**Year 4 Annual Report**

**New Hampshire Small MS4 General Permit**

**Reporting Period: July 1, 2021 - June 30, 2022**

##MUNICIPALITY

EPA NPDES Permit Number NHR041000

# Certification of Small MS4 Year 4 Annual Report

***Instructions: All reports, including SWPPPs, inspection reports, annual reports, monitoring reports, reports on training, Nitrogen and Phosphorus Source Identification Reports for Year 4, and other information required by this permit must be signed by a person described in Appendix B, Subsection 11.A or by a duly authorized representative of that person in accordance with Appendix B, Subsection 11.B. If there is an authorized representative to sign MS4 reports, there must be a signed and dated written authorization. Use the following language if your municipality wishes to file using an authorized representative.***

“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 gathered and evaluated 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.”

Printed Name

Title

Signature Date

***Instructions: If a Duly Authorized Representative is signing as described in Appendix B, then use the above language and note where the authorization letter is located by checking one of the boxes below.***

**Authorized Representative:**

The authorization letter is:

[ ]  Attached to this document (document name listed below):

[ ]  Publicly available at the website:

##### Primary MS4 Program Manager Contact Information:

##### Name: Title/Position:

##### Department:

##### Street Address:

##### City: State: New Hampshire Zip Code:

##### Email: Phone Number:

# Small MS4 Authorization

The following annual report, which serves as a self-assessment, is intended to document the activities undertaken over the **reporting period from July 1, 2021 through June 30, 2022** in accordance with the Permit.

The Notice of Intent (NOI) can be found at the following (document name or web address):

[https://www.epa.gov/npdes-permits/regulated-ms4-new-hampshire-communities](http://www.epa.gov/npdes-permits/regulated-ms4-new-hampshire-communities)

Compliance activities have been identified and described in the ##MUNICIPALITY’s Stormwater Management Plan (SWMP) and Illicit Discharge Detection and Elimination Plan (IDDE). Those documents and other pertinent Year 4 information can be found in submission or at the following websites, and will be referred to throughout this report:

***Instructions: Attachments for all permittees.***

SWMP: <insert website link to document **AND/OR** note physical address where SWMP is located and available to the public >

Date SWMP was Last Updated: <insert date>

 IDDE Program Plan: <see attached submission **AND/OR** insert website link to document>

SSO Inventory: <see attached submission **AND/OR** insert website link to document>

Dry Weather Screening Data: <see attached submission **AND/OR** insert website link to document>

Inventory and Ranking of Outfalls/Interconnections: <see attached submission **AND/OR** insert website link to document>

Wet Weather Screening Data: <see attached submission **AND/OR** insert website link to document>

Catchment Investigation Data: <see attached submission **AND/OR** insert website link to document>

Illicit Discharge Removal Report: <see attached submission **AND/OR** insert website link to document>

***Instructions: Attachments needed as applicable.***

Salt Reduction Plan: <see attached submission **AND/OR** insert website link to document>

Nitrogen Source Identification Report: <see attached submission **AND/OR** insert website link to document>

Phosphorus Source Identification Report: <see attached submission **AND/OR** insert website link to document>

Chloride Reduction Plan: <see attached submission **AND/OR** insert website link to document>

Results from additional stormwater or receiving water quality monitoring reports or studies: <see attached submission **AND/OR** insert website link to document>

***Instructions: Check off all requirements that have been completed, either partially or fully. By checking each of the boxes, you are certifying that you have completed (fully or partially) that permit requirement. Important Note: If you have not fully completed a requirement, provide narrative explaining why the requirement was not completed, progress made during reporting period, anticipated date of completion, and any other pertinent information relative to the requirement. This narrative should be included in the text boxes noted after each reporting section. The text boxes also provide the permittee and opportunity to include any additional details on the requirements.***

***Throughout this template, and as required by the permit, there are sections that require the permittee to supply documents either by attaching them to their annual report email submission or supplying the direct website link where they can be found. The New Hampshire Stormwater Coalitions are recommending that permittees do both by attaching the documents to their annual report email submission AND supplying the direct website link. This ensures that EPA receives all required documents.***

**Self-Assessment**

Select the impairment(s) and/or TMDL(s) that are applicable to your MS4. Make sure you are referring to the 2018 EPA approved Section 303(d) Impaired Waters List which was used for the Year 4 reporting period and can be found here: <https://www.des.nh.gov/sites/g/files/ehbemt341/files/documents/2020-01/2018-epa-approval-20200225.pdf>.

All **Appendix F and H** **requirements** can be found under “Appendix F and H: Water Quality Limited Waters & TMDLs” section of this report.

