



BRASELTON
GEORGIA
USA

**2018
Phase II Municipal Separate
Storm Sewer System (MS4)
Annual Report for
The Town of Braselton**



Town Officials

Bill Orr, Mayor
Jennifer Scott, Town Manager
Ken Robbins, Public Works Director
Steve Payne, Town Engineer
Sandy Weinel, Capital Projects Coordinator

Town Council

Tony Funari
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Phase II Municipal Separate Storm Sewer System (MS4)
Annual Report Form

Cover Page

Part 1. General Information:

1. Permittee Name: Town of Braselton, Georgia
2. Mailing Address: P.O. Box 306 Braselton, Georgia 30517
3. Contact Person: Sandy Weinel, Capital Projects Coordinator
4. E-Mail Address: sweinel@braselton.net
5. Telephone Number: 706-654-3915
6. Reporting Year (January 1–December 31): 2018

Part 2. Status of Storm Water Management Program:

1. Has your storm water management program to comply with the 2017 NPDES Permit been approved? Yes No
2. If yes, provide the approval date: [Click here to enter text.](#)
3. If no, provide the date of the last submittal: June 4, 2018

Part 3. Certification Statement:

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

Signature: _____


Printed Name: Jennifer Scott

Title: Town Manager Date: 07-15-2019

Public Education and Outreach
Minimum Control Measure
(Table 4.2.1)

1. **BMP # 1**
2. **BMP Title:** Stormwater Website
3. **Provide the measurable goal from SWMP:** The Town will record the number of hits/views received for the Public Works page of their website, which shows the stormwater video series.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: The Town's website was updated and analytics for the Public Works page of the website during 2018 were not saved from the older version of the website.
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: No website analytics data available.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: N/A
 - B. Date(s) for any BMP activities completed during this reporting period: N/A
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: Number of views were not tracked during 2018.
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2**
2. **BMP Title:** Stormwater Pamphlets and Stormwater Video Distribution
3. **Provide the measurable goal from SWMP:** Track the number of stormwater pamphlets and stormwater videos that are picked up by the general public and monitor the frequency of restocking the pamphlets.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: A total of 22 pamphlets were picked up from Planning and Public Utilities. Stormwater videos are available on the Town's website. Copies of the pamphlets are provided in Exhibit 1.
 - B. Date(s) for any BMP activities completed during this reporting period: On-going
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Public Education BMPs contained in your SWMP. Permittees with a population greater than 10,000 at the time of this permit issuance must complete four (4) BMPs.

Public Involvement/ Participation
Minimum Control Measure
(Table 4.2.2)

1. **BMP # 1**
2. **BMP Title:** Braselton Rivers Alive Program
3. **Provide the measurable goal from SWMP:** The amount of waste collected and the location(s) of the clean-up efforts will be documented.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The Braselton AAS held three Rivers Alive events during 2018. During the event on April 14, 2.5 tons of litter and trash were cleaned from the watershed by 84 volunteers. During the event on August 30, 13 bags of trash were collected by seven volunteers. During the private event on December 26, four volunteers collected 300 pounds of trash from the watershed. Documentation for all cleanup events is provided in Exhibit 2.
 - B. Date(s) for any BMP activities completed during this reporting period: 4/14/18, 8/30/18, 12/26/18
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2**
2. **BMP Title:** Braselton Adopt-A-Stream Program
3. **Provide the measurable goal from SWMP:** Monitor Mulberry River multiple times throughout the year and provide data to Georgia Adopt-A-Stream program.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Seven Adopt-A-Stream events were held at Site 2253-Mulberry River. Documentation is provided in Exhibit 3.
 - B. Date(s) for any BMP activities completed during this reporting period: 1/19/18, 2/22/18, 3/22/18, 5/9/18, 7/12/18, 10/30/18, 12/17/18
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it from the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Public Involvement/Participation BMPs contained in your SWMP. Permittees with a population greater than 10,000 at the time of this permit issuance must complete four (4) BMPs.

Illicit Discharge Detection and Elimination
Minimum Control Measure
(Table 4.2.3)

1. **BMP # 1 (Table 4.2.3, BMP #1)**

2. **BMP Title: Legal Authority**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will review, and if necessary, modify the existing Illicit Discharge and Illegal Connection Ordinance.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **Ordinance Status**

A. Did you adopt or revise the ordinance during the reporting period? Yes No

B. If yes, provide the date of adoption: [Click here to enter text.](#)

C. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes No

D. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: [Click here to enter text.](#)

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: Ordinance underwent annual review.

