

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**.

Reporting Information

Will you be completing the Annual Report or other submittal type? Annual Report Other

Project Name: Annual MS4 Report

County: Sheboygan

Municipality: Sheboygan County

Permit Number: S050075

Facility Number: 33639

Reporting Year: 2020

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

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 (*S050075-03 General Permit and S058416-04 Madison Area Group Permit shall have a written storm water management program that describes in detail how the permittee intends to comply with the permit requirements for each minimum control measure. Updated programs are due to the department by March 31, 2021.*)
 - 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 (*S050075-03 General Permit and S058416-04 Madison Area Group Permit 2.6.1 - inventory due to the department by March 31, 2021.*)
 - Municipal Storm Water Management Facility (BMP) Inspection and Maintenance Plan (*S050075-03 General Permit and S058416-04 Madison Area Group Permit 2.6.2 – document due to the department by March 31, 2021.*)
 - 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: Sheboygan County

Facility ID # or (FIN): 33639

Updated Information: Check to update mailing address information

Mailing Address: 508 New York Ave

Mailing Address 2:

City: Sheboygan

State: Wisconsin

Zip Code: 53081 xxxxx or xxxxx-xxxx

Primary Municipal Contact Person (Authorized Representative for MS4 Permit)

The "Authorized Representative" or "Authorized Municipal Contact" includes the municipal official that was charged with compliance and oversight of the permit conditions, and has signature authority for submitting permit documents to the Department (i.e., Mayor, Municipal Administrator, Director of Public Works, City Engineer).

Select to **create new** primary contact

First Name: Aaron

Last Name: Brault

Select to **update** current contact information

Title: Director

Mailing Address: 508 New York Avenue

Mailing Address 2:

City: Sheboygan

State: WI

Zip Code: 53081 xxxxx or xxxxx-xxxx

Phone Number: 920-459-3060 Ext: xxx-xxx-xxxx

Email: aaron.brault@sheboygancounty.com

Additional Contacts Information (Optional)

- I&E Program
 IDDE Program
 IDDE Response Procedure Manual

**Individual with responsibility for:
(Check all that apply)**

- Municipal-wide Water Quality Plan
- Ordinances
- Pollution Prevention Program
- Post-Construction Program
- Winter roadway maintenance

First Name:

Last Name:

Title:

Mailing Address:

Mailing Address 2:

City:

State:

Zip Code: xxxxx or xxxxx-xxxx

Phone Number: Ext: xxx-xxx-xxxx

Email:

1. Does the municipality rely on another entity to satisfy some of the permit requirements?

Yes No

Public Education and Outreach

Public Involvement and Participation

Illicit Discharge Detection and Elimination

Construction Site Pollutant Control

Post-Construction Storm Water Management

Pollution Prevention

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)?

Yes No

Minimum Control Measures- Section 1 : Complete**1. Public Education and Outreach**

a. Complete the following information on Public Education and Outreach Activities related to storm water. Select the Delivery Mechanism that best describes how the topics were conveyed to your population. Use the Add Event to add additional entries.

Event Start Date	5/1/2020		
Project/Event Name	Stormwater Maze Creation		
Delivery Mechanism	Website		*Active
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input checked="" type="checkbox"/> Illicit discharge detection and elimination <input type="checkbox"/> Household hazardous waste disposal/pet waste management/vehicle washing <input checked="" type="checkbox"/> Yard waste management/pesticide and fertilizer application <input type="checkbox"/> Stream and shoreline management <input checked="" type="checkbox"/> Residential infiltration <input type="checkbox"/> Construction sites and post-construction storm water management <input checked="" type="checkbox"/> Pollution prevention <input checked="" type="checkbox"/> Green infrastructure/low impact development <input type="checkbox"/> Other: <input type="text"/>	<input checked="" type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input checked="" type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other	101 +	<input checked="" type="radio"/> Yes <input type="radio"/> No

Event Start Date	6/12/2020		
Project/Event Name	HHW Events		
Delivery Mechanism	Distribution of print media		*Active
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input checked="" type="checkbox"/> Illicit discharge detection and elimination <input checked="" type="checkbox"/> Household hazardous waste disposal/pet waste management/vehicle washing <input type="checkbox"/> Yard waste management/pesticide and fertilizer application <input type="checkbox"/> Stream and shoreline management <input type="checkbox"/> Residential infiltration <input type="checkbox"/> Construction sites and post-construction storm water management <input checked="" type="checkbox"/> Pollution prevention <input type="checkbox"/> Green infrastructure/low impact development <input type="checkbox"/> Other: <input type="text"/>	<input checked="" type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input checked="" type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other	101 +	<input type="radio"/> Yes <input checked="" type="radio"/> No