***Instructions: Check all that apply.***

Impairment(s)

 [ ]  Bacteria/Pathogens [ ]  Chloride [ ]  Nitrogen

 [ ]  Phosphorus [ ]  Solids/ Oil/ Grease (Hydrocarbons)/ Metals

TMDL(s)

 [ ]  Bacteria and Pathogens [ ]  Chloride [ ]  Lake and Pond Phosphorus

# Receiving Waters/Impaired Waters/TMDL

***Instructions: Use the*** [***Municipal Water Quality Report based off the 2018 303(d) list organized by community***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2021/10/2018-Municipal-Water-Quality-Report-List.xlsx) ***located on the MS4 Blog to find your communities impaired waterbodies.***

Have you made any changes to your lists of receiving waters, outfalls, or impairments since the NOI was submitted?

 ***The municipality should choose one of the following statements:***

[ ]  Yes

##MUNICIPALITY has made changes to the list of receiving waters, outfalls, or impairments since the NOI submission. The following impairments and/or TMDLs have been added or delisted:

Water Quality Impaired Waters:

TMDL:

***Or***

[ ]  No

##MUNICIPALITY has not made changes to the list of receiving waters, outfalls, or impairments since the NOI submission.

***Instructions: If any of the requirements above were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete requirements **OR** note asNot Applicable.

# Minimum Control Measures

***Instructions: Please fill out all of the metrics below. If applicable, include in the description who completed the task if completed by a third party.***

***The following describes SSC or NHLMV Education & Outreach decisions made collectively and available on the*** [***MS4 Blog***](https://www4.des.state.nh.us/nh-ms4/?page_id=54) ***located under the MCM #1 section. This language should also be included in your SWMP.***

## MCM 1: Public Education

Total number of all MS4 related educational efforts completed ***during this reporting period***: ##Number of educational efforts.

**BMP: Grass and Fertilizer**

##### Outreach Resources:

##### Green Grass & Clear Water Brochure: <https://www4.des.state.nh.us/nh-ms4/?page_id=54>.

##### Description:

#####

##### *The municipality should choose one of the following statements:*

##### Distribution and promotion of flyers and social media posts produced by UNH Cooperative Extension, NH Sea Grant, and NHDES outlining simple recommendations to keep lawns healthy while reducing water quality impacts - including proper fertilizer techniques and disposal of grass clippings.

***Or***

##### ##Municipal Campaign (Display at event, public presentation etc.)

##### Targeted Audience:

##### Residential and/or Business and Institutions

##### Responsible Department/ Parties:

#####  ##Department/ Parties who were responsible for this MS4 outreach effort

**Measurable Goal(s**):

***The municipality should choose one of the following statements:***

Lawn care enthusiast residents understand the potential water quality impacts from fertilizer and improper disposal of grass clippings and are aware of the proper lawn care management techniques for reducing those impacts. Measurement includes quantity of materials distributed.

Following is the number of flyers that were distributed ***during this reporting period***:

Year 4 = ##Number

Following is the number of impressions the social media posts received ***during this reporting period***:

Year 4 = ##Number

***Or***

##### ##Municipal Campaign Metrics (Location and number of people who viewed display at event, number of people who attended the public presentation, etc.) *during this reporting period*

##### Goal was achieved.

**Message Date:** ##Date

**BMP: Pet Waste Disposal**

##### Outreach Resources:

##### "Every Drop" post cards or flyer <https://www4.des.state.nh.us/nh-ms4/?page_id=54>

##### Description:

##### *The municipality should choose one of the following statements:*

##### Distribution and promotion of "Every Drop" post cards or flyers with proper pet waste management, impacts of improper management, pet waste ordinance, and disposal requirements messaging. May include pledge to pick up pet waste to be made available during dog registration and other events or venues (veterinarians, dog training, groomers, etc.). Every Drop is a collaborative education effort with PREP, NHDES and other partners.

***Or***

##### ##Municipal Campaign (Display at event, installation of dog waste stations, etc.)

#####

##### Targeted Audience:

##### Residents - Pet Owners

##### Responsible Department/ Parties:

#####  ##Department/ Parties who were responsible for this MS4 outreach effort

**Measurable Goal(s):**

***The municipality should choose one of the following statements:***

Dog owners and/or dog walkers are aware of the potential water quality impacts from pet waste, local pet waste ordinances, and how to dispose of pet waste properly. If pledges are signed, there will be an increase of dog owners committed to picking up pet waste.

Following is the number of residents that pledged through the PREP “Every Drop” website ***during this reporting period***:

 Year 4 = ##Number

***Or***

##### ##Municipal Campaign Metrics (Number of social media views, location and number of people who viewed display at event, number of dog waste stations installed, etc.) *during this reporting period*

**Goal was achieved.**

**Message Date:** Summer or time of license renewal or municipal campaign ##Date

**BMP: Disposal of Leaf and Grass Clippings**

##### Outreach Resources:

##### <https://www4.des.state.nh.us/nh-ms4/?page_id=54>

##### Description:

##### *The municipality should choose one of the following statements:*

##### Distribute and promote informational flyers, pledge cards, and/or door hangers, with messaging about impacts from yard waste to waterbodies, alternatives to dumping yard waste and laws against dumping yard waste near or in waterbodies.

