

Instructions for Secondary Permittees

Filling out the Annual Report Form

Phase I and Phase II Municipal Stormwater General Permits

1. Complete all TABS in the worksheet: (1) Permittee Information; (2) Certification; (3) ANNUAL REPORT (Section VI); (4) Info Collection (Monitoring).
2. The Certification form/TAB must be signed and certified by the responsible official(s). Two copies of all TABs (except the INSTRUCTIONS) must be printed out and mailed to Ecology.
3. Answer every question. Use the *Comments* and *Attachment* fields only when necessary to provide additional information.
4. Use the following table to guide filling out the Y/N/NA field in ANNUAL REPORT (Section VI). See below.
5. Save your completed Annual Report and email the Excel worksheet PLUS attachments to: PH12_SecAnnRpt@ecy.wa.gov. **Ecology cannot accept incomplete or partially completed Annual Report forms.**

<p>If you met the permit requirement by the deadline in the permit....</p>	<p>Mark <u>Y</u> in the Y/N/NA field.</p> <p>You may choose to provide additional detail about activities for the reporting period in the <i>Comments</i> field.</p>
<p>If you did not meet the permit requirement by the deadline in the permit....</p>	<p>Mark <u>N</u> in the Y/N/NA field.</p> <p>Provide following information in <i>Comments</i> field: “reasons why, corrective steps taken and proposed, and expected dates that the deadline will be met.” [See S9.E.2.d for full description of required additional information.]</p>
<p>If the requirement does not apply to you or is not yet due.....</p>	<p>Mark <u>NA</u> in the Y/N/NA field.</p> <p>Note in the <i>Comments</i> field that the requirement does not apply because it is not yet due.</p>

REMINDER: Proceed to the **Permittee Information (I-III) tab next.**

I. Permittee Information	
Permittee Name State of Washington	Permittee Coverage Number WAR 04-510
Contact Name Nathaniel Jones	Date of Permit Coverage 8/8/2008
Mailing Address 210 11th Ave SW, Rm 405	Phone number (360) 902-0944
City Olympia	State Zip + 4 WA 98504-1011
Email Address njones@ga.wa.gov	

II. Regulated Small MS4 Location							
Municipal Entity State of Washington	Entity Type: Mark X in the box that applies						
	<table border="1"> <tr> <td>County</td> <td>City/Town</td> <td>Other</td> </tr> <tr> <td></td> <td></td> <td>State</td> </tr> </table>	County	City/Town	Other			State
County	City/Town	Other					
		State					
Major Receiving Water(s) Capitol Lake & Budd Inlet							

III. Relying on another Governmental Entity	
<p>If you are relying on another governmental entity to satisfy one or more of the permit obligations, list the entity and briefly describe the permit obligation(s) they are implementing on your behalf below. <i>Attach a copy of your agreement with the other entity to provide additional detail (unless previously submitted).</i></p>	
Name of Entity:	Permit Obligation(s):
City of Olympia	Education outreach
	New construction permitting
	Shared spill response

IV. Certification

All annual reports must be signed and certified by the responsible official(s) of permittee or co-permittees. Please print and sign this page of the reporting form and mail it (with an original signature) to Ecology at the address noted below. An electronic signature will not suffice.

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 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 willful violations.

Name _____	Title Assistant Director	Date _____
Name _____	Title _____	Date _____
Name _____	Title _____	Date _____
Name _____	Title _____	Date _____
Name _____	Title _____	Date _____

VI. Status Report Covering Calendar Year: 2009

Name of permitted entity: Administration

PLEASE label reporting year and your entity name, above.

PLEASE refer to the INSTRUCTIONS tab for assistance filling out this table.

NOTE: For clarification on how to answer questions, place cursor over cell with red flag in corner.

NOTE: Items that have future compliance dates must still be answered to indicate status.

PLEASE label information in any attachments with corresponding question numbers.

