



**Notice of Intent (NOI) for Storm Water Discharges from Small Municipal Separate Storm Sewer Systems (MS4) under the TPDES Phase II MS4 General Permit (TXR040000)**

**TCEQ Office Use Only**  
 Permit No.:  
 RN:  
 CN:



Did you know you can pay on line? Go to <https://www6.tceq.state.tx.us/epay/>  
 Select Fee Type: GENERAL PERMIT MS4 PHASE II STORM WATER DISCHARGE NOI APPLICATION

**Application Fee:** You must pay the \$100 Application Fee to TCEQ for the application to be considered complete.  
 How did you pay this fee?

<input type="checkbox"/> Mailed:	Check/Money Order No.: N/A	Name Printed on Check: N/A
<input checked="" type="checkbox"/> EPAY:	Voucher No.: 88853	Is the Payment Voucher copy attached? <input checked="" type="checkbox"/> Yes

**IMPORTANT:**

- Use the attached **INSTRUCTIONS** when completing this form.
- After completing this form, use the attached **CUSTOMER CHECKLIST** to make certain all items are complete and accurate.
- Missing, illegible, or inaccurate items may delay final acknowledgment or coverage under the general permit.

**One (1) copy of the NOI and SWMP with the completed SWMP Cover Sheet MUST be submitted with the original NOI and SWMP.**

Is the copy attached?  Yes

**A. OPERATOR (applicant)**

1. If the applicant is currently a customer with TCEQ, what is the Customer Number (CN) issued to this entity?  
 CN 600692529

2. What is the full Legal Name of the applicant?

The City of Hidalgo

*(The exact legal name must be provided.)*

3. What is the applicant's mailing address as recognized by the **US Postal Service**?

Address: 704 E Texano Dr.

Suite No./Bldg. No./Mail Code: n/a

City: Hidalgo

State: Texas

ZIP Code: 78557

Country Mailing Information (if outside USA).

Country Code:

Postal Code:

4. Phone No.: ( 956 ) 843-2286

Extension: N/A

5. Fax No.: ( 956 ) 843-2217

E-mail Address: Letty\_cityofhidalgo@yahoo.com

6. Indicate the type of Customer:

Federal Government

State Government

County Government

City Government

Other Government

7. Number of Employees:

0-20;

21-100;

101-250;

251-500; or

501 or higher

**B. BILLING ADDRESS**

The Operator is responsible for paying the annual fee. The annual fee will be assessed to permits **active on September 1 of each year**. TCEQ will send a bill to the address provided in this section. The Operator is responsible for terminating the permit when it is no longer needed.

Is the billing address same as the Operator Address?

Yes, go to **Section C.**  No, fill out **Section B**

1. Billing Mailing Address:

Suite No./Bldg. No./Mail Code:

City:

State:

ZIP Code:

2. Country Mailing Information (if outside USA).

Country Code:

Postal Code:

3. Billing Contact (Attn or C/O):

4. Phone No.: ( )

Extension:

5. Fax No.: ( )

E-mail Address:

C. REGULATED ENTITY (RE) INFORMATION			
1. Has the TCEQ issued a Regulated Entity Reference Number (RN) for the regulated MS4 ? Yes. What is the RN? <b>RN</b> No - TCEQ will assign the RN number after the NOI is submitted.			
2. Name that is used to identify the small MS4 (Regulated Entity). (Example: City of XXX MS4)			
3. Provide a brief description of the regulated MS4 boundaries: (Example: Area within the City of XXXX limits that is located within the xxx (e.g. Dallas) urbanized area.) Area within The City of Hidalgo limits located within the Hidalgo Urbanized area.			
4. a. What is the county where the largest residential population exists within the regulated MS4 boundaries? <b>Hidalgo</b>			
b. Is the MS4 located within additional counties? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, what county(s)?			
5. What is the latitude and longitude of the approximate center of the regulated portion of the small MS4? Latitude: 26.24205 N Longitude: -98.10088 W			
6. What is the mailing address for the regulated entity? Is the RE mailing address the same as the Operator? <input checked="" type="checkbox"/> Yes, go to Section F. <input type="checkbox"/> No, provide the address.			
Street Number:		Street Name:	
City:	State:	ZIP Code:	
D. GENERAL CHARACTERISTICS			
1. I certify that any portion of the regulated MS4 is <b>not</b> located on Indian Country Lands. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If No, you must obtain authorization through EPA, Region VI.			
2. What is the Standard Industrial Classification (SIC) code (see instructions for common codes): <b>9111</b>			
3. Has TCEQ "designated" the small MS4 as needing coverage under this general permit? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "No" and no portion of the Small MS4 is located within an Urbanized Area as determined by the 2000 Decennial Census by the U.S. Bureau of Census requiring a NOI be submitted, the operator is not eligible for coverage under this general permit through the NOI.			
4. Storm Water Management Program (SWMP)			
a. I certify that the SWMP submitted with this Notice of Intent has been developed according to the provisions of this general permit TXR040000. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
b. I certify that the SWMP Cover Sheet is completed and attached to the front of the SWMP. <input type="checkbox"/> Yes <input type="checkbox"/> No If No to question a. or b. the application is considered incomplete and may be returned.			
b. Who is the person responsible for implementing or coordinating implementation of the SWMP? (Note: All contact information requested below is required.)			
Name: <b>John Franz</b>		Title: <b>Mayor</b>	Company: <b>The City of Hidalgo</b>
Address: <b>704 E. Texano Dr.</b>		Suite No./Bldg. No./Mail Code: <b>n/a</b>	
City: <b>Hidalgo</b>		State: <b>Texas</b>	ZIP Code: <b>78557</b>
Phone No.: ( 956 ) 843-2286		Extension: <b>N/A</b>	
Fax No.: ( 956 ) 843-2217		E-mail Address: <b>Letty_cityofhidalgo@yahoo.com</b>	
5. Seventh Minimum Control Measure (MCM) for Municipal Construction Activities			
a. Is the Minimum Control Measure for authorization to discharge storm water from municipal construction activities included with the attached SWMP? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
b. If you answered "Yes" to 5.a., what are the boundaries within which those activities will occur? The boundaries of the SWMP will be incorporated in the Hidalgo urbanized area.			
Note: If the boundaries are located outside of the urbanized area, then the entire SWMP must also incorporate the additional areas.			

c. Is the discharge or potential discharge from regulated construction activities within the Recharge Zone, Contributing Zone, or Contributing zone within the Transition zone of the Edwards Aquifer?  Yes  No

If the answer is "Yes", please note that a copy of the agency approved Plan required by the Edwards Aquifer Rule (30 TAC Chapter 213) must be either included or referenced in the construction storm water pollution prevention plan(s).

6. Discharge Information

a. What is the name of the receiving water body(s) from the MS4?

Rio Grande River, IBWC floodway

b. What is the classified segment(s) that receives discharges, directly or indirectly, from the small MS4?

2302,2202

c. Are any of the surface water bodies receiving discharges from the small MS4 on the latest EPA-approved CWA § 303(d) list of impaired waters?  Yes  No

If Yes, what is the name of the impaired water body(s) receiving the discharges from the small MS4?

d. Is the discharge into any other MS4 prior to discharge into surface water in the state?  Yes  No

If Yes, what is the name of the MS4 Operator?

7. Edwards Aquifer

Is the discharge or potential discharge from the MS4 within the Recharge Zone, Contributing Zone, or Contributing Zone within the Transition Zone of the Edwards Aquifer?  Yes  No

If the answer is Yes, please note that a copy of the agency approved Plan required by the Edwards Aquifer Rule (30 TAC Chapter 213) for activities also regulated under this general permit must be either included or referenced in the SWMP.