***Or***

##### ##Municipal Campaign (Display at event, public presentation etc.)

##### Targeted Audience:

##### Residential &/or Business and Institutions

##### Responsible Department/ Parties:

#####  ##Department/ Parties who were responsible for this MS4 outreach effort

**Measurable Goal(s):**

***The municipality should choose one of the following statements:***

Residents are aware of the water quality impacts of yard waste dumping near or in water bodies and safe alternatives for yard waste disposal.

Following is the number of ##flyers, pledge cards, or door hangers that were distributed ***during this reporting period***:

Year 4 = ##Number

***Or***

##### ##Municipal Campaign Metrics (Number of social media views, location and number of people who viewed display at event, number of people who attended the public presentation, etc.) *during this reporting period*

**Goal was achieved.**

**Message Date:** Fall ##Date

**BMP: Septic System Maintenance**

##### Outreach Resources:

##### <https://www4.des.state.nh.us/nh-ms4/?page_id=54>

##### Description:

##### *The municipality should choose one of the following statements:*

##### Distributed and promoted brochure or door hangers, directing to website to educate New Hampshire homeowners with septic systems on how to identify, locate and maintain those systems. Get Pumped NH is a collaborated effort between the New Hampshire Association of Septage Haulers (NHASH) and the New Hampshire Department of Environmental Services (NHDES).

***Or***

##### ##Municipal Campaign Metrics (Number of social media views, location and number of people who viewed display at event, number of people who attended the public presentation, etc.).

##### Targeted Audience:

##### Septic System Owners

##### Responsible Department/ Parties:

#####  ##Department/ Parties who were responsible for this MS4 outreach effort

**Measurable Goal(s):**

***The municipality should choose one of the following statements:***

Residents are aware of water quality impacts from septic systems, the importance of maintaining septic systems and how to maintain them.

Following is the number of flyers that were distributed ***during this reporting period***:

Year 4 = ##Number

***Or***

##### ##Municipal Campaign Metrics (Number of social media views, location and number of people who viewed display at event, etc.) *during this reporting period*

**Goal was achieved.**

**Message Date:** Season Municipality to update ##Date

**BMP: Construction/Developers Outreach**

##### Outreach Resources:

##### <https://www4.des.state.nh.us/nh-ms4/?page_id=54>

**Description:**

***The municipality should choose one or both of the following statements:***

Provide the Construction General Permit outreach letter and brochure to developers, construction contractors, and other municipal or local organizations to educate them on both the new and updated requirements within the EPA 2022 Construction General Permit.

***And/Or***

Review the construction checklist with developers and construction contractors prior to the beginning of construction projects (pre-construction) to identify responsible parties, erosion control practices, other best management practices, and requirements for the EPA Construction General Permit as appropriate.

**Targeted Audience:**

Construction/ Developers

##### Responsible Department/ Parties:

#####  ##Department/ Parties who were responsible for this MS4 outreach effort

**Measurable Goal(s):**

Contractors, developers, and municipal or local organizations are made aware of the updates and changes made to the EPA 2022 Construction General Permit including the requirement that those who wish to be considered a qualified person to conduct inspections must meet EPA training standards. Contractors and developers are also made aware of the need for proper erosion control practices during construction work.

***The municipality should choose one or both of the following statements:***

Following is the number of brochures that were distributed to municipal or local organizations ***during this reporting period***:

Year 4 = ##Number

***And/Or***

Following is the number of outreach letters that were distributed to municipal or local organizations ***during this reporting period***:

Year 4 = ##Number

***The municipality should include the following statement:***

The ##Municipality held ##number pre-construction meetings, representing ##percentage of projects that received planning board approval and began construction ***during this reporting period*. Goal was achieved.**

**Message Date:** Ongoing.

***Instructions: If any of the requirements in MCM 1 were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete MCM 1 requirements **OR** note asNot Applicable.

## MCM 2: Public Participation

[ ]  Provided an opportunity for public participation in review and implementation of SWMP and complied with State Public Notice requirements as described in the ##MUNICIPALITY SWMP.

[ ]  Kept records relating to the permit available for 5 years and made available to the public

Describe the opportunity provided for public involvement in the development of the Stormwater Management Program (SWMP) ***during this reporting period***:

**Description:** The Stormwater Management Program (SWMP) was publicly reviewed at ##Municipality to enter information on how the SWMP was made available to the public. Documents and records relating to the permit are retained and available for 5 years to the public at ##location of where records are kept such as at town hall **AND/OR** on website.

**Measurable Goal(s):**

Input was received and records are maintained. **Goal was achieved.**

***Reporting the following is optional:***

Describe any other public involvement or participation opportunities conducted ***during this reporting period*:**

***The municipality should choose one of the following statements:***

Public involvement or participation opportunities are ancillary to daily operations.

***AND/OR***

##Municipality has conducted the following public involvement or participation opportunities ##Note any public involvement or participation opportunities such as Touch-A-Truck, Household Hazardous Waste Collection Day, Enviroscape Demonstration, etc.

***Instructions: If any of the requirements in MCM 2 were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below***.

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete MCM 2 requirements **OR** note asNot Applicable.