B. Date(s) for any BMP activities completed during this reporting period: August 2018

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it from the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2 (Table 4.2.3, BMP #2)**
2. **BMP Title: Outfall Map and Inventory**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** A map and inventory will be updated as necessary to reflect development within the Town.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Outfall Inventory**
 - A. Provide the number of outfalls added or deleted from the inventory during the reporting period:
Number added: 7
Number deleted: 0
 - B. Provide the total number of outfalls identified to date: 181
 - C. Is the outfall mapping completed? Yes No
 - D. If not, explain the reason why, and provide the status of the mapping: [Click here to enter text.](#)
 - E. If not, provide the projected completion date: [Click here to enter a date.](#)
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The outfall map and inventory were maintained throughout the reporting period. The map and inventory are provided in Exhibit 4.
 - B. Date(s) for any BMP activities completed during this reporting period: On-going
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3 (Table 4.2.3, BMP #3)**
2. **BMP Title: IDDE Plan**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Dry weather screening inspections will occur on 100% of outfalls within a five-year period. Investigative procedures will be implemented when the results of dry weather screening inspections indicate a potential for an illicit discharge, including sampling and/or inspection procedures as outlined in the IDDE Plan. The Town will take steps to ensure that any identified illicit discharges are eliminated. If necessary, enforcement procedures as outlined in the IDDE ordinance, ERP, and within this document will be implemented.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **IDDE Plan Status**

A. Provide the number of outfalls inspected during the reporting period: 37

B. What percentage of the total number of outfalls were inspected during the reporting period? 20.44%

C. Provide the status of the outfall screening from 2018-2022:

Year	Total Number of Outfalls	Number of Outfalls Screened	% Screened
2018	181	37	20.44%
2019			
2020			
2021			
2022			

D. Did you conduct any stream walks as part of your IDDE program?

Yes No

1. If yes, provide the total number of stream miles within your jurisdiction: [Click here to enter text.](#)

2. Provide the number of stream miles walked during the reporting period: [Click here to enter text.](#)

3. What percentage of the total number of stream miles were walked during the reporting period? [Click here to enter text.](#)

E. Did you conduct stream walks for a reason other than IDDE? Yes No

1. If yes, explain the reason: [Click here to enter text.](#)

2. Provide the number of stream miles walked during the reporting period: [Click here to enter text.](#)

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No

B. If not, please explain why: [Click here to enter text.](#)

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: Dry weather screenings were performed on outfalls during the reporting period. A sampling of screenings is provided in Exhibit 5.

B. Date(s) for any BMP activities completed during this reporting period: On-going

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4 (Table 4.2.3, BMP #4)**

2. **BMP Title: Education**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** Videos, Brochures for the public, Storm drain lids-Fish, River's Alive events for the public, Community Summer Outreach, and Staff meetings for Town employees regularly scheduled.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No

B. If not, please explain why: [Click here to enter text.](#)

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: The Town provided three brochures related to water quality and stormwater to the public in 2018. A total of 22 of these brochures were picked up during the reporting period. An event was held at the Braselton Public Library on June 6, in which participants were taught about protecting the environment and performed macroinvertebrate monitoring. An event was held at the Mulberry Trail on October 9, during which participants were taught about trees and watershed health. The Town held a Public Works meeting on October 26. During the Stormwater Training, Town Staff were taught about Inspection of Catch Basins. During 2018, three Rivers Alive events were held. During the events on April 14, August 30, and December 26, 2.5 tons, 13 bags, and 300 pounds of trash were disposed of, respectively. Documentation for all educational events is provided in Exhibit 6.

B. Date(s) for any BMP activities completed during this reporting period: The Braselton Public Library program occurred on June 6. The Mulberry Trail event occurred on October 9. The Public Works meeting was held on October 26. The Rivers Alive events occurred April 14, August 30, and December 26.

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

6. **BMP Effectiveness**

- A. Do you consider this BMP to be effective? Yes No
- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
- D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 5 (Table 4.2.3, BMP #5)**
2. **BMP Title: Complaint Response**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will implement the existing Complaint Response Procedures. Complaints will be responded to within five business days.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: No IDDE complaints were received during 2018.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: No IDDE complaints were received during the reporting period.
 - B. Date(s) for any BMP activities completed during this reporting period: N/A
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Illicit Discharge Detection and Elimination BMPs contained in your SWMP.