PLEASE review your work for completeness and accuracy. Save this worksheet as you go!

Question		Y/N/NA	#	Comments (50 word limit)	Name of Attachment & Page Number, if applicable
S6.D Stormwater Management Program					
1	Attached a copy of the Permittee's Stormwater Management Program document (SWMP) as per S6.A.5. (<i>Required</i> annually)	Y		No change from 2008	Stormwater Management Program for Washington State Capitol Campus
2	Attached a notification of any jurisdictional boundary changes resulting in an increase or decrease in the Permittee's geographic area of coverage during the reporting period, and implications for the SWMP. (<i>Required</i> annually, S9.F.2)	NA		No change in jurisdictional boundary	
S.6.D.1 Public Education and Outreach					
3	Labeled at least 50% of all storm drain inlets owned or operated by the Permittee that are located in maintenance yards, in parking lots, along sidewalks, and at pedestrian access points. (<i>Required</i> by 3 years from date of permit coverage or date established by Ecology, S6.D.1.a)	Y		Labeled 100% of affected inlets.	
3a	Number of inlets labeled:		150		

Question		Y/N/NA	#	Comments (50 word limit)	Name of Attachment & Page Number, if applicable
4	(Public ports, colleges and universities only) Distributed educational information to tenants and residents about the impact of stormwater discharges on receiving waters and steps that can be taken to reduce pollutants in stormwater runoff. <i>(Required by 3 years from date of permit coverage, S6.D.1.b)</i>	Y		1. Commute Trip Reduction materials 2. Pet waste addressed through our "blue-bag" dispensers in parks. 3. Public education to be coordinated with City of Olympia, under an ILA being developed	
5	Labeled all storm drain inlets owned or operated by the Permittee that are located in maintenance yards, in parking lots, along sidewalks, and at pedestrian access points. <i>(Required by August 15, 2011 or date established by Ecology, S6.D.1.a.ii)</i>	Y		Labeled 100% of affected inlets.	
5a	Number of inlets labeled:		150		
6	Re-labeled all storm drain inlets with labels when no longer clearly visible and/or easily readable within 90 days. <i>(Required after all inlets labeled, S6.D.1.a.iii)</i>	Y		Not necessary at this time, still clearly labeled. Procedure in place to inspect quarterly.	
6a	Number of inlets labeled:		0		
S6.D.2 Public Involvement and Participation					
7	Published a public notice and solicited public review of the SWMP. <i>(Required by August 15, 2011 or date established by Ecology, S6.D.2.a)</i>	NA		Requirement does not apply because it is not due yet.	
8	Made the latest version of the SWMP available to the public. If posted on website, list address in <i>Comments</i> . <i>(Required by August 15, 2011 or date established by Ecology, S6.D.2.b)</i>	Y		Complete & listed on WEB site at: http://www.ga.wa.gov/EAS/EA-references/stormwatermanagementprogram.pdf	
S6.D.3 Illicit Discharge Detection and Elimination					
9	Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern non-stormwater discharges. <i>(Required from date of permit coverage, S6.D.3.a)</i>	Y			

Question		Y/N/NA	#	Comments (50 word limit)	Name of Attachment & Page Number, if applicable
10	Developed and adopted policies to prohibit illicit discharges and identified enforcement mechanisms. <i>(Required by 1 year from date of permit coverage, S6.D.3.b.)</i>	Y		Procedure in place and training complete	
11	Implemented policies to prohibit illicit discharges, including an enforcement plan. <i>(Required 1 year from date of permit coverage, S6.D.3.b)</i>	Y		Procedure in place and training complete	
12	Developed a map of the storm sewer system showing all known storm drain outfalls, receiving waters, and areas contributing runoff to each outfall. Made map available on request to Ecology or others, if requested. <i>(Required by August 15, 2011 or date established by Ecology, S6.D.3.c)</i>	NA		All of west campus and portions of east campus completed at this time. Will be complete when funds are available.	
13	Conducted annual field inspections and visually inspected for illicit discharges at approximately one third of all known outfalls. <i>(Required to begin by 2 years from date of permit coverage, S6.D.3.d)</i>	Y		Procedure and forms in place and annual inspection complete	
13a	Number of outfalls inspected:		1	Three are identified. One was inspected in the fall during a storm event.	
14	Developed and implemented procedures to identify and remove illicit discharges. <i>(Required by 2 years from date of permit coverage, S6.D.3.d)</i>	Y		Procedures in place & training implemented	
15	Attached a summary of illicit discharges discovered and actions taken to eliminate the discharges. <i>(Required annually after 2 years from date of permit coverage, S9)</i>	Y		None discovered, no summary attached	