## MCM 3: Illicit Discharge Detection and Elimination

## (IDDE)

### Sanitary Sewer Overflows (SSOs)

***Instructions: The information below can/should be found in your municipal IDDE Program Plan. For reference, the New Hampshire Stormwater Coalition created a template that can be found on the*** [***MS4 Blog***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/06/IDDE-PLAN_May_2019_Man_Nash_Coal_20190531.docx)***.***

***The municipality should choose one of the following statements:***

### [ ]  This SSO section is NOT applicable because we DO NOT have sanitary sewer.

### [ ]  This SSO section is NOT applicable because we DID NOT find any new SSOs.

[ ]  The SSO inventory has been updated, including the status of mitigation and corrective measures implemented or was addressed and can be found in submission **AND/OR** found at the following website ##website link.

*Below, report on the number of SSOs identified in the MS4 system and removed:*

Number of SSO’s identified ***during this reporting period***: ##Number

Number of SSO’s removed ***during this reporting period***: ##Number

### MS4 System Mapping

***Instructions: The information below can/should be found in your municipal IDDE program plan. For reference, the New Hampshire Stormwater Coalition created a template that can be found on the*** [***MS4 Blog***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/06/IDDE-PLAN_May_2019_Man_Nash_Coal_20190531.docx)***.***

[ ] Updated system map due in Year 2 as necessary:

 Provide additional status information regarding your map:

 ***The municipality should choose one of the following statements:***

 Map of storm sewer system and associated outfalls was completed in Year 2 and there have been no updates since that time.

 ***Or***

 Map of storm sewer system and associated outfalls was updated in Year(s) ## Year Number and there were no updates in Year 4.

***Or***

Map of storm sewer system and associated outfalls was updated in Year(s) ## Year 2 and/or Year 3 and there were updates in Year 4.

***Or***

 Map of storm sewer system and associated outfalls is continually updated to reflect findings and changes.

### Screening of Outfalls/Interconnections

***Instructions: Submit any outfall monitoring results (dry and/or wet weather) from this reporting period. Outfall monitoring results should include the date, outfall/interconnection identifier, location, weather conditions at time of sampling, precipitation in previous 48 hours, field screening parameter results, and results from all analyses.***

***The information below can/should be found in your municipal IDDE program plan. For reference, the New Hampshire Stormwater Coalition created a template that can be found on the*** [***MS4 Blog***](https://www4.des.state.nh.us/nh-ms4/?page_id=54)***.***

[ ]  No outfalls were inspected for dry weather screening ***during this report period***.

[ ]  Dry weather outfall screening data can be found in submission **AND/OR** found at the following website ##website link.

**Dry Weather Screening**

Number of outfalls screened ***during this reporting period***: ##Number

 Percent of total known outfalls screened to date ***during this reporting period***: ##Percentage

***Instructions: Include the updated inventory and ranking outfalls/interconnections based on monitoring results.***

 ***The municipality should choose one of the following statements:***

*The inventory and ranking of outfalls/interconnections was not updated during Year 4 because outfalls/interconnections were not inspected.*

***Or***

*The inventory and ranking of outfalls/interconnections was updated and the IDDE Program Plan was revised as a result. The revised inventory and ranking of outfalls/interconnections can be found in submission* ***AND/OR*** *found at the following website ##website link.*

**Wet Weather Screening**

***Instructions: Wet weather testing was not required in Year 4 and is due in Year 7. However, any wet weather sampling that was completed during Year 4 is required to be submitted to EPA as part of the Year 4 Annual Report.***

 ***The municipality should choose one of the following statements:***

[ ]  No outfalls were inspected for wet weather screening ***during this report period***.

[ ]  Wet weather outfall screening data can be found in submission **AND/OR** found at the following website ##website link.

Number of outfalls screened ***during this reporting period***: ##Number

 Percent of total outfalls screened to date ***during this reporting period***: ##Percentage

### Catchment Investigations

***Instructions: Submit all data collected during Year 4 during this reporting period for dry and/or wet weather investigations for Problem Outfalls and/or SVFs.***

***The information below can/should be found in your municipal IDDE Program Plan. For reference, the New Hampshire Stormwater Coalition created a template that can be found on the*** [***MS4 Blog***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/06/IDDE-PLAN_May_2019_Man_Nash_Coal_20190531.docx)***.***

***The municipality should choose one of the following statements:***

[ ]  No catchment investigations were conducted ***during this report period***.

[ ]  Catchment investigation data can be found in submission **AND/OR** found at the following website ##website link.

 Number of catchment investigations ***during this reporting period***: ##catchment investigations

Percentage of total catchments investigated to date (Years 1 - Year 4): ##Percentage

### IDDE Progress

***Instructions: If illicit discharges were found, please submit a document describing work conducted over this reporting period, and cumulative to date, including location source; description of the discharge; method of discovery; date of discovery; and date of elimination, mitigation, or enforcement OR planned corrective measures and schedule of removal.***

***The municipality should choose one of the following statements:***

[ ]  No illicit discharges were found ***during this reporting period***.

