will conduct dry weather screening inspections so that 100% of the outfalls are inspected during the permit period, with a minimum of at least one annually. The City will document any illicit discharge found and perform any detection activities and enforcement actions taken to eliminate illicit discharges.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **IDDE Plan Status**

- A. Provide the number of outfalls inspected during the reporting period: 5
- B. What percentage of the total number of outfalls were inspected during the reporting period? 3%
- C. Provide the status of the outfall screening from 2018-2022:

Year	Total Number of Outfalls	Number of Outfalls Screened	% Screened
2018	189	5	3%
2019			
2020			
2021			
2022			

- D. Did you conduct any stream walks as part of your IDDE program? Yes No
 1. If yes, provide the total number of stream miles within your jurisdiction: [Click here to enter text.](#)
 2. Provide the number of stream miles walked during the reporting period: [Click here to enter text.](#)
 3. What percentage of the total number of stream miles were walked during the reporting period? [Click here to enter text.](#)
- E. Did you conduct stream walks for a reason other than IDDE? Yes No

1. If yes, explain the reason: [Click here to enter text.](#)

2. Provide the number of stream miles walked during the reporting period: [Click here to enter text.](#)

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No

B. If not, please explain why: [Click here to enter text.](#)

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: Dry weather screening

B. Date(s) for any BMP activities completed during this reporting period: 11/21/2018

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4 (Table 4.2.3, BMP #4)**
2. **BMP Title: Education**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will continue to implement a program to educate the public, businesses and government employees about the hazards of illicit discharges.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Presentation to Cordele Rotary Club on January 16, 2019. City engineer broke hip October 30, 2019, and was not able to return to work until January 3, 2019. Presentation, therefore, had to be delayed until January, 2019.
 - B. Date(s) for any BMP activities completed during this reporting period: 01/16/2019
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 5 (Table 4.2.3, BMP #5)**
2. **BMP Title: Complaint Response**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will document each illicit discharge related complaint received during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: No complaints were received during the reporting period.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: IDDE Documentation
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Illicit Discharge Detection and Elimination BMPs contained in your SWMP.

Construction Site Storm Water Runoff Control
Minimum Control Measure
(Table 4.2.4)

1. **BMP # 1 (Table 4.2.4, BMP #1)**
2. **BMP Title: Legal Authority**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The city will evaluate Erosion & Sediment Ordinance and if necessary modify during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Ordinance Status**
 - A. Is the construction waste requirement addressed in either your E&S or litter ordinance?
Yes No
 - B. If yes, which one? E&S
 - C. Did you adopt or revise the ordinance during the reporting period?
Yes No
 - D. If you are a Local Issuing Authority, you must revise your E&S Ordinance to comply with the latest revisions to the E&S Act (2015). The ordinance revision was to be completed by December 31, 2016. Have you completed the ordinance revisions?
Yes No
 - E. If yes, provide the date of adoption: 2016 / revised 2017
 - F. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes No
 - G. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Ordinance review
 - B. Date(s) for any BMP activities completed during this reporting period: 2018

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

6. BMP Effectiveness

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2 (Table 4.2.4, BMP #2)**
2. **BMP Title: Site Plan Review Procedures**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The city will review all site plans submitted for a Land Disturbing Activity permit for sites with disturbed area of 1.0 acre or greater.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Site Plan Review Status**
 - A. Are you a Local Issuing Authority? Yes No
 1. If yes, provide the following information for the reporting period:
 - Number of plans received: 6
 - Number of plans reviewed: 6
 - Number of plans approved: 6
 - Number of plans denied: 0
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Site Plan reviews
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
7. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No

- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
- D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3 (Table 4.2.4, BMP #3)**
2. **BMP Title: Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The city will inspect each construction site a minimum of three times: following installation of initial BMP's, during active construction, and after final stabilization.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Site inspections
 - B. Date(s) for any BMP activities completed during this reporting period: 2018 (see documentation)
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4 (Table 4.2.4, BMP #4)**
2. **BMP Title: Enforcement Procedures**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The city will respond and document the numbers of violations during the reporting period.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: There were no violations
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Permit enforcement
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 5 (Table 4.2.4, BMP #5)**
2. **BMP Title: Complaint Response**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will respond and document all of the E&S complaints received during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: There were no complaints reported in 2018
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Response to complaints
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 6 (Table 4.2.4, BMP #6)**
2. **BMP Title: Certification**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will ensure that the MS4 staff involved in construction activities are trained and certified in accordance with the rules adopted by the Georgia Soil and Water Conservation Commission.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Staff certifications.
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Construction Site Management BMPs contained in your SWMP.