Construction Site Storm Water Runoff Control
Minimum Control Measure
(Table 4.2.4)

1. **BMP # 1 (Table 4.2.4, BMP #1)**

2. **BMP Title: Legal Authority**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will review, and if necessary, modify the existing Soil and Erosion Control Ordinance and Litter Control Ordinance.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **Ordinance Status**

A. Is the construction waste requirement addressed in either your E&S or litter ordinance?
Yes No

B. If yes, which one? Litter

C. Did you adopt or revise the ordinance during the reporting period?
Yes No

D. If you are a Local Issuing Authority, you must revise your E&S Ordinance to comply with the latest revisions to the E&S Act (2015). The ordinance revision was to be completed by December 31, 2016. Have you completed the ordinance revisions?
Yes No

E. If yes, provide the date of adoption: October 10, 2016

F. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes No

G. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: [Click here to enter text.](#)

5. **Implementation Schedule**

A. BMP activities completed during this reporting period: Ordinance underwent annual review.

B. Date(s) for any BMP activities completed during this reporting period: August 2018

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

6. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2 (Table 4.2.4, BMP #2)**
2. **BMP Title: Site Plan Review Procedures**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Utilize existing site plan review checklists and plan submittal logs to track plans submitted, reviewed, denied/approved to the town as well as the Oconee River SWCD (reviewing agency for E&S approval). The Town is currently a Local Issuing Authority. Plans are submitted to the Oconee River SWCD for review and approval.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. Site Plan Review Status

A. Are you a Local Issuing Authority? Yes No

1. If yes, provide the following information for the reporting period:

Number of plans received: 110
Number of plans reviewed: 110
Number of plans approved: 110
Number of plans denied: 0

5. Documentation

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No

B. If not, please explain why: [Click here to enter text.](#)

6. Implementation Schedule

A. BMP activities completed during this reporting period: Site Review Logs were maintained throughout the year in order to track plans submitted, reviewed, and denied/approved to the Town as well as the Oconee River SWCD (reviewing agency for E&S approval). Documentation for site plan review procedures is provided in Exhibit 7.

B. Date(s) for any BMP activities completed during this reporting period: January 1, 2018 – December 31, 2018

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3 (Table 4.2.4, BMP #3)**
2. **BMP Title: Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will conduct inspections following the installation of initial BMPs, during active construction, and after final site stabilization, at a minimum.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Site Review Logs were maintained throughout the year in order to track plans submitted, reviewed, and denied/approved to the Town as well as the Oconee River SWCD (reviewing agency for E&S approval). These logs, as well as a sampling of erosion inspections are provided in Exhibit 8.
 - B. Date(s) for any BMP activities completed during this reporting period: On-going
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4 (Table 4.2.4, BMP #4)**
2. **BMP Title: Enforcement Procedures**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Follow enforcement procedures outlined in the Enforcement Response Plan. Respond to complaints received within five business days.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Sites were inspected, and enforcement actions were taken as necessary to achieve compliance. Documentation for enforcement procedures taken is provided in Exhibit 9.
 - B. Date(s) for any BMP activities completed during this reporting period: 1/3/18, 1/25/18, 5/23/18, 6/4/18
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 5 (Table 4.2.4, BMP #5)**
2. **BMP Title: Complaint Response**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Implement the complaint response procedures approved by GA EPD. Respond to all complaints within five business days of receiving the complaint.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Complaint response procedures were followed, and complaints were responded to accordingly. A log of all E&S complaints received was maintained throughout the reporting period. Documentation of complaints is provided in Exhibit 10.
 - B. Date(s) for any BMP activities completed during this reporting period: On-going
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 6 (Table 4.2.4, BMP #6)**
2. **BMP Title: Certification**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Certify that all MS4 staff are certified in accordance with the rules adopted by the GSWCC and that they maintain the appropriate certifications.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: All employees maintained GSWCC certification. Copies of certification cards are provided in Exhibit 11.
 - B. Date(s) for any BMP activities completed during this reporting period: All certifications were renewed in 2017 and kept current throughout 2018.
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Construction Site Management BMPs contained in your SWMP.

