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: 2022 Annual Report

County: La Crosse

Municipality: La Crosse County

Permit Number: S050075

Facility Number: 33646

Reporting Year: 2022

Is this submittal also satisfying an Urban Nonpoint Source Grant funded deliverable? O Yes O No

Under s. 283.53(3)(a), a general MS4 permittee is required to reapply for permit coverage at least 180 days prior to the expiration date of the permit.

In order to acknowledge that you are reapplying for permit coverage, please check the following box: 🗹

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

Municipal Contact Information- Complete

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	La Crosse County		
Facility ID # or (FIN):	33646		
Updated Information:	Check to update r	mailing address information	
Mailing Address:	212 N 6th St, Roor	m 1300	
Mailing Address 2:			
City:	La Crosse County		
State:	WI		
		1	
Zip Code:	54601	XXXXX Or XXXXX-XXXX	
Primary Municipal Contact Person	(Authorized Repr	resentative for MS4 Permit)	
charged with compliance and oversight o	f the permit conditi e., Mayor, Municipa	Contact" includes the municipal official that was ions, and has signature authority for submitting al Administrator, Director of Public Works, City	
First Name:	Josh		
Last Name:	Johnson		
☐ Select to <i>update</i> current contact info	mation		
Title:	Conservation Spec	ial	
Mailing Address:	212 North 6th Stre	eet	
Mailing Address 2:			
City:	La Crosse		
State:	<u>WI</u>		
Zip Code:	54601	XXXXX OF XXXXX-XXXX	
Phone Number:	608-785-9867	Ext: xxx-xxx	

Additional Contacts Information (Optional)

✓ I&E Program

Email: jojohnson@lacrossecounty.org

✓ IDDE Program

Individual with responsibility for:	✓ IDDE Response Procedure Manual✓ Municipal-wide Water Quality Plan✓ Ordinances					
(Check all that apply)	✓ Pollution Preven	ention P	rogram			
	✓ Post-Construct		-			
	☐ Winter roadwa	iy maint	enance			
First Name:	Josh					
Last Name:	Johnson					
Title:	Conservation Spc.					
Mailing Address:	212 6th Street No	rth				
Mailing Address 2:						
City:	La Crosse					
•						
State:	WI					
Zip Code:	54601	xxxxx o	xxxxx-xxxx			
Phone Number:	608-785-9867	Ext:		xxx-xxx-xxxx		
Email:	jojohnson@lacros	secoun	ty.org			
			•	.		
Municipal Billing Contact Person (A	authorized Repres	sentati	ve for MS ²	1 Permit)		
✓ Select to <i>create new</i> Billing contact						
First Name:	Josh					
Last Name:	Johnson					
Select to <i>update</i> current contact info						
Title:	Conservation Spc.					

1. Does t	he municip	ality rely	y on anothe	er entity to sat	isfy some of the p	ermit requiren	nents?
O Yes	No						
						· · ·	

Mailing Address: 212 6th Street North

City: La Crosse

State: WI

Zip Code: 54601

Phone Number: 608-785-9867

Mailing Address 2:

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)?

Email: jojohnson@lacrossecounty.org

xxxxx or xxxxx-xxxx

xxx-xxx-xxxx

Ext:

○ Yes ● No

Minimum Control Measures- Section 1: Complete

1. Public Education and Outreach

roup) OYes
low many
ło

Topics Covered	Target Audience
✓ Illicit discharge detection and elimination	✓ General Public
✓ Household hazardous waste disposal/pet waste management/vehicle	✓ Public Employees
washing	✓ Residents
✓ Yard waste management/pesticide and fertilizer application	✓ Businesses
✓ Stream and shoreline management	✓ Contractors
Residential infiltration	✓ Developers
✓ Construction sites and post-construction storm water management	. ✓ Industries
✓ Pollution prevention	✓ Public Officials
✓ Green infrastructure/low impact development	Other
Other:	