[ ]  The illicit discharges removal report can be found in submission **AND/OR** found at the following website ##website link.

 Number of illicit discharges identified ***during this reporting period***: ##Number

 Number of illicit discharges removed ***during this reporting period***: ##Number

 Estimated gallons of flow removed ***during this reporting period***: ##Number gallons/day

 Total number of illicit discharges identified since the effective date of the permit (July 1, 2018):

 ##Number

Total number of illicit discharges removed since the effective date of the permit (July 1, 2018): ##Number

### Employee Training

***Instructions:* Use the** [**IDDE Plan Template**](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/06/IDDE-PLAN_May_2019_Man_Nash_Coal_20190531.docx) **located on the MS4 Blog.**

***The information below can/should be found in your municipal IDDE Program Plan. For reference, the New Hampshire Stormwater Coalition created a template that can be found on the*** [***MS4 Blog***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/06/IDDE-PLAN_May_2019_Man_Nash_Coal_20190531.docx)***.***

[ ]  Provided training to employees involved in IDDE program ***during the reporting period***:

***The municipality should choose one of the following statements:***

##Municipal staff were trained using IDDE training videos and a written IDDE SOP created by UNH, the City of Dover, and NHDES. Video topics included collecting data and water samples in the field, analyzing for pertinent parameters as identified in the permit, how to identify an illicit discharge, and general IDDE sampling protocols. Training logs are included in Appendix F of the IDDE report.

In addition, as a routine, IDDE materials and training, including information on how to identify illicit discharges and SSOs are made available to applicable employees in accordance with IDDE plan.

***Or***

##Municipality held an IDDE training session for municipal staff on ##Date. In addition, as a routine, IDDE materials and training, including information on how to identify illicit discharges and SSOs are made available to applicable employees in accordance with IDDE plan. Training logs are included in Appendix F of the IDDE report.

***Instructions: If any of the requirements in MCM 3 were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete MCM 3 requirements **OR** note asNot Applicable.

## MCM 4: Construction Site Stormwater Runoff Control

The following tasks are in progress in accordance with the permit.

Number of site plan reviews completed ***during this reporting period***: ##Number

Number of inspections completed ***during this reporting period***: ##Number

Number of enforcement actions taken ***during this reporting period***: ##Number

***Reporting the following is optional:***

##Municipality works closely with contractors to address environmental concerns for the least environmental impact.

***Instructions: If any of the requirements in MCM 4 were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete MCM 4 requirements **OR** note asNot Applicable.

## MCM 5: Post-Construction Stormwater Management in New Development and Redevelopment

### Ordinance or Regulatory Mechanism

**Note: The permittee shall develop or modify, as appropriate, an ordinance or other regulatory mechanism due in Year 3.**

***Instructions: For reference, the New Hampshire Stormwater Coalition created the*** [***Post Construction Stormwater Management Standards for Site Plan Review Regulations***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/06/draft_swa_model_update_feb_2019.docx) ***and*** [***MCM #4 – Proposed Modifications Template***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/06/Stormwater-Regs-06-06-19-FINAL.docx) ***that can be found on the MS4 Blog.***

[ ]  ##Municipality has regulatory mechanism consistent with permit requirements 2.3.6.a.ii.

Date regulatory mechanism was adopted: Prior to July 1st 2021 or ##date adopted

A Post-Construction Ordinance has not been drafted or adopted. ##Update of ordinance progress.

### As-built Drawings

Number of as-built drawings received ***during this reporting period***: ##Number

### Retrofit Properties Inventory

### *Instructions:* *EPA has requested a minimum of 5 permittee-owned properties.*

### *For reference, use the Priority Ranked Parcel Summary Report on the* [*Pollutant Load Maps “Hot Spot Maps”*](https://www4.des.state.nh.us/nh-ms4/?page_id=1798) *page on the MS4 Blog.*

[ ]  Identified permittee-owned properties that could potentially be modified or retrofitted with BMPs to reduce impervious cover

##MUNICIPALITY has identified the following permittee-owned properties that could be modified or retrofitted with BMPs to mitigate impervious areas:

##List of permittee-owned properties

[ ]  Developed a report assessing current street design and parking lot guidelines and other local

requirements within the municipality that affect the creation of impervious cover, made it available as part of the SWMP, and:

***Instructions: For reference, use the*** [***Street Design and Parking Lot Regulations Assessment Report***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2022/04/2.3.6.c-and-2.3.6.d-Regulation-Assessment-Report-Template.docx) ***located on the MS4 Blog.***

[ ]  No updates were recommended.

[ ]  Updates were recommended. The anticipated date or date of completion for updates is ##date outlined in the report.

[ ]  Developed a report assessing local regulations to determine the feasibility of making green

infrastructure practices allowable when appropriate site conditions exist, made it available as part of the SWMP, and:

***Instructions: For reference, use the*** [***Street Design and Parking Lot Regulations Assessment Report***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2022/04/2.3.6.c-and-2.3.6.d-Regulation-Assessment-Report-Template.docx) ***located on the MS4 Blog.***

[ ]  No updates were recommended.