8. Public Participation Process

The Office of Chief Clerk will send the operator or person responsible for publishing notice, the notice of the executive director's preliminary determination of the NOI and SWMP, for publishing in a newspaper of largest circulation in the county where the small MS4 is located. If multiple counties, notice must be published at least once in the newspaper of largest circulation in the county containing the largest resident population.

The applicant must file with the Chief Clerk a copy of an affidavit of the publication within 60 days of receiving the written instructions from the Office of Chief Clerk.

a. I will comply with the Public Participation requirements described in Part II.D.12 of the general permit.  Yes  No  
If No, coverage under this general permit is not obtainable.

b. Who is the person responsible for publishing notice of the executive director's preliminary determination on the NOI and SWMP? (Note: All contact information requested below is required.)

Name: Joe Vera Title: City Manager Company: The City of Hidalgo

Address: 704 E. Texano Dr. Suite No./Bldg. No./Mail Code: n/a

City: Hidalgo State: Texas ZIP Code: 78557

Phone No.: ( 956 ) 843-2286 Extension: n/a

Fax No.: ( 956 ) 843-2217 E-mail Address: hidjoevera@aol.com

c. What is the name and location of the public location where copies of the NOI and SWMP, as well as the executive director's general permit and fact sheet, may be viewed?

Name of Public Place: Hidalgo City Hall

Address of Public Place: 704 E Texano Dr.

County of Public Place: Hidalgo

**E. CERTIFICATION**

Check "Yes" to the certifications below. Failure to indicate "Yes" to ALL items may result in denial of coverage under the general permit.

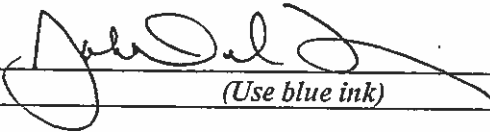
- I certify that I have obtained a copy and understand the terms and conditions of the general permit TXR040000.  Yes
- I certify that the small MS4 qualifies for coverage under the general permit TXR040000.  Yes
- I understand that a Notice of Termination (NOT) must be submitted when this authorization is no longer needed.  Yes
- I understand that permits active on September 1st of each year will be assessed an Annual Water Quality Fee.  Yes

**Operator Certification:**

I, John David Franz Mayor  
Typed or printed name Title

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 gather and evaluate 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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under 30 Texas Administrative Code §305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signature:  Date: 02/03/2010  
(Use blue ink)

Did you complete everything? Use this checklist to be sure!

Are you ready to mail your form to TCEQ? Go to the General Information Section of the Instructions for mailing addresses.

