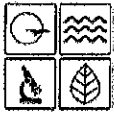


NOTICE

The Stormwater Division of Jefferson County, Missouri will have available for view and or comment the biennial MS4 Water quality report. The report is available for review from January 1, 2021 to February 1, 2021 on Jefferson County website: [www. Jeffcomo.org](http://www.Jeffcomo.org) or by email stormwater@jeffcomo.org. The biennial reporting period is from January 1, 2019 to December 31, 2020.

Jefferson County Stormwater
Division, PO Box 100,
Hillsboro, MO 63050
Attn: Biennial Report



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM
**MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4)
STORMWATER MANAGEMENT PLAN REPORT**

FOR OFFICE USE ONLY

PROJECT ID NUMBER

DATE RECEIVED

Part A – MS4 PERMIT HOLDER INFORMATION

1. MS4 NAME Jefferson County, Missouri	2. NPDES PERMIT NUMBER Mo-R040052	3. MS4 UNIQUE ID NO.	
4. ADDRESS P.O.Box 100	5. CITY Hillsboro	6. STATE Mo	7. ZIP CODE 63050
8. TELEPHONE NUMBER WITH AREA CODE 636-797-6228	9. EMAIL mcook@jeffcomo.org		
10. NAME OF MS4 CONTACT PERSON Michael Cook			

11. Have any areas of the MS4 been added or removed from the MS4 jurisdiction due to annexation or other legal means since the most recent permit application (renewal, new, modification), or most recent MS4 stormwater management plan report?

Yes No

If yes, please include a map along with a brief description as an attachment.

Part B – REPORTING PERIOD

1. Is your MS4 subject to a TMDL?

Yes No

If yes, you are required to submit the MS4 report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be June 13, 2016, and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.

2. Is your MS4 new permitted (i.e., is this your first MS4 permit)?

Yes No

If yes, you are required to submit the MS4 stormwater management plan report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be the date of issuance of the permit and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.

3. Is your MS4 a previously permitted MS4 and not subject to a TMDL?

Yes No

If yes, you are required to submit the MS4 stormwater management plan report biennially (i.e., once every two years). Reports are due Feb. 28 every odd year. The first report will be due February 2017, and will cover the reporting period from June 13, 2016, to Dec. 31, 2016. All other reports shall cover the reporting period of Jan. 1 of the first year to Dec. 31 of the second year.

4. If you are part of a co-permitted MS4 permit, submit combined MS4 stormwater management plan reports, and one or more of the co-permitted MS4s have annual reporting based on the above criteria, then submit your MS4 stormwater management plan report annually by Feb. 28 of each year.

If you are part of a co-permitted MS4 permit and do not submit combined MS4 stormwater management plan report, then each MS4 co-permittee will submit their MS4 stormwater management plan report based on the above criteria.

5. Reporting Period:

BEGINNING: January 1st 2019

ENDING: December 31st 2020

Part C – STORMWATER MANAGEMENT PLAN REPORT PROGRESS AND COMPLIANCE

As an attachment, please provide information for each of the items below. Provide informative data, success stories, and experiences that support the successful implementation of your stormwater management plan report.

1. Describe the status of compliance with permit conditions for the permitted MS4.
2. Provide information regarding the progress toward achieving the statutory goal of reducing the discharge of pollutants to the maximum extent practicable to the MS4.
3. If another governmental entity implements any best management practice or minimum control measure, please provide the following:
 - a. Name of the government entity;
 - b. Name of the primary contact for the government entity;
 - c. Contact information (i.e., address, city, ZIP code, state, and phone number); and
 - d. Specific best management practices or minimum control measures being implemented by the government entity.

It is the responsibility of the permittee to provide all information under this report regardless if best management practices or minimum control measures are being implemented by another governmental entity. If a complete minimum control measure is being implemented by an alternative governmental entity, then only indicate the best management practice under the minimum control measure.

4. Provide a summary of any stormwater activities and known construction activities that will be covered under the authority of the MS4 permit that are scheduled to begin during the next reporting period.
5. Provide a description of any changes to the stormwater management plan report, best management practices, measurable goals, and the iterative process that have occurred during the covered reporting period.
6. Provide a list of best management practices that were evaluated during the covered reporting period, and provide information on how the best management practice was determined effective.
 - a. If any of the best management practices were determined to be ineffective, provide a summary on how the ineffective best management practice was resolved.
7. If any water samples were collected and analyzed during the covered reporting period by the permitted MS4 or on behalf of the permitted MS4, please complete Part D – Water Sample(s) Analysis.

Part D – WATER SAMPLE(S) ANALYSIS

PARAMETER OR INDICATOR	FREQUENCY	RESULT	DRY WEATHER SAMPLE?	WET WEATHER SAMPLE?
See attached tables			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

1. Are any of the parameters being sampled due to the MS4 being subject to an established or approved Total Maximum Daily Load?
 Yes No

If yes, please indicate the parameter/pollutant.

2. Does the data support water quality attainment or support trend data toward water quality attainment?

Yes No

If yes, please describe.

Part E – TOTAL MAXIMUM DAILY LOAD (TMDL) ASSUMPTIONS AND REQUIREMENTS ATTAINMENT PLAN

1. Is your MS4 subject to an established or approved TMDL? If no, please indicate "No" below and do not complete any other portion of the TMDL Assumptions and Requirements Attainment Plan portion of this report.

Yes No

2. Has your TMDL Assumptions and Requirements Attainment Plan been completed and submitted? If no, please provide a summary as an attachment on the progress toward submitting and implementing the TMDL Assumptions and Requirements Attainment Plan.

