

# 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**.

Form 3400-224(R8/2021)

## Reporting Information :

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

**Project Name:** 2022 Annual Report

**County:** Dane

**Municipality:** Dane County

**Permit Number:** S058416

**Facility Number:** 30903

**Reporting Year:** 2022

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
    - 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
      - Municipal Storm Water Management Facility (BMP) Inspection and Maintenance Plan
  - 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:** Dane County

**Facility ID # or (FIN):** 30903

**Updated Information:**  Check to update mailing address information

**Mailing Address:** 210 MLK Jr Blvd, Room 421

**Mailing Address 2:**

**City:** Dane County

**State:** WI

**Zip Code:** 53703      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:** Jeremy

**Last Name:** Balousek

Select to **update** current contact information

**Title:** WRE Division Manager

**Mailing Address:** 5201 Fen Oak Dr, Room 208

**Mailing Address 2:**

**City:** Madison

**State:** WI

**Zip Code:** 53718      xxxxx or xxxxx-xxxx

**Phone Number:** 608-225-6535      Ext:      xxx-xxx-xxxx

**Email:** balousek@countyofdane.com

**Additional Contacts Information (Optional)**

I&E Program

IDDE Program

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

- IDDE Response Procedure Manual
- 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:**

**Municipal Billing Contact Person (Authorized Representative for MS4 Permit)**

Select to **create new** Billing contact

**First Name:**

**Last Name:**

Select to **update** current contact information

**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

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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. Does MS4 conduct any educational efforts or events independently (not with a group)  Yes  
 No
- b. How many total educational events were held during the reporting year:
- c. The permit requires that both passive and interactive mechanisms are utilized. How many interactive mechanisms were used during the reporting year?

Topics Covered	Target Audience
<input checked="" type="checkbox"/> Illicit discharge detection and elimination <input 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 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 checked="" type="checkbox"/> Public Employees <input type="checkbox"/> Residents <input checked="" type="checkbox"/> Businesses <input checked="" type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Public Officials <input type="checkbox"/> Other

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- Green infrastructure/low impact development
- Other:

Other

Topics Covered	Target Audience
<ul style="list-style-type: none"> <li><input type="checkbox"/> Illicit discharge detection and elimination</li> <li><input type="checkbox"/> Household hazardous waste disposal/pet waste management/vehicle washing</li> <li><input type="checkbox"/> Yard waste management/pesticide and fertilizer application</li> <li><input checked="" type="checkbox"/> Stream and shoreline management</li> <li><input type="checkbox"/> Residential infiltration</li> <li><input type="checkbox"/> Construction sites and post-construction storm water management</li> <li><input type="checkbox"/> Pollution prevention</li> <li><input type="checkbox"/> Green infrastructure/low impact development</li> <li><input type="checkbox"/> Other: <input style="width: 250px;" type="text"/></li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> General Public</li> <li><input type="checkbox"/> Public Employees</li> <li><input checked="" type="checkbox"/> Residents</li> <li><input type="checkbox"/> Businesses</li> <li><input type="checkbox"/> Contractors</li> <li><input type="checkbox"/> Developers</li> <li><input type="checkbox"/> Industries</li> <li><input type="checkbox"/> Public Officials</li> <li><input type="checkbox"/> Other</li> </ul>

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<input type="checkbox"/> Stream and shoreline management	<input checked="" type="checkbox"/> Businesses
<input type="checkbox"/> Residential infiltration	<input checked="" type="checkbox"/> Contractors
<input type="checkbox"/> Construction sites and post-construction storm water management	<input type="checkbox"/> Developers
<input checked="" type="checkbox"/> Pollution prevention	<input type="checkbox"/> Industries
<input type="checkbox"/> Green infrastructure/low impact development	<input checked="" type="checkbox"/> Public Officials
<input type="checkbox"/> Other: <input type="text"/>	<input type="checkbox"/> Other

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d. Will additional information/summary of education events be attached to the annual report?  Yes  
 No

If no, please provide additional comment in the brief explanation box below. *Limit response to 250 characters and/or attach supplemental information on the attachments page.*

The MAMSWaP I&E Committee guides all outreach and education efforts. See <https://ripple-effects.com/Updates-and-Reports> for 2022 I&E Work Plan and I&E Quarterly Updates.

