

Submittal of Annual Reports and other Compliance Documents for Municipal Separate Storm Sewer System (MS4) Permits

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. After 120 days your draft is **deleted**.

Reporting Information

Will you be completing the Annual Report or other submittal type? ☒ Annual Report ☐ Other

Project Name:

County:

Municipality:

Permit Number:

Facility Number:

Reporting Year:

Is this submittal also satisfying an Urban Nonpoint Source Grant funded deliverable? ☐ Yes ☒ No

Required Attachments and Supplemental Information

Please complete the contents of each tab to submit your MS4 permit compliance document. The information included in this checklist is necessary for a complete submittal. A complete and detailed submittal will help us review about your MS4 permit document. To help us make a decision in the shortest amount of time possible, the following information must be submitted:

Annual Report

- Review related web site and instructions for [Municipal storm water permit eReporting](#) [Exit Form]
- Complete all required fields on the annual report form and upload required attachments
- Attach the following other supporting documents as appropriate using the attachments tab above
 - Public Education and Outreach Annual Report Summary
 - Public Involvement and Participation Annual Report Summary
 - Illicit Discharge Detection and Elimination Annual Report Summary
 - Construction Site Pollution Control Annual Report Summary
 - Post-Construction Storm Water Management Annual Report Summary
 - Pollution Prevention Annual Report Summary
 - Leaf and Yard Waste Management
 - Municipal Facility (BMP) Inspection Report
 - Municipal Property SWPPP
 - Municipally Property Inspection Report
 - Winter Road Maintenance
 - Storm Sewer Map Annual Report Attachment
 - Storm Water Quality Management Annual Report Attachment
 - TMDL Attachment
 - Storm Water Consortium/Group Report

- Municipal Cooperation Attachment
- Other Annual Report Attachment
- Attach the following permit compliance documents as appropriate using the attachments tab above
 - Storm Water Management Program (*S050075-03 general permittees shall have a written storm water management program that describes in detail how the permittee intends to comply with the permit requirements for each minimum control measure. Updated programs are due to the department by March 31, 2021.*)
 - Public Education and Outreach Program
 - Public Involvement and Participation Program
 - Illicit Discharge Detection and Elimination Program
 - Construction Site Pollutant Control Program
 - Post-Construction Storm Water Management Program
 - Pollution Prevention Program
 - Municipal Storm Water Management Facility (BMP) Inventory (*S050075-03 general permittees 2.6.1 - inventory due to the department by March 31, 2021.*)
 - Municipal Storm Water Management Facility (BMP) Inspection and Maintenance Plan (*S050075-03 general permittees 2.6.2 – document due to the department by March 31, 2021.*)
- Sign and Submit form

Municipal Contact Information- Complete

Notice: Pursuant to s. NR 216.07(8), Wis. Adm. Code, an owner or operator of a Municipal Separate Storm Sewer System (MS4) is required to submit an annual report to the Department of Natural Resources (Department) by March 31 of each year to report on activities for the previous calendar year ("reporting year"). This form is being provided by the Department for the user's convenience for reporting on activities undertaken in each reporting year of the permit term. Personal information collected will be used for administrative purposes and may be provided to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

Note: Compliance items must be submitted using the Attachments tab.

Municipality Information

Name of Municipality Clayton Town

Facility ID # or (FIN): 52407

Updated Information: ☐ Check to update mailing address information

Mailing Address: 8348 CTR T

Mailing Address 2:

City: Larsen

State: Wisconsin

Zip Code: 54947 xxxxx or xxxxx-xxxx

Primary Municipal Contact Person (Authorized Representative for MS4 Permit)

The "Authorized Representative" or "Authorized Municipal Contact" includes the municipal official that was charged with compliance and oversight of the permit conditions, and has signature authority for submitting permit documents to the Department (i.e., Mayor, Municipal Administrator, Director of Public Works, City Engineer).