Yes No

3. Has your TMDL Assumptions and Requirements Attainment Plan received approval from the department? If yes, please provided a summary of the status of the plan and include implementation status of identified best management practices and measurable goals along with any changes to best management practices or measurable goals (if applicable)..

Yes No

4. Does the TMDL Assumptions and Requirements Attainment Plan incorporate Integrated Planning? If yes, please provide a summary of the status of the Integrated Plan.

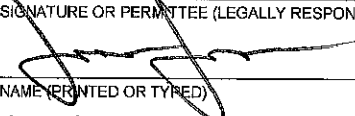
Yes No

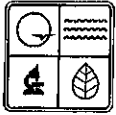
PART F – SUBMIT REPORT TO:

Missouri Department of Natural Resources
Water Protection Program
MS4 Program Coordinator
P.O. Box 176
Jefferson City, MO 65102-0176

PART G - CERTIFICATION

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 OR PERMITTEE (LEGALLY RESPONSIBLE PERSON)	DATE SIGNED
	12/29/2020
NAME (PRINTED OR TYPED)	TITLE
Jason Jonas	Director of Public Works



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM

STORM WATER ANNUAL REPORT – SMALL MS4 PERMITS ADDENDUM - WATER QUALITY PROGRAM ASSESSMENT (MUNICIPAL SEPARATE STORM SEWER SYSTEMS)

INSTRUCTIONS

You are not required to complete this ADDENDUM. However, the Department of Natural Resources strongly recommends this form as a way to satisfy Section 2b of the Small MS4 Annual Report, or at a minimum thoroughly address the items included in this addendum.

The purpose of this report is to contribute information to an evaluation of the National Pollutant Discharge Elimination System, or NPDES, small municipal separate storm sewer system (MS4) permit program. Consistent with Missouri storm water regulations 10 CSR 20-6.200 and federal regulations 40 CFR §9, 122, 123, 124 the Department is evaluating the status of your program. A "no" answer to a question does not necessarily mean noncompliance with your permit or with the state and federal regulations. In order to establish the range of variability in the program, it is necessary to ask questions along a fairly broad performance continuum. The Department of Natural Resources may use some of this information as one component of compliance evaluation.

A. WATER QUALITY PRIORITIES

1. Does your MS4 discharge to waters listed as Impaired on Missouri's most recently approved 303(d) list or to waters for which a TMDL has been approved by EPA and is currently in effect? For more information visit www.dnr.mo.gov/env/wpp/waterquality/303d.htm.
 Yes No

2. If yes, identify each impaired water, the impairment(s), whether a TMDL has been approved by EPA for each, and whether the TMDL identifies your MS4 as a source of the impairment.

Impaired Water	Impairment	Approved TMDL		MS4 Assigned to WLA	
N/A		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

3. What specific sources of these pollutants of concern are you targeting? Turbidity

4. Do you have discharges to any Wild and Scenic Riverways, drainages thereto, or Outstanding State Resource Waters? (a list of these waters can be found in 10 CSR 20-7.031 tables D and E).
 Yes No

5. Are you implementing additional specific provisions to ensure their continued integrity?
 Yes No

B. PUBLIC EDUCATION AND PUBLIC PARTICIPATION

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

2. If yes, which of the following pollutants did your public education program target this reporting period?

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Suspended Solids | <input checked="" type="checkbox"/> Pesticides | <input type="checkbox"/> Temperature |
| <input checked="" type="checkbox"/> Nutrients/Fertilizers | <input checked="" type="checkbox"/> Oils and Greases | <input checked="" type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Chlorides | <input type="checkbox"/> Polycyclic Aromatic Hydrocarbons (PAHs) | |

3. What sources of pollution did you target for these pollutants (for education) this reporting period? Turbidity

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

Illicit discharge reduction in suspended solids, pesticides, oil and greases.

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

C. CONSTRUCTION

1. Do you have an ordinance or adopted policies stipulating:

- a. Erosion and sediment control requirements?
 Yes No
- b. Other construction waste control requirements?
 Yes No
- c. Requirement to submit construction plans for review?
 Yes No
- d. MS4 inspection authority?
 Yes No
- e. MS4 enforcement authority?
 Yes No

C. CONSTRUCTION (CONTINUED)

2. Do you have written procedures for:
- a. Reviewing construction plans that include erosion and sediment control? Yes No
 - b. Performing erosion and sediment control inspections? Yes No
 - c. Responding to erosion and sediment control violations? Yes No

3. Identify the number of active construction sites ≥ 1 acre in operation in your jurisdiction at any time during the reporting period.
 Non-municipal 70 Municipal

4. How many of the sites identified in # 3 did you inspect this reporting period?
 Non-municipal 70 Municipal

5. Describe, on average, the frequency with which your program conducts construction site inspections.
 Non-municipal Bi-monthly Municipal

6. Do you prioritize certain construction sites for more frequent inspections? Yes No
 If Yes, based on what criteria? Priority system that ranks any activity in waterways and stream buffers.