Post- Construction Storm Water Management
in New Development and Redevelopment
Minimum Control Measure
(Table 4.2.5)

1. **BMP # 1 (Table 4.2.5, BMP #1)**
2. **BMP Title: Legal Authority**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The City will evaluate the existing stormwater ordinance, and if necessary, modify the ordinance during the reporting period.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Ordinance Status**
 - A. Did you adopt or revise the ordinance during the reporting period? Yes No
 - B. If yes, provide the date of adoption: [Click here to enter text.](#)
 - C. Does the ordinance require development in accordance with the Georgia Stormwater Management Manual (GSMM), a local design manual, and/or the Coastal Stormwater Supplement? Yes No
 - D. Does the ordinance adopt the performance standards in the 2016 GSMM?
Yes No
 - E. The adoption of the performance standards in the 2016 GSMM was required by January 2, 2017. If the adoption has not occurred by this deadline date, explain why and provide the projected completion date: [Click here to enter text.](#)
 - F. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes No
 - G. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Ordinance review
 - B. Date(s) for any BMP activities completed during this reporting period: 2018

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

6. BMP Effectiveness

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2 (Table 4.2.5, BMP #2)**
2. **BMP Title: Inventory**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The City will update the inventory to include structures added during the reporting period.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Inventory Status**
 - A. Provide information on the number of structures inventoried during the reporting period:
 1. Number of publicly-owned post-construction structures added: 0
 2. Number of privately-owned post-construction structures added: 0
 - B. Provide information on the number of structures identified to date:
 1. Total number of publicly-owned post-construction structures: 7
 2. Total number of privately-owned post-construction structures: 28
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Inventory Review / Update
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
7. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No

- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
- D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3 (Table 4.2.5, BMP #3)**
2. **BMP Title: Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: Inspect all post construction structures during the 5-year permit period, but not less than one annually.**

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. Provide the status of inspections performed between 2018-2022:

Publicly-Owned Post-Construction Structures

Year	Total Number Post Construction Structures	Number Post Construction Structures Inspected	% Inspected
2018	28	0	0%
2019			
2020			
2021			
2022			

Privately-Owned Post-Construction Structures

Year	Total Number Post Construction Structures	Number Post Construction Structures Inspected	% Inspected
2018	7	6	86%
2019			
2020			
2021			
2022			

5. Documentation
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No

B. If not, please explain why: [Click here to enter text.](#)

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: Pond inspections

B. Date(s) for any BMP activities completed during this reporting period: 10/22/2018

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4 (Table 4.2.5, BMP #4)**
2. **BMP Title: Maintenance Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The City will document maintenance, as needed, on both public and private ponds to ensure proper function during the reporting period.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period?:
 1. Maintenance of permittee-owned structures: Yes No
 2. Maintenance conducted by permittee on privately-owned structures or publicly-owned by other entities: Yes No NA
 3. Summary list of maintenance agreements: Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Pond maintenance
 - B. Date(s) for any BMP activities completed during this reporting period: 2018 (see documentation for specific dates)
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 5 (Table 4.2.5, BMP #5)**
2. **BMP Title: GI/LID Structure Inventory**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will document each GI/LID structure constructed during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: No structures were built during the reporting period.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: None
 - B. Date(s) for any BMP activities completed during this reporting period: N/A
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 6 (Table 4.2.5, BMP #6)**
2. **BMP Title: GI/LID Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will evaluate the ordinance to ensure they allow the use of GI/LID practices.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Program Development**
 - A. Has the GI/LID Program development been completed? Yes No

Note: For existing permittees, the deadline is February 15, 2020. For new permittees, the deadline is within 3 years of designation.
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: No changes were made to the ordinance.
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Ordinance review.
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
7. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 7 (Table 4.2.5, BMP #7)**
2. **BMP Title: GI/LID Inspection and Maintenance Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will inspect all City maintained GI/LID Structures that have been constructed so that 100% are inspected within the 5-year permit period, but no less than one annually, if any structures exist.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: As of December 31, 2018, there are no GI/LID Structures in the City.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: None
 - B. Date(s) for any BMP activities completed during this reporting period: N/A
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