☐ Select to **create new** primary contact

First Name: Holly

Last Name: Stevens

☐ Select to **update** current contact information

Title: Clerk

Mailing Address: 8348 County Road T

Mailing Address 2:

City: Larsen

State: WI

Zip Code: 54947 xxxxx or xxxxx-xxxx

Phone Number: 920-836-2007 Ext: xxx-xxx-xxxx

Email: clerk@townofclayton.net

Additional Contacts Information (Optional)

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

Individual with responsibility for:
(Check all that apply)

- ☐ Municipal-wide Water Quality Plan
- ☒ Ordinances
- ☐ Pollution Prevention Program
- ☐ Post-Construction Program
- ☐ Winter roadway maintenance

First Name:

Tori

Last Name:

Straw

Title:

Town Administrator

Mailing Address:

8348 CTR "T"

Mailing Address 2:

City:

Larsen

State:

WI

Zip Code:

54947

XXXXX or XXXXX-XXXX

Phone Number:

920-836-2007

Ext:

XXX-XXX-XXXX

Email:

Administrator@TownofClayton.NET

Individual with responsibility for:
(Check all that apply)

- ☐ I&E Program
- ☐ IDDE Program
- ☐ IDDE Response Procedure Manual
- ☒ Municipal-wide Water Quality Plan
- ☐ Ordinances
- ☒ Pollution Prevention Program
- ☒ Post-Construction Program
- ☒ Winter roadway maintenance

First Name:

Mike

Last Name:

Pfankuch

Title:

Public Works Foreman

Mailing Address:

3848 CTR "T"

Mailing Address 2:

City:

Larsen

State:

WI

Zip Code:

54947

XXXXX or XXXXX-XXXX

Phone Number:

920-836-3005

Ext:

XXX-XXX-XXXX

Email:

PublicWorksForeman@TownofClayton.net

1. Does the municipality rely on another entity to satisfy some of the permit requirements? If yes, enter entity name (government, consultant, group/organization).

☐ Yes ☒ No

2. Has there been any changes to the municipality's participation in group efforts towards permit compliances (i.e., the municipality has added or dropped consortium membership)?

☐ Yes ☒ No

Minimum Control Measures- Section 1 : Complete**1. Public Education and Outreach**

a. Complete the following information on Public Education and Outreach Activities related to storm water. Select the Mechanism that best describes how the topic message was conveyed to your population. Use the **Add Activity** to add multiple Mechanisms. For Quantity, choose the range for the number of Mechanisms chosen (i.e., number of workshops, events).

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

Select all applicable audiences targeted for this topic.

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

Topic: Management of materials that may cause storm water pollution from automobiles, pet waste, household hazardous waste and household practices			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Passive print media (brochures at front desk, posters, etc.)</u>	<u>1 - 9</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Website</u>	<u>1 - 9</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

- ☐ Contractors
 ☒ General Public
 ☐ Public Employees
 ☐ Residential
 ☐ School Groups
☐ Business
 ☐ Developers
 ☐ Industries
 ☐ Other:

Topic: Beneficial onsite reuse of leaves and grass clippings/proper use of lawn and garden fertilizers and pesticides			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Passive print media (brochures at front desk, posters, etc.)</u>	<u>1 - 9</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Website</u>	<u>1 - 9</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Direct one-on-one communication</u>	<u>100 +</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

- ☐ Contractors
 ☒ General Public
 ☐ Public Employees
 ☒ Residential
 ☐ School Groups
☐ Business
 ☐ Developers
 ☐ Industries
 ☐ Other:

Topic: Management of stream banks and shorelines by riparian landowners to minimize erosion and restore and enhance the ecological value of waterways			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Government event (public hearing, council meeting, etc.)	<u>1 - 9</u>	<u>20 - 49</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
Website	<u>1 - 9</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

- ☐ Contractors
 ☒ General Public
 ☒ Public Employees
 ☒ Residential
 ☐ School Groups
 ☐ Business
 ☐ Developers
 ☐ Industries
 ☐ Other:

Topic: Infiltration of residential storm water runoff from rooftop downspouts, driveways and sidewalks			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Government event (public hearing, council meeting, etc.)	<u>1 - 9</u>	<u>50 - 99</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
Direct one-on-one communication	<u>100 +</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

- ☐ Contractors
 ☒ General Public
 ☐ Public Employees
 ☒ Residential
 ☐ School Groups
 ☐ Business
 ☐ Developers
 ☐ Industries
 ☐ Other:

Topic: Inform and where appropriate educate those responsible for the design, installation, and maintenance of construction site erosion control practices and storm water management facilities on how to design, install and maintain the practices			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Did not focus on this topic this reporting year	Select...	Select...	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable audiences targeted for this topic.