Customer GP Notice of Intent Checklist TXR040000	
<input checked="" type="checkbox"/>	This checklist is for use by the operator to ensure a complete application. Missing information may result in denial of coverage under the permit. (See NOI Process description in the Instructions)
<input checked="" type="checkbox"/>	Application Fee was paid through EPAY and payment voucher is attached or the Payment Submittal Form with payment was mailed to TCEQ Cashier's office. DO NOT MAIL THE PAYMENT WITH THE ORIGINAL NOI.  <b>Note: Use ePay to pay the application fee. It helps to streamline processing of your application.</b>
	OPERATOR INFORMATION - Confirm each item is complete: ✓
<input checked="" type="checkbox"/>	Customer Number (CN) issued by TCEQ Central Registry
<input checked="" type="checkbox"/>	Operator Mailing Address is complete & verifiable with USPS. <a href="http://www.usps.com">www.usps.com</a>
<input checked="" type="checkbox"/>	Phone Numbers/E-mail Address
<input checked="" type="checkbox"/>	Type of Operator (Entity Type)
<input checked="" type="checkbox"/>	Number of Employees
<input checked="" type="checkbox"/>	Billing Address is complete & verifiable with USPS. <a href="http://www.usps.com">www.usps.com</a>
	REGULATED ENTITY (RE) INFORMATION ON PROJECT OR SITE - Confirm each item is complete: ✓
<input checked="" type="checkbox"/>	MS4 Name/Regulated Entity Name
<input checked="" type="checkbox"/>	Site Description
<input checked="" type="checkbox"/>	Latitude and Longitude <a href="http://www.tceq.state.tx.us/gis/drgview.html">www.tceq.state.tx.us/gis/drgview.html</a> or <a href="http://www.terraserver.microsoft.com/advfind.aspx">www.terraserver.microsoft.com/advfind.aspx</a> .
<input checked="" type="checkbox"/>	Business description
<input checked="" type="checkbox"/>	Site Mailing Address (checked same as operator or provided a complete & USPS verifiable address. <a href="http://www.usps.com">www.usps.com</a> )
	GENERAL CHARACTERISTICS - Confirm each item is complete: ✓
<input checked="" type="checkbox"/>	Indian Country Lands –the facility is not on Indian Country Lands
<input checked="" type="checkbox"/>	Standard Industrial Classification (SIC) code <a href="http://www.osha.gov/oshstats/sicser.html">www.osha.gov/oshstats/sicser.html</a>
<input checked="" type="checkbox"/>	Qualifying TCEQ “Designated” Small MS4
<input checked="" type="checkbox"/>	Minimum Control Measure (MCM) for Municipal Construction Activities
<input checked="" type="checkbox"/>	Discharge Information (receiving water body, segment no., impaired water body(s) and MS4 Operator)
<input checked="" type="checkbox"/>	Edwards Aquifer Rule
<input checked="" type="checkbox"/>	Public Participation Information
<input checked="" type="checkbox"/>	CERTIFICATION Certification statements have been checked indicating “Yes” Signature meets 30 Texas Administrative Code (TAC) §305.44 and is original and has been provided for the Operator.
<input checked="" type="checkbox"/>	Storm Water Management Program (SWMP) and completed SWMP Cover Sheet are attached to the NOI.

## Storm Water Management Program (SWMP) Cover Sheet

Confirm Each Minimum Control Measure (MCM) Below is Included in the SWMP

This cover sheet MUST be completed by indicating the page number where the requested item will be found in the SWMP. Provide the page number in the left column for each item.

This cover sheet MUST be attached to the front of the SWMP.

Operator Name on NOI:

Page # (s)	MCM 1: Public Education and Outreach on Storm Water Quality Issues
3-4	<p>SWMP includes the following required elements:</p> <ol style="list-style-type: none"> <li>1. Educational materials are distributed to the community, or equivalent public outreach is conducted.</li> <li>2. The following groups are included in the program, or the SWMP provides justification if the group is not included: residents, visitors, public service employees, businesses, commercial and industrial facilities, and construction site personnel.</li> <li>3. Outreach informs groups about impacts storm water can have on water quality, hazards associated with illegal discharges, and steps they can take to reduce pollutants in storm water runoff.</li> </ol>
3-4	<p>SWMP Lists Best Management Practices (BMPs) used to fulfill this MCM. Examples of possible BMPs include, but are not limited to, the following:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Classroom Education</li> <li><input type="checkbox"/> Use of media</li> <li><input type="checkbox"/> Education/Outreach for Commercial Activities</li> <li><input type="checkbox"/> Lawn and garden activities</li> <li><input type="checkbox"/> Promotional giveaways</li> <li><input type="checkbox"/> Water conservation practices for homeowners</li> <li><input type="checkbox"/> Outreach programs tailored to specific communities and children</li> <li><input type="checkbox"/> Storm water educational materials</li> <li><input type="checkbox"/> Educational displays, pamphlets, booklets, and utility stuffers</li> <li><input type="checkbox"/> Webpage</li> <li><input type="checkbox"/> Storm drain stenciling</li> <li><input type="checkbox"/> Speakers to community groups</li> <li><input type="checkbox"/> Encouragement of proper lawn and garden care</li> <li><input type="checkbox"/> Encouragement of low impact development</li> <li><input type="checkbox"/> Support of pollution prevention for businesses</li> <li><input type="checkbox"/> Encouragement of water conservation practices</li> <li><input type="checkbox"/> Encouragement of pet waste management</li> <li><input type="checkbox"/> Storm water hotlines</li> </ul>
yes	SWMP includes measurable goals, and the method of measurement, for addressing storm water quality.
<input checked="" type="checkbox"/>	SWMP has been fully implemented, or includes a schedule of implementation not to exceed five (5) years from permit issuance date.
Page # (s)	MCM 2: Public Involvement/Participation
5-7	SWMP includes a program that complies with State and local public notice requirements.
5-7	<p>SWMP lists BMPs used to fulfill this MCM. Examples of possible BMPs may include the following:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Stakeholder meetings</li> <li><input type="checkbox"/> Community hotline</li> <li><input type="checkbox"/> Coordination with school groups/scouting</li> <li><input type="checkbox"/> Listserver</li> <li><input type="checkbox"/> Stream cleanup and monitoring</li> <li><input type="checkbox"/> Adopt-A-Stream programs</li> <li><input type="checkbox"/> Incentives for businesses to participate, such as web links</li> </ul>

