



VILLAGE OF TWIN LAKES

105 East Main Street P O Box 1024 Twin Lakes, Wisconsin 53181

Phone (262) 877-2858 Fax (262) 877-4019

SPECIAL VILLAGE BOARD MEETING FOLLOWING THE COMMITTEE OF THE WHOLE

Monday, April 4, 2022

Village Hall, 105 E. Main Street, Twin Lakes, WI

AGENDA

1. CALL TO ORDER
2. PLEDGE OF ALLEGIANCE
3. ROLL CALL: TRUSTEES ANDRES, BOWER, FITZGERALD, KAROW, KASKIN, KNOLL, PRESIDENT SKINNER
4. Consideration of a motion to approve submittal of Annual Report and other Compliance Documents for the Municipal Storm Sewer System (MS4) Permit.
5. Consideration of action taken at the March 9, 2022 Plan Commission meeting:
 - A. Recommended motion to approve a CSM for 150 Holy Hill Rd. Parcel #85-4-119-164-3501.
6. ADJOURN

*****MATTERS MAY BE TAKEN IN ORDER OTHER THAN LISTED*****

Requests from persons with disabilities, who need assistance to participate in this meeting or hearing, should be made to the Clerk Treasurer's office in advance so the appropriate accommodations can be made.

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.

Form 3400-224(R8/2021)

Reporting Information :

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

Project Name: 2021 Annual Report

County: Kenosha

Municipality: Twin Lakes, Village

Permit Number: S050075

Facility Number: 31155

Reporting Year: 2021

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
 - 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
 - Municipal Storm Water Management Facility (BMP) Inspection and Maintenance Plan
 - Total Maximum Daily Load documents (**If applicable, see permit for due dates.*)
 - TMDL Mapping*
 - TMDL Modeling*
 - TMDL Implementation Plan*
 - Fecal Coliform Screening Parameter *
 - Fecal Coliform Inventory and Map (*S050075-03 general permittees Appendix B B.5.2 – document due to the department by March 31, 2022*)
 - Fecal Coliform Source Elimination Plan (*S050075-03 general permittees Appendix B - document due to the department by October 31, 2023*)
- Sign and Submit form

Do not close your work until you SAVE.

Form 3400-224 (R8/2021)

Municipal Contact Information- Has Missing Items

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 Twin Lakes, Village

Facility ID # or (FIN): 31155

Updated Information: ☐ Check to update mailing address information

Mailing Address: 108 E. Main Street

Mailing Address 2:

City: Twin Lakes

State: Wisconsin

Zip Code: 53181 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: Laura

Last Name: Roesslein

☒ Select to **update** current contact information

Title: Administrator

Mailing Address: 108 E Main St

Mailing Address 2:

City: Twin Lakes

State: WI

Zip Code: 53181 xxxxx or xxxxx-xxxx

Phone Number: Ext: xxx-xxx-xxxx

Email:

Additional Contacts Information (Optional)

☐ I&E Program

**Individual with responsibility for:
(Check all that apply)**

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

First Name:

Last Name:

Title:

Mailing Address:

Mailing Address 2:

City:

State:

Zip Code:

xxxxx or xxxxx-xxxx

Phone Number:

Ext:

xxx-xxx-xxxx

Email:

1. Does the municipality rely on another entity to satisfy some of the permit requirements?

☐ 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

Missing Information

Email is a required field , Phone Number xxx-xxx-xxxx is a required field ,

Do not close your work until you SAVE.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7.

Form 3400-224 (R8/2021)

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 Delivery Mechanism that best describes how the topics were conveyed to your population. Use the Add Event to add additional entries.

Event Start Date	1/1/2021		
Project/Event Name	Website		
Delivery Mechanism	Website *Active		
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input checked="" type="checkbox"/> Illicit discharge detection and elimination <input type="checkbox"/> Household hazardous waste disposal/pet waste management/vehicle washing <input checked="" type="checkbox"/> Yard waste management/pesticide and fertilizer application <input type="checkbox"/> Stream and shoreline management <input checked="" type="checkbox"/> Residential infiltration <input type="checkbox"/> Construction sites and post-construction storm water management <input checked="" type="checkbox"/> Pollution prevention <input type="checkbox"/> Green infrastructure/low impact development <input type="checkbox"/> Other: <input type="text"/>	<input checked="" type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input checked="" type="checkbox"/> Residents <input checked="" type="checkbox"/> Businesses <input checked="" type="checkbox"/> Contractors <input checked="" type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other	Select...	<input type="radio"/> Yes <input type="radio"/> No