Post- Construction Storm Water Management
in New Development and Redevelopment
Minimum Control Measure
(Table 4.2.5)

1. **BMP # 1 (Table 4.2.5, BMP #1)**

2. **BMP Title: Legal Authority**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will review, and if necessary, modify the existing Post-Construction Stormwater Management Ordinance. By February 15, 2019, the Town will implement the Stormwater Runoff Quality/Reduction Standards as outlined in Permit No. GAG610000. The Town will also develop a Feasibility Program, which will address reasonable criteria for determining when implementing the performance standards for Stormwater Runoff Quality/Reduction in linear transportation projects is not feasible. This program will be developed by February 15, 2019.
 - A. Did you comply with the measurable goal? Yes No

 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **Ordinance Status**
 - A. Did you adopt or revise the ordinance during the reporting period? Yes No

 - B. If yes, provide the date of adoption: [Click here to enter text.](#)

 - C. Does the ordinance require development in accordance with the Georgia Stormwater Management Manual (GSMM), a local design manual, and/or the Coastal Stormwater Supplement? Yes No

 - D. Does the ordinance adopt the performance standards in the 2016 GSMM?
Yes No

 - E. The adoption of the performance standards in the 2016 GSMM was required by January 2, 2017. If the adoption has not occurred by this deadline date, explain why and provide the projected completion date: [Click here to enter text.](#)

 - F. If the ordinance was adopted or revised during the reporting period, is a copy of the adopted ordinance attached? Yes No

 - G. If the ordinance was adopted or revised during the reporting period and a copy is not attached, explain why: [Click here to enter text.](#)

5. **Implementation Schedule**

- A. BMP activities completed during this reporting period: Ordinance underwent an annual review. A Feasibility Program was developed for linear transportation projects and is included in Appendix L of the SWMP.
- B. Date(s) for any BMP activities completed during this reporting period: Ordinance underwent review in August 2018.
- C. Did you comply with the implementation schedule in the SWMP? Yes No
- D. If not, please explain why: [Click here to enter text.](#)

6. **BMP Effectiveness**

- A. Do you consider this BMP to be effective? Yes No
- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
- D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2 (Table 4.2.5, BMP #2)**

2. **BMP Title: Inventory**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** A map and inventory will be maintained to include all publicly owned post-construction stormwater management structures and those privately-owned structures designed after the adoption of the GSMM.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **Inventory Status**

A. Provide information on the number of structures inventoried during the reporting period:

1. Number of publicly-owned post-construction structures added: 0
2. Number of privately-owned post-construction structures added: 4

B. Provide information on the number of structures identified to date:

1. Total number of publicly-owned post-construction structures: 3
2. Total number of privately-owned post-construction structures: 4

***Last year we included privately owned post-construction structures that are not maintained by the Town of Braselton. The Town does not have maintenance agreements with the owners of those ponds. For this reason, this year we are not including those private ponds we showed in 2017.**

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No

B. If not, please explain why: [Click here to enter text.](#)

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: A map and inventory of post-construction stormwater structures were maintained throughout the reporting period. The map and inventory are provided in Exhibit 12.

B. Date(s) for any BMP activities completed during this reporting period: On-going

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3 (Table 4.2.5, BMP #3)**
2. **BMP Title: Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Twenty percent (20%) of the post-construction stormwater management structures will be inspected annually.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. Provide the status of inspections performed between 2018-2022:

Publicly-Owned Post-Construction Structures

Year	Total Number Post Construction Structures	Number Post Construction Structures Inspected	% Inspected
2018	3	1	33%
2019			
2020			
2021			
2022			

Privately-Owned Post-Construction Structures

Year	Total Number Post Construction Structures	Number Post Construction Structures Inspected	% Inspected
2018	4	1	25%
2019			
2020			
2021			
2022			

5. Documentation
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
6. **Implementation Schedule**

- A. BMP activities completed during this reporting period: An inspection was performed on one (33%) of the Town's publicly-owned post-construction structures during the reporting period, as well as one of three (33%) privately-owned post-construction structure for which the Town has maintenance agreements. Documentation for this inspection is provided in Exhibit 13.
- B. Date(s) for any BMP activities completed during this reporting period: Structures were inspected throughout 2018.
- C. Did you comply with the implementation schedule in the SWMP? Yes No
- D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

