**Phase II MS4 Self Assessment Module 5**

**Status**

****

**Permittee Name**

****

**Permit Number**

****

**Assessment Period Start**

****

**Assessment Period End**

****

**Tab Pages**

Mod 0

Mod 1

Mod 2

Mod 3

Mod 4

Mod 5

Mod 6

|  |  |
| --- | --- |
|  | Print Module 5 |

**Post-Construction Stormwater Management in New Development and Redevelopment**

**Attachments Requested**

**A. Blank checklist or inspection report form used to inspect post-construction sites.**

**Yes**

**No**

**B. Flow chart that illustrates how the enforcement plan is implemented.**

**Yes**

**No**

**C. Three post-construction inspection reports for three different sites (i.e., one inspection report per site).**

**Yes**

**No**

**D. A copy of the Program Description Document (PDD).**

**Yes**

**No**

**Program GoalThe goal of the Post-Construction Stormwater Management in New Development and Redevelopment program is to reduce the discharge of pollutants to the MS4 from applicable development sites.**

**1. Under the Code of Federal Regulations (CFR) 40 CFR §§ 122.26, 122.34(a), 122.34(b) (5) and State permit requirements, has the permittee developed and implemented a Post-Construction Stormwater Management in New Development and Redevelopment program? If no, explain why this program has not been developed and implemented.**

**Yes**

**No**

**Response**

****

**2. Are the operational procedures for this program described in a comprehensive PDD? If yes, where is this program (i.e., page, chapter) described in the document?**

**Yes**

**No**

**Response**

****

**3. What pollutants of concern are targeted for reduction through this program?**

****

**Section I: Regulatory Mechanism**

**1. Is legal authority required to carry out and or enforce the Post-Construction Stormwater Management in New Development and Redevelopment program? If no, skip 2 and 3 of this Section.**

**Yes**

**No**

**2. Describe the ordinances, codes, or policies in place that give legal authority and the extent of that authority to implement and or enforce this program.**

****

**3. Who is the person (e.g., specific staff, department, etc.) authorized to exercise the legal authority for this program?**

****

**Section II: Fiscal Resources**

**1. What was the budget to carry out the Post-Construction Stormwater Management in New Development and Redevelopment program for this Assessment Period?**

**Assessment Period Date**

****

**Press Key down or Key up for access to Calendar.**

**Assessment Period Budget**

****

**Next Reporting Period Date**

****

**Press Key down or Key up for access to Calendar.**

**Next Reporting Period Budget**

****

**2. Did this budget meet the program demands? If no, describe the parts of the program that could improve with increased funding and resources.**

**Yes**

**No**

**Response**

****

**Section III: Training**

**1. Is applicable municipal staff trained to inspect control measures? If yes, describe the training.**

**Yes**

**No**

**Response**

****

**Section IV: Control Measures**

**1. Does the permittee ensure control measures for applicable development sites meet one of the design standards as listed in Part I.E.4.a.iv of the permit? If yes, describe this process.**

**Yes**

**No**

**Response**

****

**2. How many of each design standard was utilized during the current permit term?**

****

**3. Has the permittee utilized the constrained site design standard? If yes, describe what has been the cause(s) of sites necessitating the design standard and has the permittee encouraged infiltration of 30%?**

**Yes**

**No**

**Response**

****

**4. Has the permittee evaluated on a project-by-project basis the percent reduction available or has the permittee developed standards where a contractor can automatically deduct a certain percentage, up to 20%, from the capture volume? If yes, please describe.**

**Yes**

**No**

**Response**

****

**5. Has the permittee developed any policies or ordinances encouraging or requiring infiltration first for post construction? If yes, please explain. If no, please also explain.**

**Yes**

**No**

**Response**

****

**Section V: Site Plan Review Process**

**1. What information pertaining to control measures is required to be submitted for site plans for development sites?**

****

**2. Has the permittee developed a site plan review process for applicable development sites? If yes, describe the process.**

**Yes**

**No**

**Response**

****

**Section VI: Inspections**

**1. Does the permittee implement inspection and acceptance procedures to ensure that control measures are installed and implemented in accordance with the site plan? If yes, describe the procedures.**

**Yes**

**No**

**Response**

****

**2. Has the permittee implemented procedures to ensure adequate long-term operation and maintenance of control measures to ensure that they are functioning as designed? If yes, describe the procedures.**

**Yes**

**No**

**Response**

****

**3. At what frequency does the permittee inspect municipally owned versus privately owned control measures?**

****

**Section VII: Enforcement**

**1. Describe enforcement procedures in place to implement, when non-compliance with post-construction permit requirements is identified.**

****

**2. How many enforcement actions were issued for violations of the post-construction permit requirements?**

****

**3. Describe the procedures for escalated enforcement and conditions present to issue this type of action.**

****

**4. Are there limitations of enforcement authority (e.g., limits on the dollar amount of fines or other actions)? If yes, describe the next step when limited, escalated enforcement has been ineffective in achieving compliance.**

**Yes**

**No**

**Response**

****

**Section VIII: Records Management**

**1. Describe the database in place to track activities and events related to the Post-Construction Stormwater Management in New Development and Redevelopment program.**

****

**2. What municipal department, team, or co-permittees have access to the program data?**

****

**3. Who (i.e., inspectors, data specialist) is responsible to make data entries for this program?**

****

**4. What is the timeframe to complete data entries for this program. Be document specific.**

****

**Section IX: Evaluation**

**1. Was this program evaluated and a report of the results filed? If yes, briefly describe the strongest programs and those that need improvements. Include where this report is kept. If no, explain why this program has not been evaluated.**

**Yes**

**No**

**Response**

****

**2. Who led the program evaluation?**

****

**3. What municipal departments, staff, team, or co-permittees took part in the program evaluation?**

****

**Module 5 Contact Information**

**Completed Date**

****

**Press Key down or Key up for access to Calendar.**

**Comp By First Name**

****

**Comp By Last Name**

****

**Signed By**

****

**Job Title**

****

**Department**

****

**Address**

****

**City**

****

**State**

****

**Zipcode**

****

**Telephone**

****

**Email**

****

**Module 5 Attachments**

Add Attachment

**No Module 5 Attachments Found.**