Event Start Date	9/1/2020		
-------------------------	----------	--	--

Project/Event Name	Newsletter		
Delivery Mechanism	Passive print media		*Active
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input checked="" type="checkbox"/> Illicit discharge detection and elimination <input checked="" type="checkbox"/> Household hazardous waste disposal/pet waste management/vehicle washing <input checked="" type="checkbox"/> Yard waste management/pesticide and fertilizer application <input type="checkbox"/> Stream and shoreline management <input checked="" type="checkbox"/> Residential infiltration <input type="checkbox"/> Construction sites and post-construction storm water management <input checked="" type="checkbox"/> Pollution prevention <input type="checkbox"/> Green infrastructure/low impact development <input type="checkbox"/> Other: <input type="text"/>	<input checked="" type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other	101 +	<input type="radio"/> Yes <input checked="" type="radio"/> No

Event Start Date	2/11/2020		
Project/Event Name	Committee Meeting		
Delivery Mechanism	Government Event (Public Hearing, Council Meeting, etc)*		*Active
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input checked="" type="checkbox"/> Illicit discharge detection and elimination <input checked="" type="checkbox"/> Household hazardous waste disposal/pet waste management/vehicle washing <input checked="" type="checkbox"/> Yard waste management/pesticide and fertilizer application <input checked="" type="checkbox"/> Stream and shoreline management <input checked="" type="checkbox"/> Residential infiltration <input checked="" type="checkbox"/> Construction sites and post-construction storm water management <input checked="" type="checkbox"/> Pollution prevention <input checked="" type="checkbox"/> Green infrastructure/low impact development <input type="checkbox"/> Other: <input type="text"/>	<input checked="" type="checkbox"/> General Public <input checked="" type="checkbox"/> Public Employees <input type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input checked="" type="checkbox"/> Other	11-50	<input type="radio"/> Yes <input checked="" type="radio"/> No

b. Brief explanation on Public Education and Outreach reporting. *Limit response to 250 characters and/or attach supplemental information on the attachments page.*

Due to COVID-19, our in-person planned events did not take place. Instead we focused on updating our website and created an interactive stormwater "maze" educational game. Nearly 1,000 info brochures handed out at HHW Events.

Minimum Control Measures - Section 2 : Complete

2. Public Involvement and Participation

a. Permit Activities. 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.

Event Start Date	5/1/2020		
Project/Event Name	Stormwater Maze		
Delivery Mechanism	Website		
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input type="checkbox"/> MS4 Annual Report <input type="checkbox"/> Storm Water Management Program <input type="checkbox"/> Storm Water related ordinance <input checked="" type="checkbox"/> Other: Educational game	<input checked="" type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input checked="" type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other	101 +	<input checked="" type="radio"/> Yes <input type="radio"/> No

b. Volunteer Activities. Complete the following information on Public Involvement and Participation Activities related to storm water. Select the Delivery Mechanism that best describes how volunteer activities were conveyed to your population. Use the Add Event to add additional entries.

Event Start Date	9/1/2020		
Project/Event Name	Sheboygan River Clean-up		
Delivery Mechanism	Clean up event		
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
Volunteer Opportunity	<input checked="" type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Other	11-50	<input type="radio"/> Yes <input checked="" type="radio"/> No

c. Brief explanation on Public Involvement and Participation reporting. *Limit response to 250 characters and/or attach supplemental information on the attachments page.*

Despite COVID, we were able to partner on hosting a clean-up on the Sheboygan River. 40 volunteers disposed of a dumpster full of items.

3. Illicit Discharge Detection and Elimination

- a. How many total outfalls does the municipality have? Unsure
- b. How many outfalls did the municipality evaluate as part of their routine ongoing field screening program? Unsure
- c. From the municipality's routine screening, how many were confirmed illicit discharges? Unsure
-
- d. How many illicit discharge complaints did the municipality receive? Unsure
- e. From the complaints received, how many were confirmed illicit discharges? Unsure
-
- f. How many of the identified illicit discharges did the municipality eliminate in the reporting year (from both routine screening and complaints)? Unsure

(If the sum of 3.c. and 3.e. does not equal 3.f., please explain below.)

- g. How many of the following enforcement mechanisms did the municipality use to enforce its illicit discharge ordinance? Check all that apply and enter the number of each used in the reporting year. Unsure

- Verbal Warning
- Written Warning (including email)
- Notice of Violation
- Civil Penalty/ Citation

Additional Information: _____

- h. 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.*

No illicit discharges were reported and/or witnessed.