Topics Covered	Target Audience
✓ Illicit discharge detection and elimination	✓ General Public
✓ Household hazardous waste disposal/pet waste management/vehicle	✓ Public Employees
washing	✓ Residents
✓ Yard waste management/pesticide and fertilizer application	✓ Businesses
✓ Stream and shoreline management	✓ Contractors
Residential infiltration	✓ Developers
✓ Construction sites and post-construction storm water management	☐ Industries
Pollution prevention	Public Officials
✓ Green infrastructure/low impact development	Other
Other:	

Topics Covered	Target Audience
✓ Illicit discharge detection and elimination	✓ General Public
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✓ Yard waste management/pesticide and fertilizer application	✓ Businesses
✓ Stream and shoreline management	✓ Contractors
Residential infiltration	✓ Developers
✓ Construction sites and post-construction storm water management	✓ Industries
✓ Pollution prevention	✓ Public Officials

✓ Green infrastructure/low impact development ☐ Other:	☐ Other
Utiler:	
Topics Covered	Target Audience
 ✓ Illicit discharge detection and elimination ✓ Household hazardous waste disposal/pet waste management/vehicle washing ✓ Yard waste management/pesticide and fertilizer application ✓ Stream and shoreline management ✓ Residential infiltration ✓ Construction sites and post-construction storm water management ✓ Pollution prevention ✓ Green infrastructure/low impact development □ Other: 	✓ General Public ✓ Public Employees ✓ Residents ✓ Businesses ✓ Contractors ✓ Developers ✓ Industries ✓ Public Officials ☐ Other
If no, please provide additional comment in the brief expla	anation box below. <i>Limit response to 250</i>
○ No If no, please provide additional comment in the brief explain the brief explain the characters and/or attach supplemental information on the	anation box below. <i>Limit response to 250</i>

Form 3400-224 (R8/2021)

Minimum Control Measures - Section 2 : Complete

2. Public Involvement and Participation

a. <u>Permit Activities</u>. 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.

	7 - 1					
Event Start Date	1/1/202	22				
Project/Event Name La Cross		se Land Conservation Annual Report				
Delivery Mechanism	Website	<u>e</u>				
Topics Covered		Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)		
✓ MS4 Annual Report		✓ General Public ✓	<u>101 +</u>	○ Yes ● No		
✓ Storm Water Manageme	ent	Public Employees				
Program		✓ Residents				
✓ Storm Water related ord	linance	✓ Businesses				
Other:		Contractors				
		Developers				
		✓ Industries				
		✓ Public Officials				
		☐ Other				