7. Do you require development of a storm water pollution prevention plan, or SWPPP, for construction activities, and ensure standards comply with NPDES Phase II requirements?
 Yes No

8. Do your municipal projects comply with state and local requirements for erosion and sediment control?
 Yes No

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

<input checked="" type="checkbox"/> Yes	Notice of Violation	# <u>380</u>	No Authority <input type="checkbox"/>
<input type="checkbox"/> Yes	Administrative Fines	# <u>0</u>	No Authority <input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Yes	Stop Work Orders	# <u>12</u>	No Authority <input type="checkbox"/>
<input checked="" type="checkbox"/> Yes	Civil Penalties	# <u>4</u>	No Authority <input type="checkbox"/>
<input type="checkbox"/> Yes	Criminal Actions	# <u>0</u>	No Authority <input checked="" type="checkbox"/>
<input type="checkbox"/> Yes	Administrative Orders	# <u>0</u>	No Authority <input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Yes	Other <u>Mun Court</u>	# <u>4</u>	

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

11. What are the three most common types of violations documented during this reporting period?

- a. Illicit Discharge
- b. BMP Failure
- c. Dump/Fill sites

12. How often do municipal employees receive training about the construction program? Yearly

D. ILLICIT DISCHARGE ELIMINATION

1. Have you completed a map of all outfalls and receiving waters of your storm sewer system?
 Yes No

2. Have you completed a map of all storm drain pipes of your storm sewer system?
 Yes No

3. Identify the number of outfalls in your storm sewer system. 1050

4. Do you have documented procedures, including frequency, for screening outfalls and open conveyances?
 Yes No

5. Of the outfalls identified in # 3, how many have been screened for dry weather discharges at any time since you obtained MS4 permit coverage? 1050

6. What is your frequency for screening outfalls for illicit discharges?
 a. Describe any variation based on size/type. All complaint driven illicit discharges are screened, SWMP requires 20% per year.

7. Describe your approach to screening open conveyances for illicit discharges. Post construction yearly. During construction bi-monthly

8. Do you have an ordinance or other regulatory mechanism that effectively prohibits illicit discharges?
 Yes No

9. Do you have an ordinance or other regulatory mechanism that provides authority for you to take enforcement action or recover costs for addressing illicit discharges?
 Yes No

D. ILLICIT DISCHARGE ELIMINATION (CONTINUED)

10. During this reporting period, how many illicit discharges or illegal connections have you discovered? 125

11. Of those illicit discharges and illegal connections discovered or reported, how many have been eliminated? 125

12. How often do municipal employees receive training about the illicit discharge program? Yearly by the county

E. STORM WATER MANAGEMENT FOR MUNICIPAL OPERATIONS

1. Have storm water pollution prevention plans (or an equivalent plan) been developed for:

- a. All public parks, ball fields, other recreational facilities and other open spaces.
 Yes No
- b. All municipal construction activities, including those disturbing less than 1 acre.
 Yes No
- c. All municipal turf grass/landscape management activities.
 Yes No
- d. All municipal vehicle fueling, operation and maintenance activities.
 Yes No
- e. All public works, parks and other municipal maintenance yards.
 Yes No
- f. All municipal waste handling and disposal areas.
 Yes No
- g. Other municipal operations.
 Yes No

2. Are storm water inspections conducted at these facilities?

 Yes No

3. If Yes, at what frequency are inspections conducted? Semi annual

4. List activities for which operating procedures or management practices specific to storm water management have been developed? (such as road repairs, catch basin cleaning, landscape management, etc.)

 Yes No

Projects that have runoff, trash, inspection of vehicles on a monthly basis, winter operations.

5. Do you prioritize certain municipal activities or facilities for more frequent inspections?

 Yes No

a. If Yes, at what frequency are inspections conducted? Highway Division operations on a quarterly basis

6. On average, how frequently are catch basins and other inline treatment systems inspected? quarterly

7. Do all municipal employees overseeing planning and implementation of storm water-related activities receive comprehensive training about storm water management?

 Yes No

8. If yes, do you also provide regular updates and refreshers?

 Yes No

a. If so, how frequently or under what circumstances? Monthly field meetings

9. How often do other municipal employees and contractors performing duties that can impact storm water receive training about storm water management?

F. NEW AND REDEVELOPMENT (POST-CONSTRUCTION) STORM WATER MEASURES

1. Do you have ordinances or other mechanisms to require:

- a. Pre-site design meetings with developers?
 Yes No
- b. Site plan reviews for storm water quality of all new and re-development projects of an acre or more?
 Yes No
- c. Reasonable mimicking of pre-construction storm water runoff quality in all new development projects of an acre or more?
 Yes No
- d. An incremental improvement of existing storm water runoff quality in redevelopment projects of an acre or more?
 Yes No
- e. Long-term operation and maintenance of storm water management controls?
 Yes No
- f. Retrofitting to incorporate long-term storm water management controls?
 Yes No

2. If you have retrofit requirements, what are the circumstances or criteria? Stormwater discharge into waterways. Swales are the main requirement

3. What are your criteria for determining which new/re-development storm water plans you will review for water quality? (such as all projects, projects disturbing greater than one acre, etc.) All projects over an acre in the urbanized area are reviewed. Any project that involves stream buffers or waterways also

4. Do your ordinance(s) or other regulatory mechanism(s) allow for:

- a. Non-structural site design options to allow for optimal water quality management in long-term storm water runoff? (such as minimized/disconnected impervious surfaces, cluster housing in exchange for green space, resource protection boundaries, etc.)
 Yes No
- b. Structural contemporary, dispersed micro-infiltration/filtration practices such as grassed swales, sand filters, neighborhood roundabouts with rain gardens, etc.?
 Yes No

F. NEW AND REDEVELOPMENT (POST-CONSTRUCTION) STORM WATER MEASURES (CONTINUED)

5. Do you require water quality design standards or performance standards, either directly or by reference, be met for new development and re-development?
 Yes No

6. Do these design standards/performance measures require pre-construction runoff conditions in new development be met for:

a. Flow volumes.

Yes No

b. Peak discharge rates.

Yes No

c. Discharge frequency.

Yes No

d. Flow duration.

Yes No

e. Water quality.