Event Start Date	1/1/2021		
Project/Event Name	Posters		
Delivery Mechanism	Passive print media *Active		
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input checked="" type="checkbox"/> Illicit discharge detection and elimination <input checked="" type="checkbox"/> Household hazardous waste disposal/pet waste management/vehicle washing <input checked="" type="checkbox"/> Yard waste management/pesticide and fertilizer application <input checked="" type="checkbox"/> Stream and shoreline management <input checked="" type="checkbox"/> Residential infiltration <input checked="" type="checkbox"/> Construction sites and post-construction storm water management <input type="checkbox"/> Pollution prevention <input type="checkbox"/> Green infrastructure/low impact development <input type="checkbox"/> Other: <input type="text"/>	<input checked="" type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other	Select...	<input type="radio"/> Yes <input type="radio"/> No

b. Brief explanation on Public Education and Outreach reporting. *Limit response to 250 characters and/or attach supplemental information on the attachments page.*

Missing Information

Do not close your work until you **SAVE**.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (R8/2021)

Minimum Control Measures - Section 2 : Complete

2. Public Involvement and Participation

a. Permit Activities. Complete the following information on Public Involvement and Participation Activities related to storm water. Select the Delivery Mechanism that best describes how the permit activities were conveyed to your population. Use the Add Event to add additional entries.

Event Start Date	3/15/2021		
Project/Event Name	Lake District Meeting		
Delivery Mechanism	Government Event (Public Hearing, Council Meeting, etc)		
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input checked="" type="checkbox"/> MS4 Annual Report <input type="checkbox"/> Storm Water Management Program <input type="checkbox"/> Storm Water related ordinance <input type="checkbox"/> Other: <div></div>	<input checked="" type="checkbox"/> General Public <input checked="" type="checkbox"/> Public Employees <input checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other	Select...	<input type="radio"/> Yes <input type="radio"/> No

b. Volunteer Activities. Complete the following information on Public Involvement and Participation Activities related to storm water. Select the Delivery Mechanism that best describes how volunteer activities were conveyed to your population. Use the Add Event to add additional entries.

Event Start Date	1/1/2021 <input type="checkbox"/> NA (Individual Permittee).		
Project/Event Name	None this year		
Delivery Mechanism	Clean up event		
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
Volunteer Opportunity	<input type="checkbox"/> General Public <input type="checkbox"/> Public Employees	Select...	<input type="radio"/> Yes <input type="radio"/> No

<input checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other		
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c. Brief explanation on Public Involvement and Participation reporting. *Limit response to 250 characters and/or attach supplemental information on the attachments page.*

The Village did not complete any volunteer program work in 2021, but the Village does have a stormwater committee that meets about once a quarter to discuss potential projects.

Missing Information

Do not close your work until you **SAVE**.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (R8/2021)

Minimum Control Measures - Section 3 : Complete

3. Illicit Discharge Detection and Elimination

- | | | |
|---|----|---------------------------------|
| a. How many total outfalls does the municipality have? | 22 | <input type="checkbox"/> Unsure |
| b. How many outfalls did the municipality evaluate as part of their routine ongoing field screening program? | 22 | <input type="checkbox"/> Unsure |
| c. From the municipality's routine screening, how many were confirmed illicit discharges? | 0 | <input type="checkbox"/> Unsure |
| d. How many illicit discharge complaints did the municipality receive? | 0 | <input type="checkbox"/> Unsure |
| e. From the complaints received, how many were confirmed illicit discharges? | 0 | <input type="checkbox"/> Unsure |
| f. How many of the identified illicit discharges did the municipality eliminate in the reporting year (from both routine screening and complaints)? | 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 enter the number of each used in the reporting year. ☐ Unsure

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

Additional Information: _____

- h. Brief explanation on Illicit Discharge Detection and Elimination reporting. *If you marked Unsure for any questions above, justify the reasoning. Limit response to 250 characters and/or attach supplemental information on the attachments page.*

Missing Information

Do not close your work until you SAVE.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (R8/2021)