Event Start Date	1/1/202	2					
Project/Event Name	Departn	Department of Land Conservation reporting to the Planning, Resources &					
Delivery Mechanism	Governm	nent Event (Public H	learin	g, Council Meeting, et	<u>c)</u>		
Topics Covered		Target Audience		Estimated People Reached (Optional)	Regional Effort (Optional)		
✓ MS4 Annual Report ✓ Storm Water Manageme Program ✓ Storm Water related ordi ☐ Other:		✓ General Public Public Employees ✓ Residents □ Businesses □ Contractors □ Developers □ Industries □ Public Officials ✓ Other	▼	<u>11-50</u>	○ Yes ● No		
b . <u>Volunteer Activities</u> . Co Activities related to storm activities were conveyed t	water. S o your p	Select the Deliver opulation. Use th	у Ме	chanism that best o	lescribes how voluntee		
Event Start Date	5/7/202	2	NA (I	Individual Permittee).			
Project/Event Name	River Cle	ean Up					
Delivery Mechanism	Clean up	Clean up event					
-							
	Target Au			mated People ched (Optional)	Regional Effort (Optional)		
		dience		ched (Optional)			
Topics Covered	Target Au ✓ Gener	dience	Read	ched (Optional)	(Optional)		
Topics Covered	Target Au ✓ Gener	al Public Employees	Read	ched (Optional)	(Optional)		
Topics Covered	Target Au ✓ Gener ✓ Public	adience al Public Employees ents	Read	ched (Optional)	(Optional)		
Topics Covered	Target Au ✓ Gener ✓ Public ✓ Reside	al Public Employees ents	Read	ched (Optional)	(Optional)		
Topics Covered	Target Au ✓ Gener ✓ Public ✓ Reside ✓ Busine	al Public Employees ents esses actors	Read	ched (Optional)	(Optional)		
Topics Covered	Target Au ✓ Gener ✓ Public ✓ Reside ✓ Busine	al Public Employees ents esses actors opers	Read	ched (Optional)	(Optional)		
Topics Covered	☐ Contract ☐ Indust	al Public Employees ents esses actors opers	Read	ched (Optional)	(Optional)		
Topics Covered	☐ Public ☐ Develo ☐ Public ☐ Develo ☐ Dublic ☐ Public	al Public Employees ents esses actors opers	Read	ched (Optional)	(Optional)		
Topics Covered	☐ Contract ☐ Indust	al Public Employees ents esses actors opers cries Officials	101 +	ched (Optional)	(Optional)		
Topics Covered Volunteer Opportunity	☐ Contract Develor ☐ Public ☐ Public ☐ Other ☐ 9/8/202	al Public Employees ents esses actors opers cries Officials	101 +	ched (Optional)	(Optional)		
Topics Covered Volunteer Opportunity Event Start Date	☐ Contract Develor ☐ Other ☐ 9/8/2023	al Public Employees ents esses actors opers cries Officials	101 +	ched (Optional)	(Optional)		
Topics Covered Volunteer Opportunity Event Start Date Project/Event Name Delivery Mechanism	☐ Contract Develor ☐ Other ☐ 9/8/2023	al Public Employees ents esses actors opers cries Officials 2 a Crosse ommittee meeting	NA (I	ched (Optional)	(Optional)		
Topics Covered Volunteer Opportunity Event Start Date Project/Event Name Delivery Mechanism	☐ GROW L Citizen co	al Public Employees ents esses actors opers cries Officials 2 a Crosse ommittee meeting	NA (I	Individual Permittee).	(Optional) • Yes • No Regional Effort		
Topics Covered Volunteer Opportunity Event Start Date Project/Event Name Delivery Mechanism Topics Covered	Target Au ✓ Gener ✓ Public ✓ Reside ✓ Busine ☐ Contra ☐ Develo ☐ Indust ☐ Public ☐ Other 9/8/202: GROW L Citizen co Target Au ✓ Gener	al Public Employees ents esses actors opers cries Officials 2 a Crosse ommittee meeting	NA (I	Individual Permittee).	Regional Effort (Optional)		

☐ Businesses				
☐ Contractors				
☐ Developers				
☐ Industries				
☐ Public Officials				
☐ Other				
c. Brief explanation on Public Involvement to 250 characters and/or attach suppleme Every year, the Department of Land Conservati activities to anyone that visits our website. We	ntal information on develops an annu	n the attachment	<i>ts page.</i> nes permit	
members.				
			Form 3400-224 (F	R8/2021)
Minimum Control Measures - Section 3 :	Complete			
3. Illicit Discharge Detection and Elimina	tion			
a. How many total outfalls does the muni-	0	☐ Unsure		
 h. How many outfalls did the municipality of their routine ongoing field screening 	0	□ Unsure		
c. From the municipality's routine screeni were confirmed illicit discharges?	0	☐Unsure		
d. How many illicit discharge complaints of municipality receive?	lid the	0	□Unsure	
e. From the complaints received, how ma confirmed illicit discharges?	ny were	0	□Unsure	
f. How many of the identified illicit discha	arges did the	0	□Unsure	
municipality eliminate in the reporting routine screening and complaints)? (If the sum of 3.c. and 3.e. does not equal 3.f., please explain below.)	year (from both			
How many of the following enforcement use to enforce its illicit discharge ordinate enter the number of each used in the re-	ance? Check all tha		□ Unsure	
✓ Verbal Warning	0			
✓ Written Warning (including email)	0			
✓ Notice of Violation	0			
✓ Civil Penalty/ Citation	0			
Additional Information: h. Brief explanation on Illicit Discharge De	tection and Elimin	ation reporting.	If you	

n. 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.

Much of the MS4 administered area of La Crosse County does not contain any curb and gutter. Illicit discharge is addressed in the county ordinances and we have not had any reports of illicit discharge.