Yes No

7. Please provide the Web address/reference where all post-construction storm water management standards are located.

8. Do your zoning bylaws, ordinances or other regulatory processes allow or enable:

a. Flexible site design criteria such as smaller lot sizes, reduced setbacks and narrow streets in exchange for functional green space and optimal water quality management in storm water runoff.

Yes No

b. Established regulatory controls over tree clearance and removal of mature trees or forest stands?

Yes No

c. Green space residential developments (cluster development or conservation subdivision design)?

Yes No

d. The location of bioretention areas, rain gardens, filters strips, swales and constructed wetlands in required setback areas?

Yes No

e. Construction of low impact development, or LID, storm water management techniques (bioretention, swales, filter strips) on land held in common (when appropriate)?

Yes No

f. Use of permeable paving for parking stalls and spillover parking areas?

Yes No

g. Limited clearing within the right-of-way to the minimum necessary to construct roadway, drainage, sidewalk and utilities, and to maintain site lines?

Yes No

9. Does your review and approval process include using a water quality checklist?

Yes No

10. If yes to # 9, please check all of the following checklist items that apply:

a. Existing and proposed mapping and plans (recommended scale of 1" = 50'.) which illustrate:

1. Existing and proposed topography (minimum of 2-foot contours recommended).

Yes No

2. Compatibility with watershed plans, land use plans, comprehensive plans, (contemporary street standards) etc.

Yes No

3. Perennial and Intermittent streams.

Yes No

4. Mapping of predominant soils from USDA soil surveys as well as location of any site-specific borehole investigations that may have been performed.

Yes No

5. Boundaries of existing predominant vegetation and proposed limits of clearing.

Yes No

6. Location and boundaries of resource protection areas such as wetlands, lakes, ponds and other setbacks (e.g., stream buffers, drinking water well setbacks, septic setbacks).

Yes No

7. Grading plan with location of existing and proposed roads, buildings and other structures.

Yes No

8. Location of existing and proposed utilities (e.g., water, sewer, gas, electric) and easements.

Yes No

9. Location of existing and proposed conveyance systems such as grass channels, swales and storm drains.

Yes No

10. Flow paths.

Yes No

11. Location of floodplain/floodway limits and relationship of site to upstream and downstream properties and drainages.

Yes No

12. Location and dimensions of proposed channel modifications, such as bridge or culvert crossings.

Yes No

13. Location, size, maintenance access and limits of disturbance of proposed structural storm water management practices.

Yes No

F. NEW AND REDEVELOPMENT (POST-CONSTRUCTION) STORM WATER MEASURES (CONTINUED)

14. Location of proposed community recreation/green space areas.

Yes No

15. Functional landscape plan.

Yes No

b. Narrative and supporting calculations describing:

1. Representative low-impact development techniques (with supporting evidence that technique is compatible with site characteristics) such as on-lot bioretention, tree clearing minimization, minimizing directly connected impervious surfaces, open section roads (also called roadside swales), etc.

Yes No

2. Zoning, acreage, types and amounts of land uses. (e.g., parking spaces, density, green areas, building footprint areas)

Yes No

3. Traffic analysis estimating average daily trips for street network and parking requirements.

Yes No

4. Site impervious area (including effective disconnections).

Yes No

5. Reforestation and/or resource conservation protection measures.

Yes No

6. Comparison of proposed development data with allowable density, land use, etc.

Yes No

7. Development phasing or implementation sequence.

Yes No

8. Other?

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

62

12. How many of the plans identified in # 11 were approved? 60

13. How many privately owned permanent storm water management practices/facilities were inspected during the reporting period? 3

14. How many of the practices/facilities identified in # 13 were found to have inadequate maintenance? 1

15. How long do you give operators to remedy any operation and maintenance deficiencies identified during inspections? Three days

16. Do you have authority to take enforcement action for failure to properly operate or maintain storm water management practices/facilities? Yes No

17. How many formal enforcement actions (i.e., more than a verbal or written warning) were taken for failure to adequately operate or maintain storm water management practices/facilities? 15

18. Do you use an electronic tool (e.g., GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance? Yes No

19. Do all municipal departments or staff (as relevant) have access to this tracking system? Yes No

20. How often do municipal employees receive training about the post-construction program? Annual

G. PROGRAM RESOURCES

1. What was the annual expenditure to implement MS4 NPDES permit requirements this reporting period? 340,000

2. What is next year's budget for implementing the requirements of your MS4 NPDES permit and SWMP? 304,000

3. This year what is your source(s) of funding for the storm water program and annual revenue (amount or percentage) derived from each? Public Works

Source:	Amount \$:	OR %:
Public Works		100
Source:	Amount \$:	OR %:
Source:	Amount \$:	OR %:

4. How many full time equivalent employees does your municipality devote to the storm water program (specifically for implementing the storm water program versus municipal employees with other primary responsibilities)? 4

5. Do you share program implementation responsibilities with any other entities?

Yes No

Entity:	Activity/Task/Responsibility:	Your Oversight/Accountability Mechanism:
Entity:	Activity/Task/Responsibility:	Your Oversight/Accountability Mechanism:
Entity:	Activity/Task/Responsibility:	Your Oversight/Accountability Mechanism:

H. EVALUATING AND MEASURING PROGRESS

1. What indicators do you use to evaluate the overall effectiveness of your storm water management program? How long have you been tracking them and at what frequency? These are not measurable goals for individual management practices or tasks, but large-scale or long-term metrics for the overall program, such as in-stream macroinvertebrate community indices, measures of effective impervious cover in the watershed, indicators of in-stream hydrologic stability, etc.