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

Topic: Identify businesses and activities that may pose a storm water contamination concern, and where appropriate, educate specific audiences on methods of storm water pollution prevention			

Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Government event (public hearing, council meeting, etc.)</u>	<u>1 - 9</u>	<u>50 - 99</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Direct one-on-one communication</u>	<u>1 - 9</u>	<u>20 - 49</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

- ☒ Contractors
 ☒ General Public
 ☒ Public Employees
 ☒ Residential
 ☐ School Groups
☒ Business
 ☐ Developers
 ☒ Industries
 ☐ Other:

Topic: Promote environmentally sensitive land development designs by developers and designers, including green infrastructure and low impact development			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Direct one-on-one communication</u>	<u>1 - 9</u>	<u>10 - 19</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Government event (public hearing, council meeting, etc.)</u>	<u>1 - 9</u>	<u>20 - 49</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable audiences targeted for this topic.

- ☐ Contractors
 ☒ General Public
 ☐ Public Employees
 ☒ Residential
 ☐ School Groups
☐ Business
 ☒ Developers
 ☐ Industries
 ☐ Other:

Topic: Other (describe): <input type="text"/>			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Select...</u>	<u>Select...</u>	<u>Select...</u>	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable audiences targeted for this topic.

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

b. Brief Public Education and Outreach program information for inclusion in the Annual Report. If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

The Town's Storm Water Management Program offers staff opportunities for public outreach to educate residents on the value of protecting the waters of the State by properly maintaining the ditches and storm water management devices in the Town.

2. Public Involvement and Participation

a. Complete the following information on Public Education and Outreach Activities related to storm water. Select the mechanism that best describes how the topic message was conveyed to your population. Use the Add Activity to add multiple mechanisms. For Quantity, choose the range for number Mechanisms chosen (i.e., number of workshops, events).

Topic: Storm Water Management Plan and/or updates			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Government Event (Public Hearing, Council Meeting, etc)</u>	<u>1 - 9</u>	<u>50 - 99</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Website</u>	<u>100 +</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Presentation of Storm Water Information</u>	<u>50 - 99</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable participants targeted for this topic.

- ☐ Contractors ☒ General Public ☐ Public Employees ☒ Residential ☐ School Groups
☒ Business ☐ Developers ☒ Industries ☐ Other:

Topic: Storm water related ordinance and/or updates			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Government Event (Public Hearing, Council Meeting, etc)</u>	<u>1 - 9</u>	<u>20 - 49</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Website</u>	<u>100 +</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable participants targeted for this topic.

- ☒ Contractors ☒ General Public ☐ Public Employees ☒ Residential ☐ School Groups
☒ Business ☒ Developers ☒ Industries ☐ Other:

Topic: MS4 Annual Report			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
<u>Government Event (Public Hearing, Council Meeting, etc)</u>	<u>1 - 9</u>	<u>20 - 49</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<u>Website</u>	<u>100 +</u>	<u>100 +</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

Select all applicable participants targeted for this topic.

- ☐ Contractors ☒ General Public ☐ Public Employees ☒ Residential ☐ School Groups
☐ Business ☐ Developers ☐ Industries ☐ Other:

Topic: Volunteer Opportunities			
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Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
None	Select...	Select...	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable participants targeted for this topic.

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

Topic: Other (describe) : <input type="text"/>			
Mechanism	Quantity (optional)	Est. People Reached (optional)	Regional Effort? (optional)
Select...	Select...	Select...	<input type="radio"/> Yes <input type="radio"/> No

Select all applicable participants targeted for this topic .

