

Annual Report Format



National Pollutant Discharge Elimination System Stormwater Program MS4 Annual Report Form



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

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

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

1. MS4(s) Information

Village of Los Ranchos de Albuquerque

Name of MS4

Tiffany Justice Director, Planning & Zoning Dept.

Name of Contact Person (First) (Last) (Title)

(505) 344-6582 tjustice@losranchosnm.gov

Telephone (including area code) E-mail

6718 Rio Grande Blvd. NW

Mailing Address

Los Ranchos NM 87107

City State ZIP code

What size population does your MS4(s) serve? 6,200 NPDES number

What is the reporting period for this report? (mm/dd/yyyy) From 07/01/2019 to 06/30/2020

2. Water Quality Priorities

A. Does your MS4(s) discharge to waters listed as impaired on a state 303(d) list? Yes No

B. If yes, identify each impaired water, the impairment, whether a TMDL has been approved by EPA for each, and whether the TMDL assigns a wasteload allocation to your MS4(s). Use a new line for each impairment, and attach additional pages as necessary.

Impaired Water	Impairment	Approved TMDL	TMDL assigns WLA to MS4
Rio Grande	E-Coli	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Rio Grande	Temperature	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Rio Grande	PCBs	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Rio Grande	Dissolved Oxygen	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. B. Continued

Impaired Water	Impairment	Approved TMDL		TMDL assigns WLA to MS4	
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

C. What specific sources contributing to the impairment(s) are you targeting in your stormwater program?

- D. Do you discharge to any high-quality waters (e.g., Tier 2, Tier 3, outstanding natural resource waters, or other state or federal designation)? Yes No
- E. Are you implementing additional specific provisions to ensure their continued integrity? Yes No

3. Public Education and Public Participation

- A. Is your public education program targeting specific pollutants and sources of those pollutants? Yes No
- B. If yes, what are the specific sources and/or pollutants addressed by your public education program?

C. Note specific successful outcome(s) (e.g., quantified reduction in fertilizer use; NOT tasks, events, publications) fully or partially attributable to your public education program during this reporting period.

- D. Do you have an advisory committee or other body comprised of the public and other stakeholders that provides regular input on your stormwater program? Yes No

4. Construction

- A. Do you have an ordinance or other regulatory mechanism stipulating:
- Erosion and sediment control requirements? Yes No
 - Other construction waste control requirements? Yes No
 - Requirement to submit construction plans for review? Yes No
 - MS4 enforcement authority? Yes No
- B. Do you have written procedures for:
- Reviewing construction plans? Yes No
 - Performing inspections? Yes No
 - Responding to violations? Yes No

C. Identify the number of active construction sites \geq 1 acre in operation in your jurisdiction at any time during the reporting period.

D. How many of the sites identified in 4.C did you inspect during this reporting period?

E. Describe, on average, the frequency with which your program conducts construction site inspections.

F. Do you prioritize certain construction sites for more frequent inspections? Yes No

If Yes, based on what criteria?

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 No Authority

Yes Administrative fines No Authority

Yes Stop Work Orders No Authority

Yes Civil penalties No Authority

Yes Criminal actions No Authority

Yes Administrative orders No Authority

Yes Other

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? Yes No

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?

5. Illicit Discharge Elimination

A. Have you completed a map of all outfalls and receiving waters of your storm sewer system? Yes No

B. Have you completed a map of all storm drain pipes and other conveyances in the storm sewer system? Yes No

C. Identify the number of outfalls in your storm sewer system.

D. Do you have documented procedures, including frequency, for screening outfalls? Yes No

E. Of the outfalls identified in 5.C, how many were screened for dry weather discharges during this reporting period?

F. Of the outfalls identified in 5.C, how many have been screened for dry weather discharges at any time since you obtained MS4 permit coverage?

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

H. Do you have an ordinance or other regulatory mechanism that effectively prohibits illicit discharges? Yes No

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

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?