GI/LID Ordinance Review (Section 4.2.5.3)

(Only complete this section if the MS4 population >10,000 on December 6, 2017)

1. You are required to continue to review and revise, where necessary, building codes, ordinances, and other regulations to ensure they do not prohibit or impede the use of GI/LID practices. Was an evaluation of the MS4's ordinances, codes, and regulations conducted during the reporting period? Yes No
2. If an evaluation was completed during the reporting period, is documentation of the activity attached to this annual report? Yes No NA
3. Based on the results of the evaluation, did the MS4 determine that revisions to the ordinances, codes, and regulations were necessary? Yes No NA
4. If revisions to the document(s) were required, provide the name of the document(s) and the date(s) of adoption: Click here to enter text.
5. If revisions have not yet been completed, provide the status of the document revisions and a projected completion date: Click here to enter text.

Pollution Prevention/ Good Housekeeping
for Municipal Operations
Minimum Control Measure
(Table 4.2.6)

1. **BMP # 1 (Table 4.2.6, BMP #1)**
2. **BMP Title: MS4 Control Structure Inventory and Map**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will update the inventory as new structures are added during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Inventory and Map Status**
 - A. Provide the number of structures inventoried and mapped during the reporting period:
 1. Number of catch basins added: 0
 2. Number of ditches added (state if miles or linear feet): 0
 3. Number of publicly-owned detention/retention ponds added: 0
 4. Number of storm drain lines added (state if miles or linear feet): 700 LF
 - B. Provide the number of structures inventoried and mapped to date:
 1. Total number of catch basins: 1940
 2. Total number of ditches (state if miles or linear feet): 23.35 mi
 3. Total number of publicly-owned detention/retention ponds: 7
 4. Total number of storm drain lines (state if miles or linear feet): 87.5 mi
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Ongoing update of inventory
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

7. BMP Effectiveness

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

DOCUMENTATION MCM F1:

Located inside folder / directory "F1" of the accompanying digital documentation CD:

- F1 - Structure Inventory.pdf
- F1 - Storm System Map.pdf

1. **BMP # 2 (Table 4.2.6, BMP #2)**
2. **BMP Title: MS4 Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will inspect 100% of the MS4 control structures during the 5-year permit period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. Provide the status of inspections performed between 2018-2022:

Catch Basins

Year	Total Number Catch Basins	Number Catch Basins Inspected	% Inspected
2018	1940	716	37%
2019			
2020			
2021			
2022			

Pipes

Year	Total Pipes Number or Length (specify ft. or miles)	Number of Pipes or Length Inspected (specify ft. or miles)	% Inspected
2018	87.5 mi	5.98 mi	7%
2019			
2020			
2021			
2022			

Ditches

Year	Total Ditches Number or Length (specify ft. or miles)	Number of Ditches or Length Inspected (specify ft. or miles)	% Inspected
2018	23.35 mi	15 mi *(est)*	65%
2019			
2020			
2021			
2022			

Publicly-Owned Detention/Retention Ponds

Year	Total Number Structures	Number Structures Inspected	% Inspected
2018	7	7	100%
2019			
2020			
2021			
2022			

5. Documentation

- A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
- B. If not, please explain why: Ditch lengths inspected were not properly documented during the reporting period, and figure is an estimate. Staff will be advised to ensure better recording of lengths inspected.

6. Implementation Schedule

- A. BMP activities completed during this reporting period: System inspection
- B. Date(s) for any BMP activities completed during this reporting period: 2018
- C. Did you comply with the implementation schedule in the SWMP? Yes No
- D. If not, please explain why: [Click here to enter text.](#)

7. BMP Effectiveness

- A. Do you consider this BMP to be effective? Yes No
- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
- D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3 (Table 4.2.6, BMP #3)**
2. **BMP Title: MS4 Maintenance Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will perform maintenance, as needed, on MS4 control structures and document activities during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: Click here to enter text.
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: Click here to enter text.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: MS4 system maintenance.
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: Click here to enter text.
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: Click here to enter text.