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

b. Brief Public Involvement and Participation program information for inclusion in the Annual Report.

If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

The bulk of the Town's Public Involvement comes from resident participation in Board Meetings and staff contact with residents as part of the Town's ditch and storm water management maintenance programs.

Form 3400-224 (09/19)

Minimum Control Measures - Section 3 : Complete

3. Illicit Discharge Detection and Elimination

- | | | |
|--|---------------------------------|---------------------------------|
| a. How many total outfalls does the municipality have? | <input type="text" value="35"/> | <input type="checkbox"/> Unsure |
| b. How many outfalls did the municipality evaluate as part of their routine ongoing field screening program? | <input type="text" value="35"/> | <input type="checkbox"/> Unsure |
| c. From the municipality's routine screening, how many were confirmed illicit discharges? | <input type="text" value="0"/> | <input type="checkbox"/> Unsure |
| d. How many illicit discharge complaints did the municipality receive? | <input type="text" value="0"/> | <input type="checkbox"/> Unsure |
| e. From the complaint received, how many were confirmed illicit discharges? | <input type="text" value="0"/> | <input type="checkbox"/> Unsure |
| f. How many of the identified illicit discharges did the municipality eliminate in the reporting year? | <input type="text" value="0"/> | <input type="checkbox"/> Unsure |

(If the sum of 3.c. and 3.e. does not equal 3.f., please explain below.)

- g. How many of the following enforcement mechanisms did the municipality use to enforce its illicit discharge ordinance? Check all that apply and ☐ Unsure

enter the number of each used in the reporting year.

<input checked="" type="checkbox"/> Verbal Warning	<input type="text" value="0"/>
<input checked="" type="checkbox"/> Written Warning (including email)	<input type="text" value="0"/>
<input checked="" type="checkbox"/> Notice of Violation	<input type="text" value="0"/>
<input checked="" type="checkbox"/> Civil Penalty/ Citation	<input type="text" value="0"/>

Additional Information: _____

- h. Brief Illicit Discharge Detection and Elimination program information for inclusion in the Annual Report. If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

DPW conducts annual visits to the Town's storm water management outfalls, the review includes the operations of the storm water management infrastructure, outfalls, observing the system for illicit discharge points, and any failures of the system.

Form 3400-224 (08/19)

Minimum Control Measures - Section 4 : Complete

4. Construction Site Pollutant Control

a. How many total construction sites were active at any point in the reporting year?	<input type="text" value="70"/>	<input type="checkbox"/> Unsure
b. How many construction sites did the municipality issue permits for in the reporting year?	<input type="text" value="65"/>	<input type="checkbox"/> Unsure
c. Do the above numbers include sites <1 acre?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure	
d. How many erosion control inspections did the municipality complete in the reporting year?	<input type="text" value="0"/>	<input type="checkbox"/> Unsure
e. What types of enforcement actions does the municipality have available to compel compliance with the regulatory mechanism? Check all that apply and enter the number of each used in the reporting year.		
<input checked="" type="checkbox"/> No Authority		
<input type="checkbox"/> Verbal Warning	<input type="text"/>	
<input type="checkbox"/> Written Warning (including email)	<input type="text"/>	
<input type="checkbox"/> Notice of Violation	<input type="text"/>	
<input type="checkbox"/> Civil Penalty/ Citation	<input type="text"/>	
<input type="checkbox"/> Stop Work Order	<input type="text"/>	
<input type="checkbox"/> Forfeiture of Deposit	<input type="text"/>	
<input type="checkbox"/> Other - Describe below	<input type="text"/>	

- f. Brief Construction Site Pollutant Control program information for inclusion in the Annual Report . If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

The Town has a construction and post construction Erosion Control Ordinance that is based on DNR Model Ordinance, however construction and post construction erosion permits are issued and enforced by the Winnebago County Zoning Department.

