Annual Report Format

National Pollutant Discharge Elimination System Stormwater Program MS4 Annual Report Format



Check box if you are submitting an individual Annual Report with one or more cooperative program	\times
elements.	

Check box if you are submitting an individual Annual Report with individual program elements only.

Check box if this is a new name, address, etc. \Box

1. MS4(s) Information

Rio Grande, HUC13020203

Sandoval County, New Mexico		
Name of MS4		
Dennis	Burn	Project Manager
Name of Contact Person (First)	(Last)	(Title)
505.771.8500	dburn@sandovalcountynm.go	vv
Telephone (including area code)	E-mail	
2708 Iris Road, NE		
Mailing Address		
Rio Rancho	NM	87144
City	State	ZIP code
What size population does your MS4	(s) serve? 108,503 N	PDES number
What is the reporting period for this r	report? (mm/dd/yyyy) From 07/01/2	2020 to 6/30/2021
• • • • •	e to waters listed as impaired on a state 30 d water, the impairment, whether a TMDI	3(d) list? ⊠ Yes □ No
whether the TMDL assigns a additional pages as necessar		e a new line for each impairment, and attach
Impaired Water	Impairment App	proved TMDL TMDL assigns WLA to MS4
Rio Grande, HUC13020203	eColi	Yes 🗌 No 🖂 Yes 🗌 No
Rio Grande, HUC13020203	PCB in fish tissue	Yes 🕅 No 🗌 Yes 🖾 No
Rio Grande, HUC13020203	PCB in water column	Yes 🖂 No 🗌 Yes 🖾 No

Gross Alpha

Yes

🖂 No

Yes

🛛 No

2. B. Continued

Impaired Water		Impairment AI		Approved TMDL TMD		WLA to MS4
			Yes	🗌 No	Yes	🗌 No
			Yes	🗌 No	Yes	🗌 No
			Yes	🗌 No	Yes	🗌 No
			🗌 Yes	🗌 No	Yes	🗌 No
C.	What specific sources con-	tributing to the impairment(s) are yo	ou targeting in	your storm	water program	?
Pet wa	ste, floatables, illicit discha	rges				
D.		igh-quality waters (e.g., Tier 2, Tier tate or federal designation)?	3, outstandin	g natural	Yes	🔀 No
E.	Are you implementing add	litional specific provisions to ensure	their continu	ed integrity	? 🗌 Yes	🔀 No
	pollutants?	blic Participation rogram targeting specific pollutants c sources and/or pollutants addresse			∑ Yes on program?	🗌 No
		1			1 0	
Pet wa	ste, floatables, illicit discha	irges				
C.		utcome(s) (e.g., quantified reduction le to your public education program				blications)
See su	mmary report from the Mic	ddle Rio Grande Storm Water Quali	ty Team			
D.		ommittee or other body comprised or regular input on your stormwater pr		nd other	Yes	🔀 No
4. A.	Construction Do you have an ordinance	or other regulatory mechanism stip	ulating:			
	Erosion and sediment cont	trol requirements?			🛛 Yes	No No
	Other construction waste c	control requirements?			🔀 Yes	🗌 No
	Requirement to submit con	nstruction plans for review?			🔀 Yes	🗌 No
	MS4 enforcement authorit	y?			🔀 Yes	🗌 No
B.	Do you have written proce	edures for:				
	Reviewing construction pl	ans?			🔀 Yes	🗌 No
	Performing inspections?				🔀 Yes	🗌 No
	Responding to violations?				Yes	🔀 No
C.	Identify the number of activity reporting period.	ive construction sites ≥ 1 acre in ope	eration in you	r jurisdictio	n at any time d	uring the
D.	How many of the sites ide		g this reporting	g period?	0	
E.	-	frequency with which your program				
		e inspected weekly. Qualified inspe				

F.	Do you pr	ioritize	certain	construction	sites fo	r more f	frequent i	nspections?
1.	Doyoupi	IOTILIZO	containi	construction	51105 10	1 more i	nequent i	inspections:

If Yes,	based	on	what	criteria?
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G. 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:

	Yes Notice of violation	0	No Authority					
	Yes Administrative fines	0	No Authority					
	Yes Stop Work Orders	0	No Authority					
	Yes Civil penalties	0	No Authority					
	Yes Criminal actions	0	No Authority					
	Yes Administrative orders	0	No Authority					
	Yes Other Contractural	Mechanisms]					
H.	. 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?							
I.	What are the 3 most common types of violations documented during this reporting period?							
J.	How often do municipal employees receive training on the construction program? As needed							
A.	Illicit Discharge Elimination Have you completed a map of all outfalls and receiving waters of your storm sewer Yes Yes No system?							
B.	. Have you completed a map of all storm drain pipes and other conveyances in the storm Yes X No sewer system?							
C.	. Identify the number of outfalls in your storm sewer system.							
D.	Do you have documented procedu	res, including fro	equency, for screening o	outfalls?	Yes	🔀 No		
E.	Of the outfalls identified in 5.C, he	ow many were so	creened for dry weather	discharges d	luring this repor	ting period?		
0								
F.	Of the outfalls identified in 5.C, ho obtained MS4 permit coverage?	ow many have be	een screened for dry wea	ather dischar	rges at any time	since you		

G. What is your frequency for screening outfalls for illicit discharges? Describe any variation based on size/type.

0

Sandoval County does not have any outfalls.

5.

- H. Do you have an ordinance or other regulatory mechanism that effectively prohibits illicit X Yes No No discharges?
- Do you have an ordinance or other regulatory mechanism that provides authority for you I. Yes 🛛 No to take enforcement action and/or recover costs for addressing illicit discharges?

	J.	During this reporting period, how many illicit discharges/illegal connections have you discovered?						
	K.	Of those illicit discharges/illegal connections that have been discovered or reported, how many have been						
		eliminated? 0						
	L.	How often do municipal employees receive training on the illicit discharge program?	As needed.					
6.		Stormwater Management for Municipal Operations						
•••	A.	Have stormwater pollution prevention plans (or an equivalent plan) been developed for:						
	Al	public parks, ball fields, other recreational facilities and other open spaces	Yes	🛛 No				
	Al	municipal construction activities, including those disturbing less than 1 acre	Yes	🔀 No				
	Al	municipal turf grass/landscape management activities	Yes	🛛 No				
	Al	municipal vehicle fueling, operation and maintenance activities	🔀 Yes	🗌 No				
	Al	municipal maintenance yards	🔀 Yes	🗌 No				
	Al	municipal waste handling and disposal areas	🔀 Yes	🗌 No				
	Ot	her						
	В.	Are stormwater inspections conducted at these facilities? \square Yes \square No						
	C.	If Yes, at what frequency are inspections conducted? As required						
	D.	List activities for which operating procedures or management practices specific to stormy been developed (e.g., road repairs, catch basin cleaning).	vater managemer	nt have				
				···				
Ρ	ublic	Works maintain roadways including drainage for erosion control. Visual inspections oc	cur to insure po	sitive flow.				
	E.	Do you prioritize certain municipal activities and/or facilities for more frequent inspection?	Yes	🔀 No				
	F. If Yes, which activities and/or facilities receive most frequent inspections?							
	G.	Do all municipal employees and contractors overseeing planning and implementation of stormwater-related activities receive comprehensive training on stormwater management.	? Yes	🗌 No				
	H.	If yes, do you also provide regular updates and refreshers?	X Yes	🗌 No				
	I.	If so, how frequently and/or under what circumstances?						
U	pdat	es and briefings are implemented at the beginning of each project.						
7.	A.	Long-term (Post-Construction) Stormwater Measures Do you have an ordinance or other regulatory mechanism to require:						
	Sit	e plan reviews for stormwater/water quality of all new and re-development projects?	X Yes	🗌 No				
		ng-term operation and maintenance of stormwater management controls?	Yes	No				
		trofitting to incorporate long-term stormwater management controls?	Yes	No				
		If you have retrofit requirements, what are the circumstances/criteria?						
		-						
	С	What are your criteria for determining which new/re-development stormwater plans you projects, projects disturbing greater than one acre, etc.)?	will review (e.g.	, all				

All projects that fall under the criteria which require a SWPPP.