	<ul style="list-style-type: none"> <li><input type="checkbox"/> Volunteer monitoring</li> <li><input type="checkbox"/> Watershed Organization</li> <li><input type="checkbox"/> Storm drain stenciling programs</li> <li><input type="checkbox"/> Advisory/partner committees</li> <li><input type="checkbox"/> Mailing list development and use</li> <li><input type="checkbox"/> Reforestation programs</li> <li><input type="checkbox"/> Wetland plantings</li> <li><input type="checkbox"/> Coordinate volunteer programs</li> </ul>
yes	SWMP includes measurable goals, and the method of measurement, for addressing storm water quality.
yes	SWMP has been fully implemented, or includes a schedule of implementation not to exceed five (5) years from permit issuance date.
Page # (s)	<b>MCM 3: Illicit Discharge Detection and Elimination</b>
8-11	<p>SWMP includes the following required elements:</p> <ol style="list-style-type: none"> <li>1. Description of program that will be used to detect and eliminate illicit discharges</li> <li>2. Description of the manner and process to be used to effectively prohibit illicit discharges, including, at a minimum: <ol style="list-style-type: none"> <li>a. List of detection techniques</li> <li>b. Appropriate actions and enforcement procedures for removing the source of an illicit discharge</li> <li>c. To the extent allowable under state and local law, an ordinance or other regulatory mechanism is utilized to prohibit and eliminate illicit discharges</li> <li>d. Description of local controls and conditions established for common and incidental non-storm water discharges that the operator does not consider illicit</li> </ol> </li> <li>3. Map of outfalls included or described in schedule, with following information: <ol style="list-style-type: none"> <li>a. Locations of all outfalls</li> <li>b. Names and locations of waters of the U.S. receiving discharges from the MS4</li> <li>c. Source(s) of information used to develop and update map</li> </ol> </li> </ol>
8-11	<p>SWMP Lists BMPs used to fulfill this MCM. Examples of possible BMPs may include the following:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> List of non-storm water discharges that will not be considered illicit</li> <li><input type="checkbox"/> Procedures to address illegal dumping</li> <li><input type="checkbox"/> Hazardous materials disposal opportunities</li> <li><input type="checkbox"/> Industrial / Business connections</li> <li><input type="checkbox"/> Addressing wastewater connections to MS4</li> <li><input type="checkbox"/> Addressing recreational sewage (boats/camping/etc.)</li> <li><input type="checkbox"/> System inspections</li> <li><input type="checkbox"/> Dye testing</li> <li><input type="checkbox"/> Recycling programs</li> <li><input type="checkbox"/> Informing public/employees/businesses of hazards associated with illicit discharges</li> <li><input type="checkbox"/> Identification of illicit discharges</li> <li><input type="checkbox"/> Used oil collection centers</li> <li><input type="checkbox"/> Public outreach and education programs regarding illicit discharges</li> <li><input type="checkbox"/> Publicize and facilitate public reporting</li> </ul>
yes	SWMP includes measurable goals, and the method of measurement, for addressing storm water quality.
yes	SWMP has been fully implemented, or includes a schedule of implementation not to exceed five (5) years from permit issuance date.
Page # (s)	<b>MCM 4: Construction Site Storm Water Runoff Control</b>
12-14	<p>SWMP includes the following required elements listed below:</p> <ol style="list-style-type: none"> <li>1. Description of program that will be developed, implemented and enforced, to address storm water runoff from construction one acre and greater (including larger common plan)</li> <li>2. Ordinance or other regulatory mechanism to require erosion and sediment controls, to the extent allowable under state and local law <ol style="list-style-type: none"> <li>a. Ordinance/regulatory mechanism includes sanctions to ensure compliance, to the extent allowable under state and local law</li> <li>b. Program requires contractors to implement erosion and sediment control BMPs</li> </ol> </li> </ol>