Form 3400-224 (08/19)

Minimum Control Measures - Section 5 : Complete

5. Post-Construction Storm Water Management

- a. How many sites with new structural storm water management facilities* have received local approval ? ☐ Unsure

*Engineered and constructed systems that are designed to provide storm water quality control such as wet detention ponds, constructed wetlands, infiltration basins, grassed swales, permeable pavement, catch basin sumps, etc.

- b. How many privately owned storm water management facilities were inspected in the reporting year ? ☐ Unsure

Inspections completed by private land owners should be included in the reported number.

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

☐ No Authority

☒ Verbal Warning

☒ Written Warning (including email)

☒ Notice of Violation

☒ Civil Penalty/ Citation

☐ Forfeiture of Deposit

☒ Complete Maintenance

☒ Bill Responsible Party

☐ Other - Describe below

- d. Brief Post-Construction Storm Water Management program information for inclusion in the Annual Report . If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

New SWMD are on Lots deeded to the Town, they are evaluated and maintains as needed. Pre 2014 SWMD belong to and are maintained by Owner's Associations, if not maintained, the Town maintains them and bills benefitted property owners.

Form 3400-224 (08/19)

Minimum Control Measures - Section 6 : Complete

6. Pollution Prevention

Storm Water Management Facility Inspections (ponds, biofilters, etc.) ☐ Not Applicable

- a. Enter the total number of municipally owned or operated structural storm water management facilities ? ☐ Unsure
- b. How many new municipally owned storm water management facilities were installed in the reporting year ? ☐ Unsure
- c. How many municipally owned storm water management facilities were inspected in the reporting year? ☐ Unsure
- d. What elements are looked at during inspections (250 character limit)?

Inlet and outlet devices, spill ways, containment berms, vegetative growth, water quality, animal infestation and/or animal burrowing.

- e. How many of these facilities required maintenance? ☐ Unsure

Public Works Yards & Other Municipally Owned Properties (SWPPP Plan Review) ☐ Not Applicable

- f. How many inspections of municipal properties have been conducted in the reporting year? ☐ Unsure
- g. Have amendments to the SWPPPs been made? ☐ Yes ☒ No ☐ Unsure
- h. If yes, describe what changes have been made (200 character limit):

Collection Services - *Street Sweeping / Cleaning Program* ☒ Not Applicable

Collection Services - *Catch Basin Sump Cleaning Program* ☒ Not Applicable

Collection Services - *Leaf Collection Program* ☐ Not Applicable

- r. Does the municipality conduct curbside leaf collection? ☐ Yes ☒ No ☐ Unsure
- s. Does the municipality notify homeowners about pickup? ☐ Yes ☒ No ☐ Unsure
- t. Where are the residents directed to store the leaves for collection?
☐ Pile on terrace ☐ Pile in street ☐ Bags on terrace ☐ Unsure
☒ Other - Describe Town Yard Waste Site (open 16 Hours per Week)
- u. What is the frequency of collection?
The Town does not have a collection program.
- v. Is collection followed by street sweeping/cleaning? ☐ Yes ☒ No ☐ Unsure

Winter Road Management ☐ Not Applicable

*Note: We are requesting information that goes beyond the reporting year, answer the best you can.

- w. How many lane-miles of roadway is the municipality responsible for doing snow and ice control? ☐ Unsure

x. Provide amount of de-icing products used by month last winter season?

Solids (tons) (ex. sand, or salt-sand)

Product	Oct	Nov	Dec	Jan	Feb	Mar
Salt	0	46	138	230	138	0
Salt/sand mix	0	0	0	0	0	46

Liquids (gallons) (ex. brine)

	Oct	Nov	Dec	Jan	Feb	Mar
Brine	2,100	10,650	7,100	100	100	100

y. Was salt applying machinery calibrated in the reporting year? ☒ Yes ☐ No ☐

Unsure

z. Have municipal personnel attended salt reduction strategy training in the reporting year? ☐ Yes ☒ No ☐

Unsure

If yes, describe what training was provided (250 character limit):

When: How many attended:

Internal (Staff) Education & Communication

aa. Has training or education been held for municipal or other personnel involved in implementing each of the pollution prevention program elements? ☒ Yes ☐ No ☐

Unsure

If yes, describe what training was provided (250 character limit):

DPW staff is updated as part of a weekly Departmental Meeting, the updates are dependent on the season and the nature of the work being done by the Department.