Form 3400-224 (09/20)

Minimum Control Measures - Section 4 : Complete

4. Construction Site Pollutant Control

- a. How many total construction sites with one acre or more of land disturbing construction activity were active at any point in the reporting year? Unsure
- b. How many construction sites with one acre or more of land disturbing construction activity did the municipality issue permits for in the reporting year? Unsure
- c. How many erosion control inspections did the municipality complete in the reporting year? Unsure
-
- d. What types of enforcement actions does the municipality have available to compel compliance with the regulatory mechanism? Check all that apply and enter the number of each used in the reporting year. Unsure

- No Authority
- Verbal Warning
- Written Warning (including email)
- Notice of Violation
- Civil Penalty/ Citation
- Stop Work Order
- Forfeiture of Deposit
- Other - Describe below

e. Brief explanation on Construction Site Pollutant Control 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.*

Two qualifying sites of disturbance were discovered without permits. Once the owners were notified, they came into compliance within the dictated timeframe.

Minimum Control Measures - Section 5 : Complete

5. Post-Construction Storm Water Management

a. How many sites with new structural storm water management facilities* have received local approval ? Unsure

*Engineered and constructed systems that are designed to provide storm water quality control such as wet detention ponds, constructed wetlands, infiltration basins, grassed swales, permeable pavement, catch basin sumps, etc.

b. Does the municipality utilize privately owned storm water management facilities in its pollutant reduction analysis? Yes No Unsure

c. If Yes, How many privately owned storm water management facilities were inspected in the reporting year ? Unsure

Inspections completed by private land owners should be included in the reported number.

d. What types of enforcement actions does the municipality have available to compel compliance with the regulatory mechanism? Check all that apply and enter the number of each used in the reporting year. Unsure

- No Authority
- Verbal Warning
- Written Warning (including email)
- Notice of Violation
- Civil Penalty/ Citation
- Forfeiture of Deposit
- Complete Maintenance
- Bill Responsible Party

Other - Describe below

- e. Brief explanation on Post-Construction Storm Water Management reporting. *If marked 'Unsure' on any questions above, justify your reasoning. Limit your response to 250 characters and/or attach supplemental information on the attachments page.*

Applicants developed their system in accordance with their plans.

Form 3400-224 (09/20)

Minimum Control Measures - Section 6 : Complete

6. Pollution Prevention

Storm Water Management Facility Inspections Not Applicable

- a. Enter the total number of municipally owned or operated structural storm water management facilities? Unsure
- b. How many new municipally owned storm water management facilities were installed in the reporting year? Unsure
- c. How many municipally owned storm water management facilities were inspected in the reporting year? Unsure
- d. What elements are looked at during inspections (250 character limit)?

Erosion, vegetation, and clarity of discharge entering the stormwater structure.

- e. How many of these facilities required maintenance? Unsure
- f. Brief explanation on Storm Water Management Facility 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.*

Public Works Yards & Other Municipally Owned Properties (SWPPP Plan Review) Not Applicable

- g. How many municipal properties require a SWPPP? Unsure
- h. How many inspections of municipal properties have been conducted in the reporting year? Unsure
- i. Have amendments to the SWPPPs been made?
 Yes No Unsure
- j. If yes, describe what changes have been made. Limit response to 250 characters and/or attach supplemental information on the attachment page:

- k. Brief explanation on Storm Water Pollution Prevention Plan 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.*

Facility in question is very public with high visibility and primarily internally drained so there is not much of chance stormwater pollution events taking place.

Collection Services - *Street Sweeping / Cleaning Program* Not Applicable

- l. Did the municipality conduct street sweeping/cleaning during the reporting year?
 Yes No Unsure
- m. If known, how many tons of material was removed? Unsure
- n. Does the municipality have a low hazard exemption for this material?
 Yes No
- o. 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 _____
 No - Explain _____
 Not Applicable

Collection Services - *Catch Basin Sump Cleaning Program* Not Applicable

- p. Did the municipality conduct catch basin sump cleaning during the reporting year?
 Yes No Unsure
- q. How many catch basin sumps were cleaned in the reporting year? Unsure
- r. If known, how many tons of material was collected? Unsure
- s. Does the municipality have a low hazard exemption for this material?
 Yes No
- t. If catch basin sump cleaning is identified as a storm water best management practice in the pollutant loading analysis, was cleaning completed at the assumed frequency?
 Yes- Explain frequency _____
 No - Explain _____
 Not Applicable

Collection Services - *Leaf Collection Program* Not Applicable

Winter Road Management Not Applicable

*Note: We are requesting information that goes beyond the reporting year, answer the best you can.