1. **BMP # 4 (Table 4.2.6, BMP #4)**
2. **BMP Title: Street and Parking Lot Cleaning**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The City will sweep at a minimum 300 miles of streets during the reporting period. The City will track the final disposal location and the amount of debris disposed. This information will be reported in the Annual Report.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Street Sweeping activities
 - B. Date(s) for any BMP activities completed during this reporting period: See documentation
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 5 (Table 4.2.6, BMP #5)**
2. **BMP Title: Employee Training**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will provide at least one educational opportunity to City employees within the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Presentation to employees regarding the new 2017-2022 SWMP
 - B. Date(s) for any BMP activities completed during this reporting period: 12/12/2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 6 (Table 4.2.6, BMP #6)**
2. **BMP Title: Waste Disposal**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will follow the “Waste Disposal Procedures” when debris is removed from the MS4 during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Debris and Waste disposal from MS4
 - B. Date(s) for any BMP activities completed during this reporting period: 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 7 (Table 4.2.6, BMP #7)**
2. **BMP Title: New Flood Management Projects**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will document the plans reviewed where flood management projects were considered for water quality during the reporting period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: No flood management projects were reviewed.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: none
 - B. Date(s) for any BMP activities completed during this reporting period: N/A
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 8 (Table 4.2.6, BMP #8)**
2. **BMP Title: Existing Flood Management Projects**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will assess 100% of the existing publicly-owned flood management projects during the 5-year permit period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: There are no active flood management projects in place.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: None
 - B. Date(s) for any BMP activities completed during this reporting period: N/A
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 9 (Table 4.2.6, BMP #9)**
2. **BMP Title: Municipal Facilities**
3. **Provide the measurable goal from the Permit and/or approved SWMP: The City will inspect all facilities within the 5-year period.**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Inventory and Inspection**
 - A. Inventory
 1. Was an inventory of municipal facilities with the potential to cause pollution updated during the reporting period? Yes No
 2. A copy of the inventory must be submitted with the annual report. Is the inventory attached? Yes No
 3. If the inventory is not attached, explain why: [Click here to enter text.](#)
 - B. Inspection
 1. Provide the total number of municipal facilities on the inventory: 5
 2. Provide the number of municipal facilities inspected during the reporting period: 0
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: No facilities were inspected during 2018.
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: None
 - B. Date(s) for any BMP activities completed during this reporting period: N/A
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
7. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Pollution Prevention/Good Housekeeping BMPs contained in your SWMP.

Enforcement Response Plan
Section 4.3

1. You were required to develop an Enforcement Response Plan (ERP) and submit the document to EPD. Have you completed ERP development? Yes No
2. If yes, provide the date of submittal to EPD: 11/12/2015
3. If no, explain the reason for the delay and provide the status of the ERP development: [Click here to enter text.](#)

Impaired Waters
Section 4.4

1. You are required to develop either an Impaired Waters Plan (population <10,000) or a Monitoring and Implementation Plan (population >10,000). Check which one you are required to develop:

 Impaired Waters Plan
 Monitoring and Implementation Plan

2. For existing permittees, you were required to submit the relevant Plan to EPD by February 15, 2015. For new permittees (designated on March 7, 2014), you were required to submit the relevant Plan by February 15, 2018. Have you completed development of the Plan?
Yes No

3. If yes, provide the date of submittal to EPD: 6/29/2016

4. If no, provide the status of the Plan development: [Click here to enter text.](#)

5. You are required to check the latest 305(b)/303(d) list to determine if newly listed waters are within your jurisdiction. Have you reviewed this list? Yes No

6. If newly listed waters have been identified, you must revise your Plan. If a Plan revision is required, provide the status and the projected date for submittal to EPD: [Click here to enter text.](#)

Sharing Responsibility
Section 4.5

1. Are you sharing responsibility for implementation of any part of the SWMP with another entity? Yes No
2. If yes, provide the name of the entity: [Click here to enter text.](#)
3. Are you performing tasks for another entity? Yes No
4. Is another entity is performing tasks on your behalf? Yes No
5. If you answered “Yes” to either question #3 or #4, describe what tasks are being performed by which entity: [Click here to enter text.](#)
6. You must provide a copy of a signed intergovernmental agreement. Was an agreement included with the SWMP? Yes No