Form 3400-224 (R8/2021)

N	linimum Control Measures - Section 4: Com	olete		
4	. Construction Site Pollutant Control			
a.	How many total construction sites with one a of land disturbing construction activity were a point in the reporting year?		16	□ Unsure
b.	How many construction sites with one acre or land disturbing construction activity did the missue permits for in the reporting year?		10	□ Unsure
C.	How many erosion control inspections did the complete in the reporting year (at sites with a more of land disturbing construction activity)	ne acre or	40	□Unsure
d. What types of enforcement actions does the municipality have available Unsure to compel compliance with the regulatory mechanism? Check all that apply and enter the number of each used in the reporting year.				
	✓ Verbal Warning	15		
	✓ Written Warning (including email)	6		
	✓ Notice of Violation	1		
	☐ Civil Penalty/ Citation			
	✓ Stop Work Order	1		
	☐ Forfeiture of Deposit			
	☐ Other - Describe below			
е.	Brief explanation on Construction Site Polluta Unsure for any questions above, justify the red and/or attach supplemental information on th	asoning. Limit	response to 25	
	Crosse County Implements an erosion control ordin		County Chanter	24 14/2 - 122

Minimum Control Measures - Section 5 : Complete

5. Post-Construction Storm Water Management

a. How many sites with new structural storm water management Best Management Practice (BMP) have received local approval ?

*Engineered and constructed systems that are dequality control such as wet detention ponds, con basins, grassed swales, permeable pavement,	-		
b. Does the MS4 have procedures for i maintaining private storm water fac	○ Yes ● No	☐ Unsure	
•	Yes, how many privately owned storm water		
management facilities were inspected linspections completed by private landowners should be made and the management facilities were inspected lines and the management facilities an	ed in the reporting year $\widehat{\imath}$		✓ Unsure
d. Does the municipality utilize private management BMP in its pollutant re	•	○ Yes • No	☐ Unsure
e. If yes, does MS4 have maintenance privately owned BMPs?	authority on these		✓ Unsure
f. How many municipally owned storm BMPs were inspected in the reporting	_	35	☐ Unsure
g. What types of enforcement actions to compel compliance with the regulapply and enter the number of each No Authority	latory mechanism? Chec	ck all that	□ Unsure
✓ Verbal Warning	3		
Written Warning (including email)	2		
✓ Notice of Violation	1		
✓ Civil Penalty/ Citation	0		
Forfeiture of Deposit	0		
Complete Maintenance	3		
☐ Bill Responsible Party			
☐ Other - Describe below			
e. Brief explanation on Post-Construction marked 'Unsure' on any questions at 250 characters and/or attach supple	bove, justify your reasoni	ng. Limit your	response to
La Crosse County Land Conservation admin sites with excess of a half acre of imperviou the ordinance.	•		
			Form 3400-224 (R8/202
Minimum Control Measures - Section	6: Complete		
6. Pollution Prevention			
Storm Water Management Best Mana	gement Practice Inspecti	ons 🗌 Not A	pplicable

	Enter the total number of municipally owned or operated structural storm water management best management practices.	7	☐ Unsure			
b.	How many new municipally owned storm water management best	0	☐ Unsure			
	management practices were installed in the reporting year?		1			
c.	How many municipally owned storm water management best management practices were inspected in the reporting year?	7	Unsure			
d.	What elements are looked at during inspections (250 character					
	limit)?					
	A comprehensive annual site compliance inspection of the facility.	These i	nspections			
	will be used to verify that the site drainage conditions and potentia	l pollut	ant			
	sources. Any outfall on properties are assessed to be functioning pr	operly	•			
e.	How many of these facilities required maintenance?	0	Unsure			
f.	Brief explanation on Storm Water Management Best Management Practice 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.					
	La Crosse County Facilities department makes sure installed BMP's	are fur	nctioning			
	properly and still meeting installation standards.					
P	ublic Works Yards & Other Municipally Owned Properties (SWPPP Pl	an Rev	iew) 🗆 Not	Applicable		
g.	How many municipal properties require a SWPPP?	3	□Unsure			
h.	How many inspections of municipal properties have been conducted in the reporting year?	10	□Unsure			
i.	Have amendments to the SWPPPs been made? ● Yes ○ No ○ Unsure					
j.	If yes, describe what changes have been made. Limit response to 25 and/or attach supplemental information on the attachment page:	50 char	acters			
	The contact list and property map has been updated to better repr	esent c	urrent site			
	conditions.					
k.	conditions. Brief explanation on Storm Water Pollution Prevention Plan reporti Unsure for any questions above, justify the reasoning. Limit response characters and/or attach supplemental information on the attachm	se to 25	50			
k.	Brief explanation on Storm Water Pollution Prevention Plan reporti Unsure for any questions above, justify the reasoning. Limit respons	se to 25 ents po	50 age.			
k.	Brief explanation on Storm Water Pollution Prevention Plan reporti Unsure for any questions above, justify the reasoning. Limit respons characters and/or attach supplemental information on the attachm	se to 25 ents po inual, a	50 age. and annual.			
	Brief explanation on Storm Water Pollution Prevention Plan reporting Unsure for any questions above, justify the reasoning. Limit response characters and/or attach supplemental information on the attachm. There are pollution prevention reporting sheets for quarterly, bi-and	se to 25 ents po inual, a d prop	50 age. and annual.			