Indicator	Began Tracking (year)	Frequency	Number of Locations
<i>Example: E. coli</i>	2003	Weekly April-September	20
Fluoride	2017-2020	Monthly September-December	4
Turbidity	2017-2020	Monthly September-December	6
Nitrogen	2017-2020	Monthly September-December	7
Stream Team-Jefferson County	2017-2020	Monthly January-December	32

2. What environmental quality trends have you documented over the duration of your storm water program? Reports or summaries can be attached electronically, or provide the Web address where they are located. E.coli in septic systems that were discharging into a waterway. Testing has shown that has been reduced through our program.



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM
**MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4)
STORMWATER MANAGEMENT PLAN REPORT**

FOR OFFICE USE ONLY	
PROJECT ID NUMBER	
DATE RECEIVED	

Part A – MS4 PERMIT HOLDER INFORMATION

1. MS4 NAME City of Herculaneum	2. NPDES PERMIT NUMBER	3. MS4 UNIQUE ID NO.	
4. ADDRESS #1 Parkwood Ct	6. CITY Herculaneum	6. STATE MO	7. ZIP CODE 63048
8. TELEPHONE NUMBER WITH AREA CODE 636.475.4447	9. EMAIL gbreher@cityofherculaneum.gov		
10. NAME OF MS4 CONTACT PERSON Greg Breher			
11. Have any areas of the MS4 been added or removed from the MS4 jurisdiction due to annexation or other legal means since the most recent permit application (renewal, new, modification), or most recent MS4 stormwater management plan report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please include a map along with a brief description as an attachment.			

Part B – REPORTING PERIOD

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2. Is your MS4 new permitted (i.e., is this your first MS4 permit)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, you are required to submit the MS4 stormwater management plan report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be the date of issuance of the permit and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.
3. Is your MS4 a previously permitted MS4 and not subject to a TMDL? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, you are required to submit the MS4 stormwater management plan report biennially (i.e., once every two years). Reports are due Feb. 28 every odd year. The first report will be due February 2017, and will cover the reporting period from June 13, 2016, to Dec. 31, 2016. All other reports shall cover the reporting period of Jan. 1 of the first year to Dec. 31 of the second year.
4. If you are part of a co-permitted MS4 permit, submit combined MS4 stormwater management plan reports, and one or more of the co-permitted MS4s have annual reporting based on the above criteria, then submit your MS4 stormwater management plan report annually by Feb. 28 of each year. If you are part of a co-permitted MS4 permit and do not submit combined MS4 stormwater management plan report, then each MS4 co-permittee will submit their MS4 stormwater management plan report based on the above criteria.
5. Reporting Period: BEGINNING: 1/1/2019 ENDING: 12/31/2020

Part C – STORMWATER MANAGEMENT PLAN REPORT PROGRESS AND COMPLIANCE

As an attachment, please provide information for each of the items below. Provide informative data, success stories, and experiences that support the successful implementation of your stormwater management plan report.

1. Describe the status of compliance with permit conditions for the permitted MS4.
2. Provide information regarding the progress toward achieving the statutory goal of reducing the discharge of pollutants to the maximum extent practicable to the MS4.
3. If another governmental entity implements any best management practice or minimum control measure, please provide the following:
 - a. Name of the government entity;
 - b. Name of the primary contact for the government entity;
 - c. Contact information (i.e., address, city, ZIP code, state, and phone number); and
 - d. Specific best management practices or minimum control measures being implemented by the government entity.

It is the responsibility of the permittee to provide all information under this report regardless if best management practices or minimum control measures are being implemented by another governmental entity. If a complete minimum control measure is being implemented by an alternative governmental entity, then only indicate the best management practice under the minimum control measure.

4. Provide a summary of any stormwater activities and known construction activities that will be covered under the authority of the MS4 permit that are scheduled to begin during the next reporting period.
5. Provide a description of any changes to the stormwater management plan report, best management practices, measurable goals, and the iterative process that have occurred during the covered reporting period.
6. Provide a list of best management practices that were evaluated during the covered reporting period, and provide information on how the best management practice was determined effective.
 - a. If any of the best management practices were determined to be ineffective, provide a summary on how the ineffective best management practice was resolved.
7. If any water samples were collected and analyzed during the covered reporting period by the permitted MS4 or on behalf of the permitted MS4, please complete Part D – Water Sample(s) Analysis.

Part D – WATER SAMPLE(S) ANALYSIS

PARAMETER OR INDICATOR	FREQUENCY	RESULT	DRY WEATHER SAMPLE?	WET WEATHER SAMPLE?
See attached			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

1. Are any of the parameters being sampled due to the MS4 being subject to an established or approved Total Maximum Daily Load?
 Yes No

If yes, please indicate the parameter/pollutant.

2. Does the data support water quality attainment or support trend data toward water quality attainment?
 Yes No

If yes, please describe.
 Saw a decrease in turbidity.

Part E – TOTAL MAXIMUM DAILY LOAD (TMDL) ASSUMPTIONS AND REQUIREMENTS ATTAINMENT PLAN

1. Is your MS4 subject to an established or approved TMDL? If no, please indicate "No" below and do not complete any other portion of the TMDL Assumptions and Requirements Attainment Plan portion of this report.

Yes No

2. Has your TMDL Assumptions and Requirements Attainment Plan been completed and submitted? If no, please provide a summary as an attachment on the progress toward submitting and implementing the TMDL Assumptions and Requirements Attainment Plan.

Yes No

3. Has your TMDL Assumptions and Requirements Attainment Plan received approval from the department? If yes, please provided a summary of the status of the plan and include implementation status of identified best management practices and measurable goals along with any changes to best management practices or measurable goals (if applicable)..