- A. Do you consider this BMP to be effective? Yes No
- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
- D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4 (Table 4.2.5, BMP #4)**
2. **BMP Title: Maintenance Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Implement the long-term operation and maintenance program for post-construction stormwater management structures.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period?:
 1. Maintenance of permittee-owned structures: Yes No
 2. Maintenance conducted by permittee on privately-owned structures or publicly-owned by other entities: Yes No NA
 3. Summary list of maintenance agreements: Yes No
 - B. If not, please explain why: No maintenance was performed on post-construction stormwater structures during the reporting period.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The Maintenance Program for Post-Construction Stormwater Structures underwent review in March 2018. No maintenance was performed on post-construction stormwater structures. A list of maintenance agreements is provided in Exhibit 14.
 - B. Date(s) for any BMP activities completed during this reporting period: March 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 5 (Table 4.2.5, BMP #5)**
2. **BMP Title: GI/LID Structure Inventory**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will provide an updated inventory of existing GI/LID structures with each annual report. The Town will track the addition of new water quality-related GI/LID structures through the plan review process and update the inventory as new GI/LID structures are constructed.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: An inventory of GI/LID structures was maintained during the reporting period. The inventory is provided in Exhibit 15.
 - B. Date(s) for any BMP activities completed during this reporting period: On-going
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 6 (Table 4.2.5, BMP #6)**
2. **BMP Title: GI/LID Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: N/A**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Program Development**
 - A. Has the GI/LID Program development been completed? Yes No

Note: For existing permittees, the deadline is February 15, 2020. For new permittees, the deadline is within 3 years of designation.
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: [Click here to enter text.](#)
 - B. Date(s) for any BMP activities completed during this reporting period: [Click here to enter text.](#)
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
7. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 7 (Table 4.2.5, BMP #7)**
2. **BMP Title: GI/LID Inspection and Maintenance Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP: N/A**
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: [Click here to enter text.](#)
 - B. Date(s) for any BMP activities completed during this reporting period: [Click here to enter text.](#)
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

GI/LID Ordinance Review (Section 4.2.5.3)

(Only complete this section if the MS4 population >10,000 on December 6, 2017)

1. You are required to continue to review and revise, where necessary, building codes, ordinances, and other regulations to ensure they do not prohibit or impede the use of GI/LID practices. Was an evaluation of the MS4's ordinances, codes, and regulations conducted during the reporting period? Yes No
2. If an evaluation was completed during the reporting period, is documentation of the activity attached to this annual report? Yes No NA
3. Based on the results of the evaluation, did the MS4 determine that revisions to the ordinances, codes, and regulations were necessary? Yes No NA
4. If revisions to the document(s) were required, provide the name of the document(s) and the date(s) of adoption: Click here to enter text.
5. If revisions have not yet been completed, provide the status of the document revisions and a projected completion date: Click here to enter text.

Pollution Prevention/ Good Housekeeping
for Municipal Operations
Minimum Control Measure
(Table 4.2.6)

1. **BMP # 1 (Table 4.2.6, BMP #1)**

2. **BMP Title: MS4 Control Structure Inventory and Map**

3. **Provide the measurable goal from the Permit and/or approved SWMP:** The map and inventory of the MS4 control structures will be updated as necessary as new structures are completed.

A. Did you comply with the measurable goal? Yes No

B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)

4. **Inventory and Map Status**

A. Provide the number of structures inventoried and mapped during the reporting period:

1. Number of catch basins added: 87
2. Number of ditches added (state if miles or linear feet): 0 linear feet
3. Number of publicly-owned detention/retention ponds added: 0
4. Number of storm drain lines added (state if miles or linear feet): 4.2 miles

B. Provide the number of structures inventoried and mapped to date:

1. Total number of catch basins: 1200
2. Total number of ditches (state if miles or linear feet): 3080 linear feet
3. Total number of publicly-owned detention/retention ponds: 3
4. Total number of storm drain lines (state if miles or linear feet): 42.6 miles

5. **Documentation**

A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No

B. If not, please explain why: [Click here to enter text.](#)

6. **Implementation Schedule**

A. BMP activities completed during this reporting period: The map and inventory of MS4 control structures was maintained during 2018. The map and inventory are provided in Exhibit 16.

