

Utah Pollutant Discharge Elimination System Storm Water Program

MS4 Report Form

The purpose of this report is to contribute information to an evaluation of the UPDES municipal separate storm sewer system (MS4) permit program. Consistent with 40 CFR §122.37 the Utah Department of Environmental Quality is assessing the status of the storm water program. A “no” answer to a question does not necessarily mean noncompliance with your permit or with the federal regulations. In order to establish the range of variability in the program it is necessary to ask questions along a fairly broad performance continuum.

1. MS4 Information

Draper City

Name of MS4

Robert Markle Dep Public Works director/ City Engineer

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

(801) 576-6360 robert.markle@draperutah.gov

Telephone (including area code) Email

1020 East Pioneer Road

Mailing Address

Draper City UT 84020

City State ZIP code

What size population does your MS4 serve? 52765 UPDES number UTR090000

What is the reporting period for this report? (mm/dd/yyyy) From 07/01/2021 to 06/30/2022

2. Water Quality Priorities

A. Does your MS4 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. Use a new line for each impairment, and attach additional pages as necessary.

Impaired Water	Impairment	Approved TMDL		TMDL assigns WLA to MS4	
<u>Jordan River</u>	<u>3A,4</u>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<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 storm water program?

Total Solids, e coli

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?
Household hazardous waste, lawn care products, pet waste, construction materials
- 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.
water quality fairs, Storm Water quality tips on large banners throughout city
- D. Do you have an advisory committee or other body comprised of the public and other stakeholders that provides regular input on your storm water program? Yes No
- E. Do you belong to a storm water coalition or other advisory committee? If yes, describe: Yes No
Salt Lake County Storm Water Coalition, Utah Storm Water Advisory Committee

4. Construction

- A. Do you have an ordinance or other regulatory mechanism stipulating:
- | | | |
|--|---|-----------------------------|
| Erosion and sediment control requirements? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other construction waste control requirements? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Requirement to submit construction plans for review? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| MS4 enforcement authority? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
- B. Do you have written procedures for:
- | | | |
|-------------------------------|---|-----------------------------|
| Reviewing construction plans? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Performing inspections? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Responding to violations? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
- C. What is the threshold for construction storm water plan review (e.g., all projects, projects disturbing greater than one acre, etc.)? All projects
- D. Identify the number of active construction sites ≥ 1 acre in operation in your jurisdiction at any time during the reporting period. 33
- E. How many of the sites identified in 4.D did you inspect during this reporting period? 33
- F. Identify the number of active construction sites < 1 acre in operation in your jurisdiction at any time during the reporting period. 95
- G. How many of the sites identified in 4.F did you inspect during this reporting period? 95
- H. Describe, on average, the frequency with which your program conducts construction site inspections.
Monthly & Bi-Monthly in addition to complaints
- I. Do you prioritize certain construction sites for more frequent inspections? Yes No
 If Yes, based on what criteria? sensitive slope areas, proximity to open water
- J. 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:
- | | | | |
|---|---|-------------------|---------------------------------------|
| <input checked="" type="checkbox"/> Yes | Notice of violation | # <u>2</u> | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Administrative fines | # <u> </u> | No Authority <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Yes | Stop Work Orders | # <u>5</u> | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Civil penalties | # <u> </u> | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Criminal actions | # <u> </u> | No Authority <input type="checkbox"/> |
| <input type="checkbox"/> Yes | Administrative orders | # <u> </u> | No Authority <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Yes | Other <u>Hold on Building Inspections</u> | # <u>164</u> | |

- K. 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
- L. What are the 3 most common types of violations documented during this reporting period?
Inadequate maintenance of BMPs, Lack of operator inspection documentation, sediment/erosion control
- M. How often do municipal employees receive training on the construction program? Annually/any new hire