When: Weekly How many attended: 4

ab. Describe how the municipality has kept the following local officials and municipal staff aware of the municipal storm water discharge permit programs and its requirements.

Elected Officials

Monthly Reports during Town Board Meetings.

Municipal Officials

Copies of Monthly Reports Distributed to the Town Board.

Appropriate Staff (such as operators, Department heads, and those that interact with public)

Weekly Department Head Staff Meetings and copies of the Reports given to the Town Board.

ac. Brief Pollution Prevention program information for inclusion in the Annual Report . If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

A Yard Waste Site is available to residents for organic material. The DPW uses digitally controlled equipment to brine, before, during, after and to salt during snow events, the equipment is calibrated at the beginning of each winter season.

Form 3400-224 (08/19)

Minimum Control Measures - Section 7 : Complete

7. Storm Sewer System Map

- a. Did the municipality update their storm sewer map this year? ☒ Yes ☐ No ☐ Unsure

If yes, check the areas the map items that got updated or changed:

- ☐ Storm water treatment facilities
- ☐ Storm pipes
- ☐ Vegetated swales
- ☒ Outfalls
- ☐ Other - Describe below

- b. Brief Storm Sewer System Map information for inclusion in the Annual Report. If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

The Town's Storm Sewer System Map includes the location of both private and Municipally owned management ponds, inlets, outfalls, catch basins, storm sewer pipes, and drain tile in the ditch bottoms.

Final Evaluation - Complete**Fiscal Analysis**

Complete the fiscal analysis table provided below. For municipalities that do not break out funding into permit program elements, please enter the monetary amount to your best estimate of what funding may be going towards these programs.

Annual Expenditure Reporting Year	Budget Reporting Year	Budget Upcoming Year	Source of Funds
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Element: Public Education and Outreach

1500	1500	2000	<u>Storm water utility</u>
------	------	------	----------------------------

Element: Public Involvement and Participation

0	1000	1000	<u>Storm water utility</u>
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Element: Illicit Discharge Detection and Elimination

1500	2000	2500	<u>Storm water utility</u>
------	------	------	----------------------------

Element: Construction Site Pollutant Control

0	0	0	<u>Other</u>
---	---	---	--------------

Element: Post-Construction Storm Water Management

0	0	0	<u>Other</u>
---	---	---	--------------

Element: Pollution Prevention

1000	1500	1500	<u>Storm water utility</u>
------	------	------	----------------------------

Element: Storm Water Quality Management

3000	4000	4500	<u>Storm water utility</u>
------	------	------	----------------------------

Element: Storm Sewer System Map

500	1000	1000	<u>Storm water utility</u>
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Other (describe)

			<u>Select...</u>
--	--	--	------------------

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

Water Quality

a: Were there any known water quality improvements in the receiving waters to which the municipality's storm sewer system directly discharges to?

☐ Yes ☐ No ☒ Unsure If Yes, explain below:

b: Were there any known water quality degradation in the receiving waters to which the municipality's storm sewer system directly discharges to?

☐ Yes ☐ No ☒ Unsure If Yes, explain below:

c: Have any of the receiving waters that the municipality discharges to been added to the impaired waters list during the reporting year?

☐ Yes ☒ No ☐ Unsure

d: Has the municipality evaluated their storm water practices to reduce the pollutants of concern?

☒ Yes ☐ No ☐ Unsure

Total Maximum Daily Loads (TMDLs)

The permittee Clayton Town is subject to the following approved TMDLs: Lower Fox River Basin and Lower Green Bay

Select one option below. The permittee intends to comply with the following permit requirement to show progress towards meeting the (Appendix A) TMDL:

☐ Request department concurrence that they are currently meeting the TMDL pollutant reductions in all applicable reachsheds (A.2).