Question	Y/N/NA	#	Comments (50 word limit)	Name of Attachment & Page Number, if applicable
16 Developed and implementing a spill response plan that includes coordination with a qualified spill responder. <i>(Required by August 15, 2011 or date established by Ecology, S6.D.3.e)</i>	Y		Completed. We had three qualified Haz Mat staff trained. For 2010 we will have one.	
17 Provided staff training or coordinated with existing training to educate relevant staff on proper BMPs for preventing illicit discharges, including spills. <i>(Required by 2 years from date of permit coverage, S6.D.3.f)</i>	Y		BMP has been written and training is complete	
S6.D.4 Construction Site Stormwater Control				
18 Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern construction phase stormwater pollution prevention measures. <i>(Required from date of permit coverage, S6.D.4.a)</i>	Y		Complying under City of Olympia BMP and permitting process.	
19 Obtained NPDES permit coverage for all applicable construction projects under the control of the Permittee. <i>(Required from date of permit coverage, S6.D.4.b)</i>	Y		Complying under City of Olympia BMP and permitting process.	
20 Coordinated with local jurisdictions on construction projects owned or operated by other entities that discharge into Permittee's MS4. <i>(Required after date of permit coverage, S6.D.4.c)</i>	NA		GA does not know of any off-site entities discharging to the Capitol Campus.	
21 Provided training for relevant staff in erosion and sediment control BMPs and requirements, or hired trained contractors to perform the work for all construction projects owned and operated by the Permittee. <i>(Required after date of permit coverage, S6.D.4.d)</i>	Y		Complete.	

Question	Y/N/ NA	#	Comments (50 word limit)	Name of Attachment & Page Number, if applicable
22 Provided access, as requested, for inspection of construction sites under the control of the Permittee during the active grading and/or construction period. <i>(Required after date of permit coverage, S6.D.4.e)</i>	Y			
S6.D.5 Post-Construction Stormwater Management for New Development and Redevelopment				
23 Complied with all relevant ordinances, rules, and regulations of the local jurisdiction(s) that govern post-construction stormwater pollution prevention measures, including proper operation and maintenance of the MS4. <i>(Required after date of permit coverage, S6.D.5.a)</i>	Y		Complying under City of Olympia permitting requirements.	
24 Coordinated with local jurisdictions on projects owned or operated by other entities that discharge into Permittee's MS4. <i>(Required after date of permit coverage, S6.D.5.b)</i>	NA		No other entities discharge into our system	
S6.D.6 Pollution Prevention and Good Housekeeping for Municipal Operations				
25 Developed and implemented an Operation and Maintenance program. <i>(Required by 3 years from date of permit coverage, S6.D.6.a)</i>	Y		O&M plan has been updated with stormwater BMPs.	
26 Conducted spot checks of stormwater facilities after major storms. <i>(Required to begin by 3 years from date of permit coverage, S6.D.6.a.i)</i>	Y		Procedures complete and training in place to inspect.	