	<p>c. Program requires contractors to control construction site waste</p> <ol style="list-style-type: none"> <li>3. Procedures for site plan review to consider water quality impacts</li> <li>4. Procedures for receipt and consideration of input from the public</li> <li>5. Procedures for site inspection and enforcement of control measures, to the extent allowable under state and local law</li> </ol>
12-14	<p>SWMP lists BMPs used to fulfill this MCM. Examples may include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Requirement to comply with TPDES CGP</li> <li><input type="checkbox"/> Notification to discharger of responsibilities under TPDES CGP</li> <li><input type="checkbox"/> Hire staff to review construction site plans</li> <li><input type="checkbox"/> Provide a web page for public input on construction activities</li> <li><input type="checkbox"/> Require overall construction site waste management</li> <li><input type="checkbox"/> Perform site inspections and enforcement</li> <li><input type="checkbox"/> Provide education and training for construction site operators</li> <li><input type="checkbox"/> Notify dischargers of requirement to obtain TPDES permit coverage</li> <li><input type="checkbox"/> Mechanism to prohibit discharges into MS4 where necessary</li> </ul>
yes	SWMP includes measurable goals, and the method of measurement, for addressing storm water quality.
yes	SWMP includes measurable goals, and the method of measurement, for addressing storm water quality.
yes	SWMP has been fully implemented, or includes a schedule of implementation not to exceed five (5) years from permit issuance date.
Page # (s)	<b>MCM 5: Post-Construction Storm Water Management in Areas of New Development and Redevelopment</b>
15-17	<p>SWMP includes the following required elements listed below:</p> <ol style="list-style-type: none"> <li>1. SWMP describes program that will be developed, implemented and enforced, to address storm water runoff from new development / redevelopment activities of one acre and greater (including larger common plan)</li> <li>2. Program ensures controls are in place to address runoff</li> <li>3. Strategies include structural and/or non-structural BMPs appropriate for the community</li> <li>4. Ordinance or other regulatory mechanism is in place or planned which will regulate discharges from new development and redevelopment projects</li> <li>5. Long term operation and maintenance of BMPs is addressed</li> </ol>
15-17	<p>SWMP lists BMPs used to fulfill this MCM. Examples may include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Local ordinance in place or planned</li> <li><input type="checkbox"/> Guidance document for developers to utilize</li> <li><input type="checkbox"/> Specific BMPs established for particular watersheds</li> <li><input type="checkbox"/> List of appropriate BMPs provided to operators</li> <li><input type="checkbox"/> Elimination of curbs and gutters is encouraged</li> <li><input type="checkbox"/> Zoning takes into account storm water issues</li> <li><input type="checkbox"/> Incentives for use of permeable choices, such as porous pavement</li> <li><input type="checkbox"/> Requirements for wet ponds or other BMPs for certain size sites</li> <li><input type="checkbox"/> Xeriscaping</li> </ul>
yes	SWMP includes measurable goals, and the method of measurement, for addressing storm water quality.
yes	SWMP has been fully implemented, or includes a schedule of implementation not to exceed five (5) years from permit issuance date.
Page # (s)	<b>MCM 6: Pollution Prevention / Good Housekeeping Measures for Municipal Operations</b>
18-20	<p>SWMP includes the following required elements listed below:</p> <ol style="list-style-type: none"> <li>1. Operation and maintenance (O&amp;M) program in place or scheduled, to reduce/prevent pollution from municipal operations</li> <li>2. Housekeeping measures and BMPs that will reduce pollutants have been identified</li> <li>3. Training provided for employees involved in municipal operations subject to the housekeeping/BMP requirements</li> <li>4. Maintenance of structural BMPs (if applicable) is performed <ol style="list-style-type: none"> <li>a. SWMP lists maintenance schedules for structural BMPs (if applicable)</li> <li>b. SWMP lists long term inspection procedures to reduce floatables</li> </ol> </li> </ol>