B. Date(s) for any BMP activities completed during this reporting period: On-going

C. Did you comply with the implementation schedule in the SWMP? Yes No

D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 2 (Table 4.2.6, BMP #2)**
2. **BMP Title: MS4 Inspection Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Twenty Percent (20%) of the MS4 control structures will be inspected annually so that 100% of the system will be inspected within the 5-year period.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal:
4. Provide the status of inspections performed between 2018-2022:

Catch Basins

Year	Total Number Catch Basins	Number Catch Basins Inspected	% Inspected
2018	1200	149	12.4%
2019			
2020			
2021			
2022			

Pipes

Year	Total Pipes Number or Length (specify ft. or miles)	Number of Pipes or Length Inspected (specify ft. or miles)	% Inspected
2018	42.6 miles	8.75 miles	20.5%
2019			
2020			
2021			
2022			

Ditches

Year	Total Ditches Number or Length (specify ft. or miles)	Number of Ditches or Length Inspected (specify ft. or miles)	% Inspected
2018	3080 ft	0	0
2019			
2020			
2021			
2022			

Publicly-Owned Detention/Retention Ponds

Year	Total Number Structures	Number Structures Inspected	% Inspected
2018	3	1	33%
2019			
2020			
2021			
2022			

5. Documentation

- A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
- B. If not, please explain why: [Click here to enter text.](#)

6. Implementation Schedule

- A. BMP activities completed during this reporting period: A total of 486 (20.17%) of MS4 structures were inspected throughout the reporting period. Documentation for a sampling of inspections is provided in Exhibit 17.
- B. Date(s) for any BMP activities completed during this reporting period: On-going
- C. Did you comply with the implementation schedule in the SWMP? Yes No
- D. If not, please explain why: [Click here to enter text.](#)

7. BMP Effectiveness

- A. Do you consider this BMP to be effective? Yes No
- B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
- C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
- D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 3 (Table 4.2.6, BMP #3)**
2. **BMP Title: MS4 Maintenance Program**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will implement the Maintenance Program through utilization of the Maintenance Checklist, as well as the prioritization of areas and system components that have pre-existing issues.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Maintenance was performed on several MS4 structures during 2018. Documentation regarding maintenance is provided in Exhibit 18.
 - B. Date(s) for any BMP activities completed during this reporting period: Maintenance was performed from May-November 2018.
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 4 (Table 4.2.6, BMP #4)**
2. **BMP Title: Street and Parking Lot Cleaning**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will follow procedures for cleaning streets and parking lots within the MS4 boundaries.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: Street and parking lot cleaning quantities were not tracked. Waste from street and parking lot cleanings is disposed of in commercial dumpsters, and as a result, the quantity of waste from only street and parking lot cannot be tracked and waste disposal tickets for only street and parking lot cleanings do not exist.
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: Waste disposal tickets for street and parking lot cleanings do not exist.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Street and parking lot cleanings were performed once a week during 2018.
 - B. Date(s) for any BMP activities completed during this reporting period: Cleanings were performed weekly.
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 5 (Table 4.2.6, BMP #5)**
2. **BMP Title: Employee Training**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Training will be conducted on an annual basis.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: One staff meeting was held, during which Town personnel were trained on the Inspection of Catch Basins. Documentation of the staff meeting is provided in Exhibit 19.
 - B. Date(s) for any BMP activities completed during this reporting period: 10/26/18
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 6 (Table 4.2.6, BMP #6)**
2. **BMP Title: Waste Disposal**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Provide an estimated amount of waste generated and the means of disposal for each type of waste.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: Waste disposed from the MS4 was not tracked. Waste from the MS4 is placed into commercial dumpsters, and as a result, the quantity of only MS4 waste disposed is unknown.
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: Waste disposal was not tracked.
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Disposal of waste from the MS4 occurred during the reporting period but was not tracked. Waste from the MS4 is placed into commercial dumpsters, and as a result, quantities of only MS4 waste is unknown.
 - B. Date(s) for any BMP activities completed during this reporting period: Waste disposal occurred throughout 2018.
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: Waste disposal is unable to be tracked.
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 7 (Table 4.2.6, BMP #7)**
2. **BMP Title: New Flood Management Projects**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Ensure all new flood management projects are assessed for water quality impacts.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Flood management checklists for new flood management projects were completed throughout the reporting period. Documentation is provided in Exhibit 20.
 - B. Date(s) for any BMP activities completed during this reporting period: On-going
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 8 (Table 4.2.6, BMP #8)**
2. **BMP Title: Existing Flood Management Projects**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** The Town will review one existing flood management project per year for potential retrofitting to address water quality impacts.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
5. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: The wet detention pond located at Whole Foods was assessed for potential retrofitting. No potential for retrofitting was found. The assessment documentation is provided in Exhibit 21.
 - B. Date(s) for any BMP activities completed during this reporting period: November 13, 2018
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)
6. **BMP Effectiveness**
 - A. Do you consider this BMP to be effective? Yes No
 - B. Do you plan to continue with implementation of this BMP or revise it in the SWMP? Continue Revise
 - C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No
 - D. If yes, please explain: [Click here to enter text.](#)