- aa. How many lane-miles of roadway is the municipality responsible for doing snow and ice control? Unsure
- ab. Provide amount of de-icing products used by month last winter season?
 Solids (tons) (ex. sand, or salt-sand)

Product	Oct	Nov	Dec	Jan	Feb	Mar
<u>Salt/sand mix</u>	481	1896	2492	5216	3059	302

Liquids (gallons) (ex. brine)

	Oct	Nov	Dec	Jan	Feb	Mar
<u>Brine</u>	17486	61864	99999	99999	99999	27613

- ac. Was salt applying machinery calibrated in the reporting year? Yes No Unsure
- ad. Have municipal personnel attended salt reduction strategy training in the reporting year? Yes No Unsure

Training Date	Training Name	# Attendance
2/5/2020	Best Winter Mgt Practices	1

- 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*

December Brine = 138746, January Brine = 274004, Feb Brine = 155314

Internal (Staff) Education & Communication

- af. Has training or education been held for municipal or other personnel involved in implementing each of the pollution prevention program elements? Yes No Unsure

If yes, describe what training was provided (250 character limit):

When:

How many attended:

- ag. Describe how the municipality has kept the following local officials and municipal staff aware of the municipal storm water discharge permit programs and its requirements.

Elected Officials

Regular reporting at public meetings.

Municipal Officials

Regular reporting at public meetings.

Appropriate Staff (such as operators, Department heads, and those that interact with public)

Regular reporting at public meetings.

- ah. Brief explanation on Internal Education 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.*

Minimum Control Measures - Section 7 : Complete

7. Storm Sewer System Map

- a. Did the municipality update their storm sewer map this year?

Yes No Unsure

If yes, check the areas the map items that got updated or changed:

- Storm water treatment facilities
- Storm pipes
- Vegetated 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.*

There were no changes to the County-maintained Storm Sewer System

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.

Annual Expenditure Reporting Year	Budget Reporting Year	Budget Upcoming Year	Source of Funds
-----------------------------------	-----------------------	----------------------	-----------------

Element: Public Education and Outreach

1000	4000	1000	<u>Other</u>
------	------	------	--------------

Element: Public Involvement and Participation

0	3000	3000	<u>Other</u>
---	------	------	--------------

Element: Illicit Discharge Detection and Elimination

6100	2381	6100	<u>General revenue fund</u>
------	------	------	-----------------------------

Element: Construction Site Pollutant Control

2050	1900	1900	<u>Permit fee and/or deposit/escrow</u>
------	------	------	---

Element: Post-Construction Storm Water Management

2050	1900	1900	<u>Permit fee and/or deposit/escrow</u>
------	------	------	---

Element: Pollution Prevention

40000	40000	37000	<u>General revenue fund</u>
-------	-------	-------	-----------------------------

Other (describe)

			<u>Select...</u>
--	--	--	------------------

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:

c: Have any of the receiving waters that the municipality discharges to been added to the impaired waters list during the reporting year?

Yes No Unsure

d: Has the municipality evaluated their storm water practices to reduce the pollutants of concern?

Yes No Unsure

Storm Water Quality Management

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:

Total suspended solids (TSS)

Total phosphorus (TP)

Additional 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.*

We are applying for a UNSP Planning Grant to update our Stormwater Quality Management Plan.

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) - [Help reduce file size and trouble shoot file uploads](#)

*Required Item

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

Attach - Other Supporting Documents

AR SWMap

 File Attachment

[MS42020.pdf](#)

AR Other

 File Attachment

[CombinedSampleDocs.pdf](#)

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

Attach - Permit Compliance Documents

EO Program

 File Attachment

[Fall2020Newsletter.pdf](#)

IP Program

 File Attachment

[StrandSheboyganCounty-MS4-PERMITVERBIAGE-SAI-12212020.pdf](#)

EO Program

 File Attachment

[StormwaterManagementMaze-PrintablePage.pdf](#)

EO Program

 File Attachment

[2020StormwaterFlyer.pdf](#)

IP Program

 File Attachment

[prae-committee-minutes-march-9-2021.pdf](#)

(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 [HERE](#).

Terms and Conditions

Certification: I hereby certify that I am an authorized representative of the municipality covered under Sheboygan 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.
- Delegation of Signature Authority (Form 3400-220) for agent signing on the behalf of the authorized municipal contact.
- Agent seeking to share this item with authorized municipal contact (authorized municipal contact must get WAMS id and complete signature).

Name: Aaron Brault

Title: Director - Planning & Conservation

Authorized Signature.

- I accept the above terms and conditions.

Signed by : i:0#.f|wamsmembership|abrault on 2021-03-22T11:42:52

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.