D.	Do you require water quality or quantity design standards or performance standards, either directly or by reference to a state or other standard, be met for new development and re-development?	🔀 Yes 🗌 No
E.	Do these performance or design standards require that pre-development hydrology be met for:	
Fl	ow volumes	🛛 Yes 🗌 No
Pe	ak discharge rates	🛛 Yes 🗌 No
Di	scharge frequency	🛛 Yes 🗌 No
Fl	ow duration	🛛 Yes 🗌 No
F.	Please provide the URL/reference where all post-construction stormwater management standar	ds can be found.
ht	tp://www.sandovalcounty.gov/uploads/downloads/divisions/planningzoning/ordinance/sub	odivord.pdf
G.	How many development and redevelopment project plans were reviewed during the reporting p	period to assess
	impacts to water quality and receiving stream protection?	
H.	How many of the plans identified in 7.G were approved?	
I.	How many privately owned permanent stormwater management practices/facilities were inspec	cted during the
	reporting period? 0	
J.	How many of the practices/facilities identified in I were found to have inadequate maintenance	? 0
		0
К.		ied during
	inspections?	
L.	Do you have authority to take enforcement action for failure to properly operate and maintain stormwater practices/facilities?	Yes 🛛 No
M.	How many formal enforcement actions (i.e., more than a verbal or written warning) were taken	for failure to
	adequately operate and/or maintain stormwater management practices?	
N.	Do you use an electronic tool (e.g., GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?	Yes 🛛 No
0.	Do all municipal departments and/or staff (as relevant) have access to this tracking system?	Yes 🛛 No
Р.	How often do municipal employees receive training on the post-construction program? As no	eeded.
А.	Program Resources What was the annual expenditure to implement MS4 permit requirements this reporting period	? \$25,000.00
B.	What is next year's budget for implementing the requirements of your MS4 NPDES permit?	\$25,000.00
C.	This year what is/are your source(s) of funding for the stormwater program, and annual revenu	e (amount or
	percentage) derived from each? Source: MS4 Project Line Item in County Budget Amount \$	OR % 100
	Source: Amount \$	 OR %
	Source: Amount \$	OR %
D.	How many FTEs does your municipality devote to the stormwater program (specifically for im	plementing the
	stormwater program; not municipal employees with other primary responsibilities)?	

E. Do you share p	E. Do you share program implementation responsibilities with any other entities? 🛛 🖾 Yes 🗌 No						
Entity	Activity/Task/Responsibility	Your Oversight/Accountability Mechanism					
MRGSWQT	Public Outreach/Education	Signed Agreement					
СМС	Wet Weather Monitoring	Signed Agreement					
TAG	Technical Information Exchange	Signed Agreement					

9. Evaluating/Measuring Progress

A. What indicators do you use to evaluate the overall effectiveness of your stormwater 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 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:</i> E. coli	2003	Weekly April–September	20
E. coli	2016	Defined in monitoring plan	2
PCB's	2016	Defined in monitoring plan	2
Gross Alpha	2016	Defined in monitoring plan	2

B. What environmental quality trends have you documented over the duration of your stormwater program? Reports or summaries can be attached electronically, or provide the URL to where they may be found on the Web.

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10. Additional Information

Please attach any additional information on the performance of your MS4 program, including information required in Parts I.C, I.D, and III.B. If providing clarification to any of the questions above, please provide the question number (e.g., 2C) in your response.

Certification Statement and Signature

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.

Federal regulations require this application to be signed as follows: **For a municipal, State, Federal, or other public facility**: by either a principal executive or ranking elected official.

Signature

Dennis Burn, Project Manager

No No

X Yes

Name of Certifying Official, Title

Date (mm/dd/yyyy)