L. How often do municipal employees receive training on the illicit discharge program?

6. Stormwater Management for Municipal Operations

A. Have stormwater pollution prevention plans (or an equivalent plan) been developed for:

- All public parks, ball fields, other recreational facilities and other open spaces Yes No
- All municipal construction activities, including those disturbing less than 1 acre Yes No
- All municipal turf grass/landscape management activities Yes No
- All municipal vehicle fueling, operation and maintenance activities Yes No
- All municipal maintenance yards Yes No
- All municipal waste handling and disposal areas Yes No

Other

B. Are stormwater inspections conducted at these facilities? Yes No

C. If Yes, at what frequency are inspections conducted?

D. List activities for which operating procedures or management practices specific to stormwater management have been developed (e.g., road repairs, catch basin cleaning).

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? Yes No

I. If so, how frequently and/or under what circumstances?

7. Long-term (Post-Construction) Stormwater Measures

A. Do you have an ordinance or other regulatory mechanism to require:

- Site plan reviews for stormwater/water quality of all new and re-development projects? Yes No
- Long-term operation and maintenance of stormwater management controls? Yes No
- Retrofitting to incorporate long-term stormwater management controls? Yes No

B. If you have retrofit requirements, what are the circumstances/criteria?

C. What are your criteria for determining which new/re-development stormwater plans you will review (e.g., all projects, projects disturbing greater than one acre, etc.)?

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:

- Flow volumes Yes No
- Peak discharge rates Yes No
- Discharge frequency Yes No
- Flow duration Yes No

F. Please provide the URL/reference where all post-construction stormwater management standards can be found.

City of Albuquerque Design Process Manual: documents.cabq.gov/planning/development-process-manual/DPM-2020

G. How many development and redevelopment project plans were reviewed during the reporting 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 inspected during the reporting period?

J. How many of the practices/facilities identified in I were found to have inadequate maintenance?

K. How long do you give operators to remedy any operation and maintenance deficiencies identified 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

O. Do all municipal departments and/or staff (as relevant) have access to this tracking system? Yes No

P. How often do municipal employees receive training on the post-construction program?

8. Program Resources

A. What was the annual expenditure to implement MS4 permit requirements this reporting period?

B. What is next year's budget for implementing the requirements of your MS4 NPDES permit?

C. This year what is/are your source(s) of funding for the stormwater program, and annual revenue (amount or percentage) derived from each?

Source:	<input style="width: 95%;" type="text" value="General Fund"/>	Amount \$	<input style="width: 40px;" type="text"/>	OR %	<input style="width: 40px; text-align: center;" type="text" value="100"/>
Source:	<input style="width: 95%;" type="text"/>	Amount \$	<input style="width: 40px;" type="text"/>	OR %	<input style="width: 40px;" type="text"/>
Source:	<input style="width: 95%;" type="text"/>	Amount \$	<input style="width: 40px;" type="text"/>	OR %	<input style="width: 40px;" type="text"/>

D. How many FTEs does your municipality devote to the stormwater program (specifically for implementing the stormwater program; not municipal employees with other primary responsibilities)?

E. Do you share program implementation responsibilities with any other entities? Yes No

Entity	Activity/Task/Responsibility	Your Oversight/Accountability Mechanism
Middle Rio Gra+	Public Education and Outreach	Memo of Understanding and Financial Commitment
Middle Rio Gra+	Technical exchange and knowledge sh+	Memo of Understanding
Coordinated M+	Perform all monitoring requirements +	Memo of Understanding and Financial Commitment

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: E. coli</i>	2003	Weekly April–September	20
Various (EPA approved analyte list)	2016	Qualifying Events (up to 7)	2
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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.

10. Additional Information

Please attach any additional information on the performance of your MS4 program, including information required in Parts I.C and III.B. If providing clarification to any of the questions on this form, 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.

Yes No

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 Donald T. Lopez, Mayor
 Name of Certifying Official, Title Date (mm/dd/yyyy)

APPENDIX A
2019-2020 MRGSQT OUTCOMES REPORT

OUTCOMES REPORT FROM MIDDLE RIO GRANDE STORMWATER QUALITY MANAGEMENT TEAM WILL BE
ATTACHED AT A LATER TIME. PLEASE CHECK BACK.