[ ]  Updates were recommended. The anticipated date or date of completion for updates is ##date outlined in the report.

***Instructions: If any of the requirements in MCM 5 were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete MCM 5 requirements **OR** note asNot Applicable.

## MCM 6: Good Housekeeping

### Catch Basin Cleaning

***Instructions: For reference, use the*** [***MCM #6 Good Housekeeping and Pollution Prevention Template***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/12/SWMP-Template-MCM-6-Year-1-2_update-20191231-FINAL.docx) ***on the MS4 Blog.***

[ ]  Properly stored and disposed of catch basin cleanings so they did not discharge to receiving waters

[ ]  Report on the actions taken if a catch basin sump is more than 50% full during two consecutive routine inspections/cleaning events:

***The municipality should include the following statements:***

Number of catch basins inspected ***during this reporting period***: ##Number

Number of catch basins cleaned ***during this reporting period***: ##Number

Total volume **or** mass of material removed from all catch basins ***during this reporting period***: ## Units ***(Make sure to include units)***

Total number of catch basins within the MS4 system: ##Number

***If applicable:***

Report on the actions taken if a catch basin sump is more than 50% full during two consecutive routine inspections/cleaning events:

***The municipality should include the following statement:***

A schedule for catch basin cleaning has been established with the goal of ensuring that a catch basin should not be more than 50% full.

### Street Sweeping

***Instructions: For reference, use the*** [***MCM #6 Good Housekeeping and Pollution Prevention Template***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/12/SWMP-Template-MCM-6-Year-1-2_update-20191231-FINAL.docx) ***on the MS4 Blog.***

[ ]  Properly stored and disposed of street sweepings so they did not discharge to receiving waters

[ ]  All curbed roadways were swept at least once within the reporting period

Number of (lane) miles swept ***during this reporting period***: ##

***The municipality should choose one of the following statements:***

Volume of swept material ***during this reporting period***: ## Units ***(Make sure to include units – cubic feet, cubic yards, cubic meters)***

***Or***

Mass of swept material ***during this reporting period***: ## Units ***(Make sure to include units – tons, pounds, kilograms)***

### Stormwater Pollution Prevention Plan (SWPPP)

***Instructions: For reference, use the*** [***Written SWPPP for Municipal Facilities Template***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/12/SSC_Template_SWPPP_12-12-2019.docx) ***on the MS4 Blog.***

[ ]  Implemented SWPPPs for all permittee owned or operated maintenance garages, public works yards, transfer stations, and other waste handling facilities

Number of site inspections completed for ***during this reporting period***: ##Number

Number of corrective actions taken ***during this reporting period***: ##Number

### Describe any corrective actions taken at a facility with a SWPPP:

***The municipality should choose one of the following statements:***

###  No corrective actions necessary

### *Or*

### ##Corrective actions taken.

### Operations and Maintenance (O & M) Programs

***Instructions: For reference, use the*** [***Written SWPPP for Municipal Facilities Template***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2019/12/SSC_Template_SWPPP_12-12-2019.docx) ***on the MS4 Blog.***

[ ] O&M programs for all permittee owned facilities have been completed and/or updated as noted below:

[ ]  Implemented all maintenance procedures for permittee owned facilities in accordance with O&M programs

[ ]  Updated inventory of all permittee owned facilities as necessary

***The municipality should choose one of the following statements:***

All permittee owned facilities, including an inventory, are included in our SWMP. There were no changes to report during Year 4.

***Or***

A review of all permittee owned facilities was completed and the inventory has been updated. The SWMP has been updated to reflect this and includes the following additional facilities: ##list of new facilities

[ ]  Implemented program for MS4 infrastructure maintenance to reduce the discharge of pollutants as outlined in the SWMP

[ ]  Inspected all permittee owned treatment structures (excluding catch basins) as outlined in the SWMP

[ ]  Enclosed all road salt storage piles or facilities and implemented winter road maintenance procedures to minimize the use of road salt as outlined in the SWMP

***Instructions: If any of the requirements in MCM 6 were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete MCM 6 requirements **OR** note asNot Applicable.

**Appendix F and H:**

**Water Quality Limited Waters & TMDLs**

**Bacteria/Pathogens Impairment (Appendix H) AND TMDL (Appendix F)**

***Instructions: All permittees should complete the requirements below. This due to the New Hampshire Stormwater Coalition deciding that since almost all the waterbodies in New Hampshire have bacteria/ pathogen impairments, all permittees would complete the bacteria/ pathogens requirements in Appendix H to reduce confusion.***

***Only complete if you have a bacteria/ pathogens impairment AND/OR TMDL***

[ ]  Annual message was distributed encouraging the proper management of pet waste, including noting any existing ordinances where appropriate ***during this reporting period***

[ ]  Permittee or its agent(s) disseminated educational material to dog owners at the time of issuance or renewal of dog license, or other appropriate time ***during this reporting period***

[ ]  Provided information to owners of septic systems about proper maintenance in any catchment that discharges to a water body impaired for bacteria ***during this reporting period***

***Instructions: If any of the Bacteria/ Pathogens Impairment (Appendix H) AND TMDL (Appendix F) requirements were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete Bacteria/ Pathogens Impairment (Appendix H) AND TMDL (Appendix F) requirements **OR** note asNot Applicable.