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. 127
- D. Identify the number of Class V injection wells in your jurisdiction. 1
- E. Do you have documented procedures, including frequency, for screening outfalls? Yes No
- F. Of the outfalls identified in 5.C, how many were screened for dry weather discharges during this reporting period?
55
- G. 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? 127
- H. What is your frequency for screening outfalls for illicit discharges? Describe any variation based on size/type.
Every 5 years per the Jordan Valley Municipalities permit
- I. Do you have an ordinance or other regulatory mechanism that effectively prohibits illicit discharges? Yes No
- J. Do you have documented procedures for tracing and removing an illegal discharge? Yes No
- K. 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
- L. During this reporting period, how many illicit discharges/illegal connections have you discovered? 3
- M. Of those illicit discharges/illegal connections that have been discovered or reported, how many have been eliminated?
3
- N. Identify which of the following types of enforcement actions you used during the reporting period for illicit discharges, indicate the number of actions, or note those for which you do not have authority:

<input type="checkbox"/> Yes	Notice of violation	# _____	No Authority <input type="checkbox"/>
<input type="checkbox"/> Yes	Administrative fines	# _____	No Authority <input type="checkbox"/>
<input type="checkbox"/> Yes	Stop Work Orders	# _____	No Authority <input type="checkbox"/>
<input type="checkbox"/> Yes	Civil penalties	# _____	No Authority <input type="checkbox"/>
<input type="checkbox"/> Yes	Criminal actions	# _____	No Authority <input type="checkbox"/>
<input type="checkbox"/> Yes	Administrative orders	# _____	No Authority <input type="checkbox"/>
<input checked="" type="checkbox"/> Yes	Other	<u>SL County Health Dep. NOV</u>	# <u>1</u>
- O. How often do municipal employees receive training on the illicit discharge program? Annually

6. Storm Water Management for Municipal Operations

- A. Have storm water pollution prevention plans (or an equivalent plan) been developed for:
- | | | |
|--|---|-----------------------------|
| All public parks, ball fields, other recreational facilities and other open spaces | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| All municipal construction activities, including those disturbing less than 1 acre | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| All municipal turf grass/landscape management activities | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| All municipal vehicle fueling, operation and maintenance activities | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| All municipal maintenance yards | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| All municipal waste handling and disposal areas | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
- Other _____
- B. Are storm water inspections conducted at these facilities? Yes No
- C. If Yes, at what frequency are inspections conducted? Monthly and quarterly at high priority facilities
- D. List activities for which operating procedures or management practices specific to storm water management have been developed (e.g., road repairs, catch basin cleaning).
catch basin cleaning, detention basin maint., waste disposal, street sweeping
- 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? Public works facility
- G. How are you disposing of catch basin decant water and solid material?
Oil/water separator, Trans-Jordan Landfill
- H. Are municipal vehicles washed into an approved wastewater disposal system? Yes No
- I. Do all municipal employees and contractors overseeing planning and implementation of storm water-related activities receive comprehensive training on storm water management? Yes No
- J. If yes, do you also provide regular updates and refreshers? Yes No
- K. If so, how frequently and/or under what circumstances? Annually, plan review, and as issues occur

7. Long-term (Post-Construction) Storm Water Measures

- A. Do you have an ordinance or other regulatory mechanism to require:
- | | | |
|---|---|-----------------------------|
| Site plan reviews for storm water/water quality of all new and re-development projects? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Long-term operation and maintenance of storm water management controls? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Retrofitting to incorporate long-term storm water management controls? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
- B. If you have retrofit requirements, what are the circumstances/criteria?
Any Redevelopment is required to meet all current standards during approval process
- C. What are your criteria for determining which new/re-development storm water plans you will review (e.g., all projects, projects disturbing greater than one acre, etc.) All Projects
- 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 | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Peak discharge rates | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Discharge frequency | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Flow duration | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