Minimum Control Measures - Section 4 : Complete

4. Construction Site Pollutant Control

- a. How many total construction sites with one acre or more of land disturbing construction activity were active at any point in the reporting year? ☐ Unsure
- b. How many construction sites with one acre or more of land disturbing construction activity did the municipality issue permits for in the reporting year? ☐ Unsure
- c. How many erosion control inspections did the municipality complete in the reporting year (at sites with one acre or more of land disturbing construction activity)? ☐ Unsure
- d. 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. ☐ Unsure
- | | |
|---|--------------------------------|
| <input type="checkbox"/> No Authority | |
| <input checked="" type="checkbox"/> Verbal Warning | <input type="text" value="1"/> |
| <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"/> |
| <input checked="" type="checkbox"/> Stop Work Order | <input type="text" value="0"/> |
| <input checked="" type="checkbox"/> Forfeiture of Deposit | <input type="text" value="0"/> |
| <input type="checkbox"/> Other - Describe below | <input type="text"/> |
- e. Brief explanation on Construction Site Pollutant Control reporting. *If you marked Unsure for any questions above, justify the reasoning. Limit response to 250 characters and/or attach supplemental information on the attachments page.*

Missing Information

Do not close your work until you SAVE.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (R8/2021)

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. Does the permittee have procedures for inspecting and maintaining private storm water facilities? ☒ Yes ☐ No ☐ Unsure

- c. If Yes, how many privately owned storm water management facilities were inspected in the reporting year ? ☐ Unsure
Inspections completed by private landowners should be included in the reported number.

- d. 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. ☐ Unsure

☐ 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

- e. Brief explanation on Post-Construction Storm Water Management reporting . If marked 'Unsure' on any questions above, justify your reasoning. Limit your response to 250 characters and/or attach supplemental information on the attachments page.

Missing Information

Do not close your work until you SAVE.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (R8/2021)

Minimum Control Measures - Section 6 : Complete

6. Pollution Prevention

Storm Water Management Facility Inspections ☐ Not Applicable

- a. Enter the total number of municipally owned or operated structural storm water management facilities? 1 ☐ Unsure
- b. How many new municipally owned storm water management facilities were installed in the reporting year? 0 ☐ Unsure
- c. How many municipally owned storm water management facilities were inspected in the reporting year? 1 ☐ Unsure
- d. What elements are looked at during inspections (250 character limit)?

Interior inspection of the concrete structure, cleaning of the steel screen

- e. How many of these facilities required maintenance? 1 ☐ Unsure
- f. Brief explanation on Storm Water Management Facility inspection reporting. *If you marked Unsure for any questions above, justify the reasoning. Limit response to 250 characters and/or attach supplemental information on the attachments page.*

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

- g. How many municipal properties require a SWPPP? 1 ☐ Unsure
- h. How many inspections of municipal properties have been conducted in the reporting year? 1 ☐ Unsure
- i. Have amendments to the SWPPPs been made?
☐ Yes ☒ No ☐ Unsure
- j. If yes, describe what changes have been made. Limit response to 250 characters and/or attach supplemental information on the attachment page:
- k. Brief explanation on Storm Water Pollution Prevention Plan reporting. *If you marked Unsure for any questions above, justify the reasoning. Limit response to 250 characters and/or attach supplemental information on the attachments page.*

Collection Services - Street Sweeping / Cleaning Program ☐ Not Applicable

- l. Did the municipality conduct street sweeping/cleaning during the reporting year?
☒ Yes ☐ No ☐ Unsure
- m. If known, how many tons of material was removed? ☐ ☒ Unsure
- n. Does the municipality have a low hazard exemption for this material? ☐ Yes ☒ No
- o. If street cleaning is identified as a storm water best management practice in the

pollutant loading analysis, was street cleaning completed at the assumed frequency?

- ☒ Yes - Explain frequency Once per month during non-snow months
- ☐ No - Explain _____
- ☐ Not Applicable

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

- p. Did the municipality conduct catch basin sump cleaning during the reporting year? ☒ Yes ☐ No ☐ Unsure
- q. How many catch basin sumps were cleaned in the reporting year? 72 ☐ Unsure
- r. If known, how many tons of material was collected? ☒ Unsure
- s. Does the municipality have a low hazard exemption for this material? ☐ Yes ☒ No
- t. If catch basin sump cleaning is identified as a storm water best management practice in the pollutant loading analysis, was cleaning completed at the assumed frequency?
- ☒ Yes- Explain frequency Yes Annually
- ☐ No - Explain _____
- ☐ Not Applicable

Collection Services - *Leaf Collection Program* ☐ Not Applicable

- u. Does the municipality conduct curbside leaf collection? ☐ Yes ☒ No ☐ Unsure
- v. Does the municipality notify homeowners about pickup? ☐ Yes ☒ No ☐ Unsure
- w. Where are the residents directed to store the leaves for collection?
- ☐ Pile on terrace ☐ Pile in street ☐ Bags on terrace ☐ Unsure
- ☒ Other - Describe Not allowed
- x. What is the frequency of collection?
- N/A
- y. Is collection followed by street sweeping/cleaning? ☐ Yes ☐ No ☐ Unsure
- z. Brief explanation on Collection Services reporting. *If you marked Unsure for any questions above, justify the reasoning. Limit response to 250 characters and/or attach supplemental information on the attachments page*