m.			al was rer	moved?		100	☐ Unsure
n.	Does the municipality have a low hazard exemption for this Yes No material?						
0.	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	One time du	ıring spring	3			
	O No - Explain						
	O Not Applicable						
Сс	llection Services - Catch	Basin Sump	Cleaning	Program	✓ Not Ap	plicable	
Сс	llection Services - <i>Leaf C</i>	Collection Pr	ogram 🗹	Not Appli	cable		
W	inter Road Management	. □ Not App	licable				
*No	ote: We are requesting info	rmation that	goes beyor	nd the repor	ting year, a	nswer the k	est you can.
aa.	How many lane-miles or responsible for doing so two-way road equals to	now and ice	control?	• •		85	☐ Unsure
ab.	Provide amount of de-i	cing produc	ts used by	y month la	st winter s	season?	
	Solids (tons) (ex. sand,	or salt-sand)				
	Product	Oct	Nov	Dec	Jan	Feb	Mar
Sal	<u>t</u>	0	308	816	1813	647	132
Sal	t/sand mix	0	588	1656	1550	626	118
	Liquids (gallons) (ex. br	ine)					
		Oct	Nov	Dec	Jan	Feb	Mar
<u>Bri</u>	<u>1e</u>	0	15190	43345	15556	12799	1000
ac.	Was salt applying mach year?	inery calibr	ated in th	e reporting	g •	Yes O No	Ounsure
ad.	Have municipal personnel attended salt reduction strategy ○ Yes ○ No ● Unsure training in the reporting year?						
	Training Date	Tra	ining Name		4	# 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						
	These operation are conducted through the La Crosse County Highway Department. I am unsure of their training schedule.						
Int	ternal (Staff) Education 8	& Communi	cation				
af	mas the mamerpancy			•	ernal O	Yes No	O Unsure
	training or education	to staff imp	iementin	g tne			

W	Vhen:	
H	How many attended:	
D	escribe how the municipality has kept the following local officials and municipal	
	taff aware of the municipal storm water discharge permit programs, procedures	
	nd pollution prevention program requirements.	
	lected Officials	
b	lected officials are informed at the Planning and Resources Development ousiness meetings. Land Conservation Department writes an annual report with updated information.	
N	1unicipal Officials	
	The Department of Land Conservation has in person contact and phone calls with ocal municipality to discuss requirements of permit.	
	ppropriate Staff (such as operators, Department heads, and those that interact vith public)	
h	All staff that review the Erosion Control and Storm Water permits and application have up to date certification. The department has weekly meetings to discuss turrent projects	
q	rief explanation on Internal Education reporting. If you marked Unsure for any uestions above, justify the reasoning. Limit response to 250 characters and/or ttach supplemental information on the attachments page.	
Т	he Department of Land Conservations works to annually inform constituents of how The	
D	Department is meeting the requirements of MS4 discharge permit requirements.	
	Form 3400	N-224 (I
nim	num Control Measures - Section 7: Complete	<i>y</i> 224 (1
	rm Sewer System Map	
	the municipality update their storm sewer map this year?	
	es ● No ○ Unsure	
-	s, check the areas the map items that got updated or changed:	
	torm water treatment facilities	
	torm pipes	
	egetated 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.