- F. Please provide the URL/reference where all post-construction storm water management standards can be found.
http://www.draper.ut.us/DocumentCenter/View/7
- G. How many development and redevelopment project plans were reviewed during the reporting period to assess impacts to water quality and receiving stream protection? 20
- H. How many of the plans identified in 7.G were approved? 20
- I. How many privately owned permanent storm water management practices/facilities were inspected during the reporting period? 0
- J. How many of the practices/facilities identified in I were found to have inadequate maintenance? 0
- K. How long do you give operators to remedy any operation and maintenance deficiencies identified during inspections?
30 days. Immediately for illicit discharges.
- L. Do you have authority to take enforcement action for failure to properly operate and maintain storm water 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 storm water management practices? 0
- 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? Annually

8. Program Resources

- A. What was the annual expenditure to implement MS4 permit requirements this reporting period? 200,000
- B. What is next year's budget for implementing the requirements of your MS4 UPDES permit? 216,000
- C. This year what is/are your source(s) of funding for the storm water program, and annual revenue (amount or percentage) derived from each?

Source: <u>Utility Fees</u>	Amount \$ <u>2.7MIL</u>	OR % <u> </u>
Source: _____	Amount \$ _____	OR % _____
Source: _____	Amount \$ _____	OR % _____
- D. How many FTEs does your municipality devote to the storm water program (specifically for implementing the storm water program; not municipal employees with other primary responsibilities)? 1.5
- E. Do you share program implementation responsibilities with any other entities? Yes No

Entity	Activity/Task/Responsibility	Your Oversight/Accountability Mechanism
<u>Salt Lake Co. SW Coalition</u>	<u>Monitoring, Enforcement, Awareness</u>	<u>Attend Coalition Meetings, Fi</u>
<u>Salt Lake County Health Dep.</u>	<u>IDDE Investigation/Enforcment</u>	<u>IDDE Investigation/Enforcment</u>
_____	_____	_____

9. Evaluating/Measuring Progress

A. What indicators do you use to evaluate the overall effectiveness of your storm water 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
Illicite discharge compliants	2016	Annually	3

B. What environmental quality trends have you documented over the duration of your storm water program? Reports or summaries can be attached electronically, or provide the URL to where they may be found on the Web.

1. Illicit Discharge Trainings for Draper City employees over the last 5 years has resulted in more IDDE identification from city employees.

10. Additional Information

In the space below, please include any additional information on the performance of your MS4 program. If providing clarification to any of the questions on this form, please provide the question number (e.g., 2C) in your response.

During June 2015 Draper Received an audit from the state that outlined deficiencies or the City's Storm Water Management Program. This report was used by the new Stormwater Specialist in moving forward with the City's SWMP. The following are some of the major deficiencies that have been addressed and implemented into the City's SWMP:

1. Documentaion of SWPPP Review, Consturction SWPPP Inspections, and enforcement tracking (Section 4)
2. Documentation of dryweather screening of outfalls and priority area inspection, Illicit Discharges, enforcement (Section 5).
3. A comprehensive review of current Storm Water ordinance and implementation of new ordinance to address the following to be submitted to Draper City council by the middle of September 2016.
 - a) Long term Post-construction runoff control, Private storm water maintenance/inspection plans, immediate cessation of improper disposal practices, and authority for city to access and inspect private storm water structures (Section 7)
 - b) A more comprehensive list of what is and is not allowed to be discharged (i.e. emergency fire-fighting services, ground water sump pumps)
 - b) Requirements for consideration of Low Impact Development (LID) with accompanied maintenance/inspection plans for new/redevelopment
 - c) Escalating enforcement option for Construction, Illicit Discharges, and Post-Construction runoff control
4. Documentation of municipal high-priority facility inspections
5. Implementation of UPDES Construction General Permit and new Single Lot permit.

Since the ristrictions have been lifted due to the Covid-19 virus Draper City has picked up where it left off complying with all requirements in all MCM's.

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

Robert Markle, Dep. Public Works Director/City Eng

09/12/2022

Name of Certifying Official, Title

Date (mm/dd/yyyy)