Winter Road Management ☐ Not Applicable

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

- aa. How many lane-miles of roadway is the municipality responsible for doing snow and ice control? 39 ☐ Unsure
- ab. 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	0	53	559	581	81
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Liquids (gallons) (ex. brine)

	Oct	Nov	Dec	Jan	Feb	Mar
None						

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

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

Training Date	Training Name	# Attendance

ae. Brief explanation on Winter Road Management reporting. *If you marked Unsure for any questions above, justify the reasoning. Limit response to 250 characters and/or attach supplemental information on the attachments page*

Internal (Staff) Education & Communication

af. 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):

Wisconsin Sedimentation and Erosion Control Inspection

When: 6/14/2021

How many attended: 1

ag. 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

Annual Report Shared at Village Meeting

Municipal Officials

Meeting with Village Engineer, DNR

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

Regular Staff Meetings

ah. Brief explanation on Internal Education reporting. *If you marked Unsure for any questions above, justify the reasoning. Limit response to 250 characters and/or attach supplemental information on the attachments page.*

Missing Information

Do not close your work until you SAVE.

Note: For the minimum control measures, you must fill out all questions in sections 1 through 7

Form 3400-224 (R8/2021)

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 explanation on Storm Sewer System Map reporting. *If you marked Unsure for an question for any questions above, justify the reasoning. Limit response to 250 characters and/or attach supplemental information on the attachments page.*

Missing Information

Do not close your work until you SAVE.

Form 3400-224 (R8/2021)

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

0	500	500	<u>General revenue fund</u>
---	-----	-----	-----------------------------

Element: Public Involvement and Participation

0	500	500	<u>General revenue fund</u>
---	-----	-----	-----------------------------

Element: Illicit Discharge Detection and Elimination

0	0	0	<u>General revenue fund</u>
---	---	---	-----------------------------

Element: Construction Site Pollutant Control

0	0	0	<u>General revenue fund</u>
---	---	---	-----------------------------

Element: Post-Construction Storm Water Management

0	500	500	<u>General revenue fund</u>
---	-----	-----	-----------------------------

Element: Pollution Prevention

5000	5000	5000	<u>General revenue fund</u>
------	------	------	-----------------------------

Other (describe)

<input type="text"/>		
<input type="text"/>	<input type="text"/>	<input type="text"/>

Select...

Please provide a justification for a "0" entered in the Fiscal Analysis. *Limit response to 250 characters.*

The zeros in the analysis are a result of inspection costs which were not properly tracked

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

Storm Water Quality Management

a. Has the municipality completed or updated modeling in the reporting year (relating to developed urban area performance standards of s. NR 151.13(2)(b)1., Wis. Adm. Code)? ☐ Yes ☒ No

b. If yes, enter percent reduction in the annual average mass discharging from the entire MS4 to surface waters of the state as compared to implementing no storm water management controls:

Total suspended solids (TSS) | |

Total phosphorus (TP) | |

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.*

.....

.....

Missing Information

Do not close your work until you SAVE.

Form 3400-224 (R8/2021)

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

Do not close your work until you **SAVE**.

Form 3400-224(R8/2021)

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.

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

EO Program

 File Attachment

[TwinLakesMS4ProgramPlan.pdf](#)

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

Missing Information

Draft and Share PDF Report with the permittee's governing body or delegated representatives.

Press the button below to create a PDF. The PDF will be sent to the email address associated with the WAMS ID that is signed in. After the annual report has been reviewed by the governing body or delegated representative, return to the MS4 eReporting System to submit the final report to the DNR.

[Draft and Share PDF Report](#)

Do not close your work until you **SAVE**.

Form 3400-224(R8/2021)

Complete and Submit Your Application

You have not completed all areas of the application. Please return to the application and complete all missing items.

Contact Information: Has Missing Items

Minimum Control Measures Section 1: Complete

Minimum Control Measures Section 2: Complete

Minimum Control Measures Section 3: Complete

Minimum Control Measures Section 4: Complete

Minimum Control Measures Section 5: Complete

Minimum Control Measures Section 6: Complete

Minimum Control Measures Section 7: Complete

Attachments: Complete

Final Evaluation: Complete