1. **BMP # 9 (Table 4.2.6, BMP #9)**
2. **BMP Title: Municipal Facilities**
3. **Provide the measurable goal from the Permit and/or approved SWMP:** Maintain the inventory of all municipal facilities owned and maintained by the Town of Braselton which have the potential to cause pollution. Update the inventory as new facilities are added. Implement an inspection program for the municipal facilities such that 100% of the facilities will be inspected within the 5-year permit period.
 - A. Did you comply with the measurable goal? Yes No
 - B. If not, explain why you did not comply with the measurable goal: [Click here to enter text.](#)
4. **Inventory and Inspection**
 - A. Inventory
 1. Was an inventory of municipal facilities with the potential to cause pollution updated during the reporting period? Yes No
 2. A copy of the inventory must be submitted with the annual report. Is the inventory attached? Yes No
 3. If the inventory is not attached, explain why: [Click here to enter text.](#)
 - B. Inspection
 1. Provide the total number of municipal facilities on the inventory: **30**
 2. Provide the number of municipal facilities inspected during the reporting period: **6**
5. **Documentation**
 - A. Did you attach documentation of the BMP activities completed during the reporting period? Yes No
 - B. If not, please explain why: [Click here to enter text.](#)
6. **Implementation Schedule**
 - A. BMP activities completed during this reporting period: Six municipal facilities were inspected during the reporting period. Inspection forms are provided in Exhibit 22.
 - B. Date(s) for any BMP activities completed during this reporting period: Facilities were inspected throughout the reporting period.
 - C. Did you comply with the implementation schedule in the SWMP? Yes No
 - D. If not, please explain why: [Click here to enter text.](#)

7. **BMP Effectiveness**

A. Do you consider this BMP to be effective? Yes No

B. Do you plan to continue with implementation of this BMP or revise it in the SWMP?
Continue Revise

C. Do you plan to revise the BMP description, implementation schedule, or measurable goal for this BMP? Yes No

D. If yes, please explain: [Click here to enter text.](#)

Note: You must complete a BMP annual report page for any additional Pollution Prevention/Good Housekeeping BMPs contained in your SWMP.

Enforcement Response Plan
Section 4.3

1. You were required to develop an Enforcement Response Plan (ERP) and submit the document to EPD. Have you completed ERP development? Yes No
2. If yes, provide the date of submittal to EPD: 2/15/2015
3. If no, explain the reason for the delay and provide the status of the ERP development: [Click here to enter text.](#)

Impaired Waters
Section 4.4

1. You are required to develop either an Impaired Waters Plan (population <10,000) or a Monitoring and Implementation Plan (population >10,000). Check which one you are required to develop:

 Impaired Waters Plan
 Monitoring and Implementation Plan

2. For existing permittees, you were required to submit the relevant Plan to EPD by February 15, 2015. For new permittees (designated on March 7, 2014), you were required to submit the relevant Plan by February 15, 2018. Have you completed development of the Plan?
Yes No

3. If yes, provide the date of submittal to EPD: 2/15/2018

4. If no, provide the status of the Plan development: [Click here to enter text.](#)

5. You are required to check the latest 305(b)/303(d) list to determine if newly listed waters are within your jurisdiction. Have you reviewed this list? Yes No

6. If newly listed waters have been identified, you must revise your Plan. If a Plan revision is required, provide the status and the projected date for submittal to EPD: [Click here to enter text.](#)

Sharing Responsibility
Section 4.5

1. Are you sharing responsibility for implementation of any part of the SWMP with another entity? Yes No
2. If yes, provide the name of the entity: [Click here to enter text.](#)
3. Are you performing tasks for another entity? Yes No
4. Is another entity is performing tasks on your behalf? Yes No
5. If you answered “Yes” to either question #3 or #4, describe what tasks are being performed by which entity: [Click here to enter text.](#)
6. You must provide a copy of a signed intergovernmental agreement. Was an agreement included with the SWMP? Yes No