### Chloride Impairment (Appendix H)

***Instructions: For reference, use the*** [***Salt Reduction Plan Template***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2021/03/Appendix-H-Salt-Reduction-Plan-Template-Final-Done-1-1.docx) ***on the MS4 Blog.***

[ ]  Permittee does not have a chloride impairment

***Only complete if you have a chloride impairment***

[ ]  Updated Salt Reduction Plan as necessary ***during this reporting period*** and can be found in submission **AND/OR** found at the following website ##website link.

***Instructions: If any of the Chloride Impairment (Appendix H) requirements were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete Chloride Impairment (Appendix H) requirements **OR** note asNot Applicable.

### Nitrogen Impairment (Appendix H)

[ ]  Permittee does not have a nitrogen impairment

***Only complete if you have a nitrogen impairment***

[ ]  Distributed an annual message that encourages the proper use and disposal of grass clippings and encourages the proper use of slow-release fertilizers ***during this reporting period***

[ ]  Distributed an annual message encouraging the proper management of pet waste, including noting any existing ordinances where appropriate ***during this reporting period***

[ ]  Distributed an annual message encouraging the proper disposal of leaf litter ***during this reporting period***

***The municipality should choose one of the following statements:***

[ ]  Increased street sweeping frequency of all municipal owned streets and parking lots subject to Permit part 2.3.7.d.iii to a minimum of two times per year (spring and fall) ***during this reporting period***

***Or***

[ ]  Increased street sweeping frequency of all municipal owned streets and parking lots subject to Permit part 2.3.7.d.iii to a minimum of one time per year (spring) and implemented a fall leaf litter collection program in lieu of post-drop street sweeping ***during this reporting period***

 **Nitrogen Source Identification Report**

***Instructions: For reference, use the*** [***Nitrogen Source Identification Report***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2022/06/Nitrogen-Source-Identification-Report-Template-Final.docx) ***Template on the MS4 Blog.***

[ ]  The Nitrogen Source Identification Report can be found in submission **AND/OR** at ##Website.

 **Potential Structural BMPs**

The tracking and accounting elements associated with the NH MS4 permit are ongoing, adaptive and are consistent with Attachment 3 of Appendix F of the permit. Currently there is emergent utilization of a new database tracking system called the Pollutant Tracing and Accounting Program (PTAP) supported by NHDES and a select number of municipalities. Coalition communities understand the importance of this effort and are committed to continuing to work towards better tracking and accounting strategies for both structural and non-structural BMPs. PTAP theoretically has limitless expansion capacity in the region and is already integrated with the EPA Region 1 supported BMP Accounting and Tracking Tool (BATT). This emerging collaboration will be a large component of future implementation efforts. While BMP tracking and accounting programs are not fully functional, these integrated planning tools provide a comprehensive solution to successful tracking and accounting metrics now and moving forward in the future.

***Instructions: If any of the Nitrogen Impairment (Appendix H) requirements were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete Nitrogen Impairment (Appendix H) requirements **OR** note asNot Applicable.

### Phosphorus Impairment (Appendix H)

[ ]  Permittee does not have a phosphorus impairment

***Only complete if you have a phosphorus impairment***

[ ]  Distributed an annual message that encourages the proper use and disposal of grass clippings and encourages the proper use of slow-release fertilizers ***during this reporting period***

[ ]  Distributed an annual message encouraging the proper management of pet waste, including noting any existing ordinances where appropriate ***during this reporting period***

[ ]  Distributed an annual message encouraging the proper disposal of leaf litter ***during this reporting period***

***The municipality should choose one of the following statements:***

[ ]  Increased street sweeping frequency of all municipal owned streets and parking lots subject to Permit part 2.3.7.d.iii to a minimum of two times per year (spring and fall) ***during this reporting period***

***Or***

[ ]  Increased street sweeping frequency of all municipal owned streets and parking lots subject to Permit part 2.3.7.d.iii to a minimum of one time per year (spring) and implemented a fall leaf litter collection program in lieu of post-drop street sweeping ***during this reporting period***

 **Phosphorus Source Identification Report**

***Instructions: For reference, use the*** ***Phosphorus Source Identification Report*** ***Template on the MS4 Blog.***

[ ]  The Phosphorus Source Identification Report can be found in submission **AND/OR** at ##Website.