Question		Y/N/NA	#	Comments (50 word limit)	Name of Attachment & Page Number, if applicable
27	Developed and implemented a Stormwater Pollution Prevention Plan (SWPP) for material storage areas, heavy equipment storage areas, and maintenance areas not covered by another NPDES permit that covers stormwater discharges associated with the activity. <i>(Required by 3 years from date of permit coverage or date established by Ecology, S6.D.6.a.vi)</i>	Y		All areas are covered by a storm water permit, no additional plan required.	
28	Have NPDES permit for Stormwater Discharges Associated with Industrial Activities coverage for all applicable industrial facilities operated by the Permittee. <i>(Required after date of permit coverage, S6.D.6.b)</i>	NA		Regulation does not apply because we have no industrial activities	
29	Provided adequate training for staff to carry out the Operations and Maintenance plan to minimize impacts to water quality. <i>(Required to begin by 3 years from date of permit coverage, S6.D.6.d)</i>	Y		O&M staff receive regular annual training on proper BMPs. Stormwater education has been added to the training.	
S7 Compliance with Total Maximum Daily Load Requirements					
30	Is there an approved Total Maximum Daily Load (TMDL) applicable to stormwater discharges from a MS4s owned or operated by the Permittee? (S7)	NA		TMDL water clean up plan for the Deschutes River is under development through Department of Ecology. There are no associated requirements.	
31	Complied with the specific TMDL requirements identified in Appendix 2. (S7.A)	NA		Requirements do not apply - there are no TMDL requirements at this time.	
32	Attached status report of TMDL implementation. (S7.A)	NA		Requirements do not apply because we did not have any required monitoring.	

Question		Y/N/ NA	#	Comments (50 word limit)	Name of Attachment & Page Number, if applicable
33	Where monitoring was required in Appendix 2, conducted the monitoring according to an approved Quality Assurance Project Plan. (S7.A)	NA		Regulations do not apply because we did not have any required monitoring.	
General Conditions					
34	Notified Ecology of the failure to comply with the permit terms and conditions within 30 days of becoming aware of the non-compliance. (G20)	NA		Regulation does not apply because there was nothing to report.	
35	Notified Ecology immediately in cases where the Permittee becomes aware of a discharge into or from the Permittees MS4 which could constitute a threat to human health, welfare, or the environment? (G3)	NA		Regulation does not apply because there was nothing to report.	
36	Took appropriate action to correct or minimize discharges into or from the MS4 which could constitute a threat to human health, welfare, or the environment. (G3.A)	NA		No action needed because there were no discharges	
S4 Compliance with Standards					
37	If applicable, attached a summary of the status of implementation of any actions taken pursuant to S4.F and the status of any monitoring, assessment, or evaluation efforts conducted during the reporting period. (S4.F.3.d)	NA		No action needed	

Information Collection, S8.B.1 Description of Monitoring Studies

If applicable, you are required to provide information to fulfill permit requirement S8.B.1 in each annual report. You must describe any stormwater monitoring or studies conducted by you during the reporting period. If stormwater monitoring was conducted on your behalf, or if studies or investigations conducted by other entities were reported to you, you must briefly describe the type of information gathered or received during the reporting period.

Please note in #1 if you have no information to report.

Information Collection

Briefly describe any stormwater monitoring, studies, or type of information collected and analyzed during the reporting period. (S8.B.1)	Who/how to contact for additional information?
1. Additional Mapping	Nathaniel Jones- (360) 902-0944 or
2. Investigation of outfalls	Brian Riley- (360) 902-7183
Video and Visual Inspections, including utility condition	
3. assessment	
4.	
5.	
6.	

REMINDER: Check your work: did you answer each question, provide necessary background information in the *Comments* field, and attach and/or note the filename and page number of all required documentation in the *Attachment* field? This is the final tab of the Annual Report worksheet. Please review the entire worksheet for completeness and accuracy and save this document. Email this Annual Report file PLUS any identified attachments to: ***PH12_SecAnnRpt@ecy.wa.gov*** no later than March 31, 2010. Mail two copies of the entire package to the address listed on the **Certification** tab.