Yes No

4. Does the TMDL Assumptions and Requirements Attainment Plan incorporate Integrated Planning? If yes, please provide a summary of the status of the Integrated Plan.

Yes No

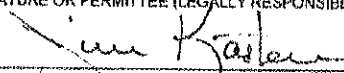
PART F – SUBMIT REPORT TO:

Missouri Department of Natural Resources
Water Protection Program
MS4 Program Coordinator
P.O. Box 176
Jefferson City, MO 65102-0176

PART G - CERTIFICATION

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 OR PERMITTEE (LEGALLY RESPONSIBLE PERSON)



DATE SIGNED

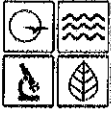
December 15, 2020

NAME (PRINTED OR TYPED)

Jim Kasten

TITLE

City Administrator



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 WATER PROTECTION PROGRAM
**MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4)
 STORMWATER MANAGEMENT PLAN REPORT**

FOR OFFICE USE ONLY
PROJECT ID NUMBER
DATE RECEIVED

Part A – MS4 PERMIT HOLDER INFORMATION

1. MS4 NAME City of Crystal City	2. NPDES PERMIT NUMBER Mo-R040052	3. MS4 UNIQUE ID NO.	
4. ADDRESS 130 Mississippi	5. CITY Crystal City	6. STATE Mo	7. ZIP CODE 63019
8. TELEPHONE NUMBER WITH AREA CODE 636-931-2905	9. EMAIL mcook@jeffcomo.org		
10. NAME OF MS4 CONTACT PERSON Richard Cox/Karry Friedmeyer			
11. Have any areas of the MS4 been added or removed from the MS4 jurisdiction due to annexation or other legal means since the most recent permit application (renewal, new, modification), or most recent MS4 stormwater management plan report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please include a map along with a brief description as an attachment.			

Part B – REPORTING PERIOD

1. Is your MS4 subject to a TMDL?
 Yes No

If yes, you are required to submit the MS4 report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be June 13, 2016, and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.

2. Is your MS4 new permitted (i.e., is this your first MS4 permit)?
 Yes No

If yes, you are required to submit the MS4 stormwater management plan report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be the date of issuance of the permit and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.

3. Is your MS4 a previously permitted MS4 and not subject to a TMDL?
 Yes No

If yes, you are required to submit the MS4 stormwater management plan report biennially (i.e., once every two years). Reports are due Feb. 28 every odd year. The first report will be due February 2017, and will cover the reporting period from June 13, 2016, to Dec. 31, 2016. All other reports shall cover the reporting period of Jan. 1 of the first year to Dec. 31 of the second year.

4. If you are part of a co-permitted MS4 permit, submit combined MS4 stormwater management plan reports, and one or more of the co-permitted MS4s have annual reporting based on the above criteria, then submit your MS4 stormwater management plan report annually by Feb. 28 of each year.

If you are part of a co-permitted MS4 permit and do not submit combined MS4 stormwater management plan report, then each MS4 co-permittee will submit their MS4 stormwater management plan report based on the above criteria.

5. Reporting Period:
 BEGINNING: January 1st 2019 ENDING: December 31st 2020

Part C – STORMWATER MANAGEMENT PLAN REPORT PROGRESS AND COMPLIANCE

As an attachment, please provide information for each of the items below. Provide informative data, success stories, and experiences that support the successful implementation of your stormwater management plan report.

1. Describe the status of compliance with permit conditions for the permitted MS4.
2. Provide information regarding the progress toward achieving the statutory goal of reducing the discharge of pollutants to the maximum extent practicable to the MS4.
3. If another governmental entity implements any best management practice or minimum control measure, please provide the following:
 - a. Name of the government entity;
 - b. Name of the primary contact for the government entity;
 - c. Contact information (i.e., address, city, ZIP code, state, and phone number); and
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5. Provide a description of any changes to the stormwater management plan report, best management practices, measurable goals, and the iterative process that have occurred during the covered reporting period.
6. Provide a list of best management practices that were evaluated during the covered reporting period, and provide information on how the best management practice was determined effective.
 - a. If any of the best management practices were determined to be ineffective, provide a summary on how the ineffective best management practice was resolved.
7. If any water samples were collected and analyzed during the covered reporting period by the permitted MS4 or on behalf of the permitted MS4, please complete Part D – Water Sample(s) Analysis.

Part D – WATER SAMPLE(S) ANALYSIS

PARAMETER OR INDICATOR	FREQUENCY	RESULT	DRY WEATHER SAMPLE?	WET WEATHER SAMPLE?
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

1. Are any of the parameters being sampled due to the MS4 being subject to an established or approved Total Maximum Daily Load?
 Yes No
 If yes, please indicate the parameter/pollutant.

2. Does the data support water quality attainment or support trend data toward water quality attainment?
 Yes No
 If yes, please describe.

Part E – TOTAL MAXIMUM DAILY LOAD (TMDL) ASSUMPTIONS AND REQUIREMENTS ATTAINMENT PLAN.

1. Is your MS4 subject to an established or approved TMDL? If no, please indicate "No" below and do not complete any other portion of the TMDL Assumptions and Requirements Attainment Plan portion of this report.

Yes No

2. Has your TMDL Assumptions and Requirements Attainment Plan been completed and submitted? If no, please provide a summary as an attachment on the progress toward submitting and implementing the TMDL Assumptions and Requirements Attainment Plan.

Yes No

3. Has your TMDL Assumptions and Requirements Attainment Plan received approval from the department? If yes, please provide a summary of the status of the plan and include implementation status of identified best management practices and measurable goals along with any changes to best management practices or measurable goals (if applicable).