 **Potential Structural BMPs**

The tracking and accounting elements associated with the NH MS4 permit are ongoing, adaptive and are consistent with Attachment 3 of Appendix F of the permit. Currently there is emergent utilization of a new database tracking system called the Pollutant Tracing and Accounting Program (PTAP) supported by NHDES and a select number of municipalities. Coalition communities understand the importance of this effort and are committed to continuing to work towards better tracking and accounting strategies for both structural and non-structural BMPs. PTAP theoretically has limitless expansion capacity in the region and is already integrated with the EPA Region 1 supported BMP Accounting and Tracking Tool (BATT). This emerging collaboration will be a large component of future implementation efforts. While BMP tracking and accounting programs are not fully functional, these integrated planning tools provide a comprehensive solution to successful tracking and accounting metrics now and moving forward in the future.

***Instructions: If any of the Phosphorus Impairment (Appendix H) requirements were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete Phosphorus Impairment (Appendix H) requirements **OR** note asNot Applicable.

### Solids, Oil and Grease (Hydrocarbons), or Metals Impairment(s) (Appendix H)

[ ]  Permittee does not have a solids, oil and grease, or metals impairment(s)

***Only complete if you have a solids, oil and grease, or metals impairment(s)***

[ ] Increased street sweeping frequency of all municipal owned streets and parking lots to a schedule that targets areas with potential for high pollutant loads ***during this reporting period***

***Instructions: If any of the Solids, Oil and Grease (Hydrocarbons), or Metals Impairment(s) requirements were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete Solids, Oil and Grease (Hydrocarbons), or Metals Impairment(s) requirements **OR** note asNot Applicable.

### Chloride TMDL (Appendix F)

***Instructions: For reference, use the*** [***Salt Reduction Plan Template***](https://www4.des.state.nh.us/nh-ms4/wp-content/uploads/2021/03/Appendix-H-Salt-Reduction-Plan-Template-Final-Done-1-1.docx) ***on the MS4 Blog.***

[ ] Permittee does not have a chloride TMDL

***Only complete if you have a chloride TMDL.***

[ ]  Updated Chloride Reduction Plan as necessary ***during this reporting period*** and can be found in submission **AND/OR** found at the following website ##website link.

***Instructions: If any of the Chloride TMDL (Appendix F) requirements were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete Chloride TMDL (Appendix F) requirements **OR** note asNot Applicable.

### Lake and Pond Phosphorus TMDL (Appendix F)

***Instructions: For reference, use the resources on the*** [***Pollutant Load Maps “Hot Spot Maps”***](https://www4.des.state.nh.us/nh-ms4/?page_id=1798) ***page on the MS4 Blog.***

[ ] Permittee does not have a lake and pond phosphorus TMDL

***Only complete if you have a lake or pond phosphorus TMDL.***

[ ]  Calculated baseline phosphorus, allowable phosphorus load, and phosphorus reduction requirement ***during this reporting period***

[ ]  Defined the scope of the Lake Phosphorus Control Plan (LPCP).

***The municipality should choose one of the following statements:***

 The PCP scope is the entire area within our jurisdiction discharging to the impairedWaterbody ***during this reporting period***

***Or***

The PCP scope is the urbanized area portion of our jurisdiction discharging to the impaired

 Waterbody ***during this reporting period***

***Instructions: If any of the Lake and Pond Phosphorus TMDL (Appendix F) requirements were incomplete or if you would like to provide any additional relevant details about any of the requirements, use the space below.***

Describe progress made on any **incomplete requirements** listed above **or** optionally provide any additional relevant details, in the box below:

##Describe any progress made on any incomplete Lake and Pond Phosphorus TMDL (Appendix F) requirements **OR** note asNot Applicable.

**Additional Required Information**

**Monitoring or Study Results**

Results from all stormwater or receiving water quality monitoring or studies conducted ***during the reporting period*** and ***not otherwise mentioned above***, where the data is being used to inform permit compliance or permit effectiveness is:

[ ]  Not applicable

[ ]  The results from additional reports or studies are in submission AND/OR can be found at the following ##website.

***If applicable:***

If such monitoring or studies were conducted on your behalf or if monitoring or studies conducted by other entities were reported to you, a brief description of the type of information gathered or received shall be described below:

##Brief description of the type of information gathered or received

**Description of Any Changes in Identified BMPs or Measurable Goals**

***The municipality should choose one of the following statements:***

##MUNICIPALITY has implemented activities in accordance with the permit and outlined in the SWMP. All BMPs and measurable goals outlined in the SWMP are appropriate.

***Or***

##MUNICIPALITY made changes as noted below to the following BMPs and/or measurable goals that were outlined in the permit and identified in the SWMP.

##List the BMPS and/or measurable goals

### COVID-19 Impacts

***Reporting the following is optional:***

If any of the above Year 4 requirements could not be completed ***during this reporting period*** due to the impacts of COVID-19, please identify the requirement(s) that could not be completed, any actions taken to attempt to complete the requirement, and reason the requirement could not be completed below:

##List the requirements that were not completed, plan of action, and reason it could not be completed

### Activities Planned for Next Reporting Period

##MUNICIPALITY will continue to implement activities in accordance with the permit and SWMP.