	<p>5. Waste is removed from MS4 and properly disposed</p> <p>a. Procedures for waste disposal are included for dredge spoil, accumulated sediment, and floatables</p> <p>6. List of municipal operations subject to O&amp;M program or training program</p> <p>7. List of municipally owned industrial activities subject to TPDES industrial storm water regulations</p>
18-20	<p>SWMP lists BMPs used to fulfill this MCM. Examples may include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> BMPs which address fleet vehicle maintenance/washing</li> <li><input type="checkbox"/> BMPs which address parking lot and street cleaning</li> <li><input type="checkbox"/> Catch basin and storm drain system cleaning</li> <li><input type="checkbox"/> Landscaping and lawn care (e.g. xeriscaping)</li> <li><input type="checkbox"/> Waste materials management</li> <li><input type="checkbox"/> Road salt application and storage practices</li> <li><input type="checkbox"/> Used oil recycling</li> <li><input type="checkbox"/> Pest management practices</li> <li><input type="checkbox"/> Fire training facilities</li> <li><input type="checkbox"/> BMPs which address roadway and bridge maintenance</li> <li><input type="checkbox"/> Golf course maintenance/waste disposal</li> <li><input type="checkbox"/> Disposal of cigarette butts</li> <li><input type="checkbox"/> Park maintenance (e.g., providing trash bags)</li> </ul>
yes	SWMP includes measurable goals, and the method of measurement, for addressing storm water quality.
yes	SWMP has been fully implemented, or includes a schedule of implementation not to exceed five (5) years from permit issuance date.
Page # (s)	<p><b>Optional 7th MCM : Municipal Construction Activities (only available within the regulated area where the MS4 operator meets the definition of construction site operator)</b></p> <p>If this MCM is utilized applicable, SWMP must include the following information:</p>
yes	Description of how construction activities will generally be conducted so as to take into consideration local conditions of weather, soils, and other site specific considerations
yes	Description of the area that this MCM will address and where the MS4 operator's construction activities are covered (e.g. within the boundary of the urbanized area, the corporate boundary, a special district boundary, an extra territorial jurisdiction, or other similar jurisdictional boundary)
yes	If the area included in this MCM includes areas outside of the UA, then all MCMs will be implemented over those additional areas as well.
yes	<p>Description provided for one of the following:</p> <ul style="list-style-type: none"> <li>▶ How contractor activities will be supervised or overseen to ensure that the SWP3 requirements are properly implemented at the construction site(s); or</li> <li>▶ How the MS4 operator will make certain that contractors have a separate authorization for storm water discharges if needed.</li> </ul>
yes	General description of how a construction SWP3 will be developed for each construction site.