Yes No

4. Does the TMDL Assumptions and Requirements Attainment Plan incorporate Integrated Planning? If yes, please provide a summary of the status of the Integrated Plan.

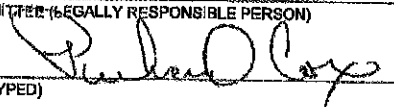
Yes No

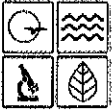
PART F – SUBMIT REPORT TO:

Missouri Department of Natural Resources
Water Protection Program
MS4 Program Coordinator
P.O. Box 176
Jefferson City, MO 65102-0176

PART G - CERTIFICATION

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 OR PERMITTEE (LEGALLY RESPONSIBLE PERSON) 	DATE SIGNED 12/14/2020
NAME (PRINTED OR TYPED) Richard Cox	TITLE Building Commissioner



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 WATER PROTECTION PROGRAM
**MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4)
 STORMWATER MANAGEMENT PLAN REPORT**

FOR OFFICE USE ONLY

PROJECT ID NUMBER

DATE RECEIVED

Part A - MS4 PERMIT HOLDER INFORMATION

1. MS4 NAME City of Festus	2. NPDES PERMIT NUMBER Mo-R040052	3. MS4 UNIQUE ID NO.	
4. ADDRESS 950 North Fifth	5. CITY Festus	6. STATE Mo	7. ZIP CODE 63028
8. TELEPHONE NUMBER WITH AREA CODE 636-937-6646	9. EMAIL Mark@cityoffestus.org		
10. NAME OF MS4 CONTACT PERSON Mark Harris			

11. Have any areas of the MS4 been added or removed from the MS4 jurisdiction due to annexation or other legal means since the most recent permit application (renewal, new, modification), or most recent MS4 stormwater management plan report?

Yes No
 If yes, please include a map along with a brief description as an attachment.

Part B - REPORTING PERIOD

1. Is your MS4 subject to a TMDL?
 Yes No

If yes, you are required to submit the MS4 report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be June 13, 2016, and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.

2. Is your MS4 new permitted (i.e., is this your first MS4 permit)?
 Yes No

If yes, you are required to submit the MS4 stormwater management plan report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be the date of issuance of the permit and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.

3. Is your MS4 a previously permitted MS4 and not subject to a TMDL?
 Yes No

If yes, you are required to submit the MS4 stormwater management plan report biennially (i.e., once every two years). Reports are due Feb. 28 every odd year. The first report will be due February 2017, and will cover the reporting period from June 13, 2016, to Dec. 31, 2016. All other reports shall cover the reporting period of Jan. 1 of the first year to Dec. 31 of the second year.

4. If you are part of a co-permitted MS4 permit, submit combined MS4 stormwater management plan reports, and one or more of the co-permitted MS4s have annual reporting based on the above criteria, then submit your MS4 stormwater management plan report annually by Feb. 28 of each year.

If you are part of a co-permitted MS4 permit and do not submit combined MS4 stormwater management plan report, then each MS4 co-permittee will submit their MS4 stormwater management plan report based on the above criteria.

5. Reporting Period:

BEGINNING: January 1st 2019

ENDING: December 31st 2020

Part C – STORMWATER MANAGEMENT PLAN REPORT PROGRESS AND COMPLIANCE

As an attachment, please provide information for each of the items below. Provide informative data, success stories, and experiences that support the successful implementation of your stormwater management plan report.

1. Describe the status of compliance with permit conditions for the permitted MS4.
2. Provide information regarding the progress toward achieving the statutory goal of reducing the discharge of pollutants to the maximum extent practicable to the MS4.
3. If another governmental entity implements any best management practice or minimum control measure, please provide the following:
 - a. Name of the government entity;
 - b. Name of the primary contact for the government entity;
 - c. Contact information (i.e., address, city, ZIP code, state, and phone number); and
 - d. Specific best management practices or minimum control measures being implemented by the government entity.

It is the responsibility of the permittee to provide all information under this report regardless if best management practices or minimum control measures are being implemented by another governmental entity. If a complete minimum control measure is being implemented by an alternative governmental entity, then only indicate the best management practice under the minimum control measure.

4. Provide a summary of any stormwater activities and known construction activities that will be covered under the authority of the MS4 permit that are scheduled to begin during the next reporting period.
5. Provide a description of any changes to the stormwater management plan report, best management practices, measurable goals, and the iterative process that have occurred during the covered reporting period.
6. Provide a list of best management practices that were evaluated during the covered reporting period, and provide information on how the best management practice was determined effective.
 - a. If any of the best management practices were determined to be ineffective, provide a summary on how the ineffective best management practice was resolved.
7. If any water samples were collected and analyzed during the covered reporting period by the permitted MS4 or on behalf of the permitted MS4, please complete Part D – Water Sample(s) Analysis.

Part D – WATER SAMPLE(S) ANALYSIS

PARAMETER OR INDICATOR	FREQUENCY	RESULT	DRY WEATHER SAMPLE?	WET WEATHER SAMPLE?
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

1. Are any of the parameters being sampled due to the MS4 being subject to an established or approved Total Maximum Daily Load?
 Yes No

If yes, please indicate the parameter/pollutant.

2. Does the data support water quality attainment or support trend data toward water quality attainment?

Yes No

If yes, please describe.

Part E - TOTAL MAXIMUM DAILY LOAD (TMDL) ASSUMPTIONS AND REQUIREMENTS ATTAINMENT PLAN

1. Is your MS4 subject to an established or approved TMDL? If no, please indicate "No" below and do not complete any other portion of the TMDL Assumptions and Requirements Attainment Plan portion of this report.