☐ Demonstrate that they will meet the TMDL pollutant reductions in all applicable reachsheds by October 31, 2023 (A.4).

☒ Follow the TMDL Compliance Plan which received Department concurrence prior to April 30, 2019 (A.3.1).

☐ Participate in an approved Adaptive Management Project (A.3.2).

☐ Submit a TMDL Implementation Plan describing planned progress over current permit term by October 31, 2021 (A.5). Do you intend to select A.5.2 or A.5.3 to meet this permit requirement?

☐ A.5.2 – Additional 20% Total Suspended Solids (TSS), 10% Total Phosphorus (TP) reduction from current ch. NR 151, Wis. Adm. Code, standards

☐ A.5.3 – Optimize measures

Additional Information

Based on the municipality's storm water program evaluation, describe any proposed changes to the municipality's storm water program. If your response exceeds the 250 character limit, attach supplemental information on the attachments page.

Requests for Assistance on Understanding Permit Programs

Would the municipality like the Department to contact them about providing more information on understanding any of the Municipal Separate Storm Sewer Permit programs?

Please select all that apply:

- ☒ Public Education and Outreach
- ☒ Public Involvement and Participation
- ☒ Illicit Discharge Detection and Elimination
- ☒ Construction Site Pollutant Control
- ☒ Post-Construction Storm Water Management
- ☒ Pollution Prevention
- ☒ Storm Water Quality Management
- ☐ Storm Sewer System Map
- ☒ Water Quality Concerns
- ☒ Compliance Schedule Items Due
- ☒ MS4 Program Evaluation

Required Attachments and Supplemental Information

Any other MS4 program information for inclusion in the Annual Report may be attached on here. Use the Add Additional Attachments to add multiple documents.

Upload Required Attachments (15 MB per file limit) - [Help reduce file size and trouble shoot file uploads](#)

***Required Item**

Note: To replace an existing file, use the 'Click here to attach file ' link or press the to delete an item.

Storm Sewer System Map

 File Attachment

[MX-5071 20200323 143741.pdf](#)

Attach - Other Supporting Documents

(To remove items, use your cursor to hover over the attachment section. When the drop down arrow appears, select remove item)

Attach - Permit Compliance Documents

(To remove items, use your cursor to hover over the attachment section. When the drop down arrow appears, select remove item)

Sign and Submit Your Application

Steps to Complete the signature process

1. Read and Accept the Terms and Conditions
2. Press the Submit and Send to the DNR button

NOTE: For security purposes all email correspondence will be sent to the address you used when registering your WAMS ID. This may be a different email than that provided in the application. For information on your WAMS account click [HERE](#).

Terms and Conditions

Certification: I hereby certify that I am an authorized representative of the municipality covered under Clayton Town MS4 Permit for which this annual report or other compliance document is being submitted, and that the information contained in this submittal and all attachments were gathered and prepared under my direction or supervision. Based on my inquiry of the person or persons under my direction or supervision involved in the preparation of this document, to the best of my knowledge, the information is true, accurate, and complete. I further certify that the municipality's governing body or delegated representatives have reviewed or been apprised of the contents of this annual report. I understand that Wisconsin law provides severe penalties for submitting false information.

Signee (must check current role prior to accepting terms and conditions)

- ☒ Authorized municipal contact using WAMS ID.
- ☐ Delegation of Signature Authority (Form 3400-220) for agent signing on the behalf of the authorized municipal contact.
- ☐ Agent seeking to share this item with authorized municipal contact (authorized municipal contact must get WAMS id and complete signature).

Name: Holly Stevens

Title: Clerk

Authorized Signature.

- ☒ I accept the above terms and conditions.

Signed by : i:0#.f|wamsmembership|tocadmin on 2020-03-23T14:56:23

You have already signed and submitted this application to the DNR. Please [contact the Wisconsin DNR](#) for assistance.

After providing the final authorized signature, the system will send an email to the authorized party and any agents. This email will include a copy to the final read only version of this application.