Survey Grade GPS equipment is used to locate stormwater conveyances and outfalls. We pair this information with LiDAR from 2017 to establish local stream network and stormwater conveyance.

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.

funding may be go	oing towards the	se programs.	
Annual	Budget	Budget	Source of Funds
Expenditure	Reporting Year	I	
Reporting Year		Year	
Element: Public E	Education and Ou	itreach	
7000	7000	7000	Permit fee and/or
			deposit/escrow
.			
Element: Public I	nvolvement and	·	
2500	2500	2500	Permit fee and/or deposit/escrow
el		l eli	
Element: Illicit Di	scharge Detectio	n and Elimina	
3000	3000	3000	General revenue fund
Flamant, Canata	.atia.a Cita Dallt.	ant Cantual	
Element: Constru			
115000	120000	120000	General revenue fund
Flowert Doct Co	anatrustian Ctarr	m Matar Mana	agamant
Element: Post-Co			
35000	38000	38000	Permit fee and/or deposit/escrow
Element: Pollution	on Prevention		
		2000	Permit fee and/or deposit/escrow
3000	3000	3000	Permit lee and/or deposit/escrow
Other (describe)			
Circi (deserise)			
			Select

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

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:				
waters	e any of the receiving list during the report ● No ○ Unsure	waters that the municipality discharges to been added to the in ting year?	npaired			
	the municipality evalu ○No ○Unsure	uated their storm water practices to reduce the pollutants of co	ncern?			
Storm	Water Quality Mana	agement				
	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:					
Tota	suspended solids (TS	SS)				
Tota	phosphorus (TP)					
Additi	onal 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.						
La Cro	La Crosse County continues to adapt to the requirements of the MS4 permit.					

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		

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) - <u>Help reduce file size and trouble shoot file uploads</u>
*Required Item

Note: To replace an existing file, use the 'Click here to attach file ' link or press the to delete an item.

Municipal Facility SWPPP				
■ File Attachment	LAXCoMainHighwayShopSWPPP 2022.pdf			
Attach - Other Suppo	orting Documents			
AR_Other				
	LAXCoMidwayHighwayShopSWPPP 2022.pdf			
AR_PCSSW				
■ File Attachment	2022SWPermits.pdf			
(To remove items, use your cu	rsor to hover over the attachment section. When the drop down arrow appears, select remove item)			
Attach - Permit Comp	pliance Documents			

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

Sign and Submit Your Application

Steps to Complete the signature process

- 1. Read and Accept the Terms and Conditions
- 2. Press the Submit and Send to the DNR button

NOTE: For security purposes all email correspondence will be sent to the address you used when registering your WAMS ID. This may be a different email than that provided in the application. For information on your WAMS account click <u>HERE</u>.

Terms and Conditions

Certification: I hereby certify that I am an authorized representative of the municipality covered under La Crosse County MS4 Permit for which this annual report or other compliance document is being submitted, and that the information contained in this submittal and all attachments were gathered and prepared under my direction or supervision. Based on my inquiry of the person or persons under my direction or supervision involved in the preparation of this document, to the best of my knowledge, the information is true, accurate, and complete. I further certify that the municipality's governing body or delegated representatives have reviewed or been apprised of the contents of this annual report. I understand that Wisconsin law provides severe penalties for submitting false information.

Signee (must check current role prior to accepting terms and conditions)

- Authorized municipal contact using WAMS ID.
- O Delegation of Signature Authority (Form 3400-220) for agent signing on the behalf of the authorized municipal contact.
- O Agent seeking to share this item with authorized municipal contact (authorized municipal contact must get WAMS id and complete signature).

1	Name:	Josh Johnson
	Title:	Conservation Specialist
Authorized Signature. ✓ I accept the above terms and conditions.		Signed by: i:0#.f wamsmembership jkjohn220 on 2023-03-22T07:42:55 You have already signed and submitted this application to the DNR. Please contact the Wisconsin DNR for assistance.

After providing the final authorized signature, the system will send an email to the authorized party and any agents. This email will include a copy to the final read only version of this application.