Yes No

2. Has your TMDL Assumptions and Requirements Attainment Plan been completed and submitted? If no, please provide a summary as an attachment on the progress toward submitting and implementing the TMDL Assumptions and Requirements Attainment Plan.

Yes No

3. Has your TMDL Assumptions and Requirements Attainment Plan received approval from the department? If yes, please provide a summary of the status of the plan and include implementation status of identified best management practices and measurable goals along with any changes to best management practices or measurable goals (if applicable)..

Yes No

4. Does the TMDL Assumptions and Requirements Attainment Plan incorporate Integrated Planning? If yes, please provide a summary of the status of the Integrated Plan.

Yes No

PART F - SUBMIT REPORT TO:

Missouri Department of Natural Resources
Water Protection Program
MS4 Program Coordinator
P.O. Box 176
Jefferson City, MO 65102-0176

PART G - CERTIFICATION

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.

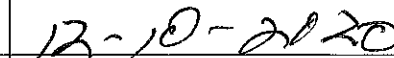
SIGNATURE OR PERMITTEE (LEGALLY RESPONSIBLE PERSON)



NAME (PRINTED OR TYPED)

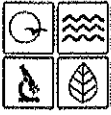
Sam Richards

DATE SIGNED



TITLE

Mayor



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM
**MUNICIPAL SEPARATE STORM SEWER SYSTEM (MS4)
STORMWATER MANAGEMENT PLAN REPORT**

FOR OFFICE USE ONLY
PROJECT ID NUMBER
DATE RECEIVED

Part A - MS4 PERMIT HOLDER INFORMATION

1. MS4 NAME City of Byrnes Mill	2. NPDES PERMIT NUMBER	3. MS4 UNIQUE ID NO.	
4. ADDRESS 141 Osage Executive Circle	5. CITY House Springs	6. STATE Mo	7. ZIP CODE 63051
8. TELEPHONE NUMBER WITH AREA CODE 636-671-0021	9. EMAIL publicworks@byrnesmill.org		
10. NAME OF MS4 CONTACT PERSON Bob Schmidt			
11. Have any areas of the MS4 been added or removed from the MS4 jurisdiction due to annexation or other legal means since the most recent permit application (renewal, new, modification), or most recent MS4 stormwater management plan report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, please include a map along with a brief description as an attachment.			

Part B - REPORTING PERIOD

1. Is your MS4 subject to a TMDL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, you are required to submit the MS4 report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be June 13, 2016, and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.
2. Is your MS4 new permitted (i.e., is this your first MS4 permit)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, you are required to submit the MS4 stormwater management plan report annually. Reports are due Feb. 28 each year. For the first reporting period, the beginning date will be the date of issuance of the permit and the ending date will be Dec. 31, 2016. All other annual reports shall cover the reporting period of Jan. 1 to Dec. 31 each year.
3. Is your MS4 a previously permitted MS4 and not subject to a TMDL? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, you are required to submit the MS4 stormwater management plan report biennially (i.e., once every two years). Reports are due Feb. 28 every odd year. The first report will be due February 2017, and will cover the reporting period from June 13, 2016, to Dec. 31, 2016. All other reports shall cover the reporting period of Jan. 1 of the first year to Dec. 31 of the second year.
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5. Reporting Period: BEGINNING: January 1 2019 ENDING: December 31 2020

Part C – STORMWATER MANAGEMENT PLAN REPORT PROGRESS AND COMPLIANCE

As an attachment, please provide information for each of the items below. Provide informative data, success stories, and experiences that support the successful implementation of your stormwater management plan report.

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 - a. Name of the government entity;
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Part D – WATER SAMPLE(S) ANALYSIS

PARAMETER OR INDICATOR	FREQUENCY	RESULT	DRY WEATHER SAMPLE?	WET WEATHER SAMPLE?
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
see attached			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

1. Are any of the parameters being sampled due to the MS4 being subject to an established or approved Total Maximum Daily Load?
 Yes No

If yes, please indicate the parameter/pollutant.

2. Does the data support water quality attainment or support trend data toward water quality attainment?
 Yes No

If yes, please describe.

WE have seen a decrease in turbidity since implmenting the swpp plan.

Part E – TOTAL MAXIMUM DAILY LOAD (TMDL) ASSUMPTIONS AND REQUIREMENTS ATTAINMENT PLAN

1. Is your MS4 subject to an established or approved TMDL? If no, please indicate "No" below and do not complete any other portion of the TMDL Assumptions and Requirements Attainment Plan portion of this report.

Yes No

2. Has your TMDL Assumptions and Requirements Attainment Plan been completed and submitted? If no, please provide a summary as an attachment on the progress toward submitting and implementing the TMDL Assumptions and Requirements Attainment Plan.

Yes No

3. Has your TMDL Assumptions and Requirements Attainment Plan received approval from the department? If yes, please provided a summary of the status of the plan and include implementation status of identified best management practices and measurable goals along with any changes to best management practices or measurable goals (if applicable)..

Yes No

4. Does the TMDL Assumptions and Requirements Attainment Plan incorporate Integrated Planning? If yes, please provide a summary of the status of the Integrated Plan.

Yes No

PART F – SUBMIT REPORT TO:

Missouri Department of Natural Resources
Water Protection Program
MS4 Program Coordinator
P.O. Box 176
Jefferson City, MO 65102-0176

PART G - CERTIFICATION

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 OR PERMITTEE (LEGALLY RESPONSIBLE PERSON)

DATE SIGNED

12-16-2020

NAME (PRINTED OR TYPED)

Bob Schmidt

TITLE

Public Works Supervisor