**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.

<b>Event Start Date</b>	<input type="text" value="4/1/2022"/>		
<b>Project/Event Name</b>	<input type="text" value="2021 MS4 Annual Report"/>		
<b>Delivery Mechanism</b>	<input type="text" value="Website"/>		
Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input checked="" type="checkbox"/> MS4 Annual Report <input type="checkbox"/> Storm Water Management Program	<input checked="" type="checkbox"/> General Public <input checked="" type="checkbox"/> <input type="checkbox"/> Public Employees <input type="checkbox"/> Residents	<input type="text" value="101 +"/>	<input checked="" type="radio"/> Yes <input type="radio"/> No



<input type="checkbox"/> Storm Water related ordinance <input type="checkbox"/> Other: <input type="text"/>	<input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input checked="" type="checkbox"/> Public Officials <input type="checkbox"/> Other		
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<b>Event Start Date</b>	4/14/2022
<b>Project/Event Name</b>	UW Biological Systems Engineering Guest Lecture
<b>Delivery Mechanism</b>	Presentation of Storm Water Information

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input type="checkbox"/> MS4 Annual Report <input checked="" type="checkbox"/> Storm Water Management Program <input type="checkbox"/> Storm Water related ordinance <input type="checkbox"/> Other: <input type="text"/>	<input 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"/> Public Officials <input checked="" type="checkbox"/> Other	51-100	<input type="radio"/> Yes <input checked="" type="radio"/> No

<b>Event Start Date</b>	6/23/2022
<b>Project/Event Name</b>	Dane County Environment, Agriculture and Natural Resources Committee ...
<b>Delivery Mechanism</b>	Government Event (Public Hearing, Council Meeting, etc)

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input type="checkbox"/> MS4 Annual Report <input checked="" type="checkbox"/> Storm Water Management Program <input type="checkbox"/> Storm Water related ordinance <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 checked="" type="checkbox"/> Public Officials <input type="checkbox"/> Other	11-50	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>Event Start Date</b>	10/20/2022
<b>Project/Event Name</b>	Lakes and Watershed Committed Meeting
<b>Delivery Mechanism</b>	Government Event (Public Hearing, Council Meeting, etc)

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
<input type="checkbox"/> MS4 Annual Report <input checked="" type="checkbox"/> Storm Water Management Program <input type="checkbox"/> Storm Water related ordinance <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	1 - 10	<input checked="" type="radio"/> Yes <input type="radio"/> No

	<input type="checkbox"/> Industries <input checked="" type="checkbox"/> Public Officials <input type="checkbox"/> Other		
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**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.

<b>Event Start Date</b>	1/1/2022 <input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Adopt A Storm Drain Program
<b>Delivery Mechanism</b>	Clean up event

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
Volunteer Opportunity	<input type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Public Officials <input type="checkbox"/> Other	101+	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>Event Start Date</b>	10/1/2022 <input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Leaf-free Streets for Clean Waters Rain Alert Subscribers
<b>Delivery Mechanism</b>	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 checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Public Officials <input type="checkbox"/> Other	101+	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>Event Start Date</b>	11/13/2022 <input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Native Plant Growing Workshop for Volunteer Growing Program
<b>Delivery Mechanism</b>	Public Workshop

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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"/> Public Officials <input type="checkbox"/> Other	<u>1 - 10</u>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>Event Start Date</b>	11/8/2022 <input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Making native plant milk jug greenhouses with the Outdoor Playgroup -Mo...
<b>Delivery Mechanism</b>	<u>Public Workshop</u>

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 checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Public Officials <input type="checkbox"/> Other	<u>11-50</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

<b>Event Start Date</b>	5/31/2022 <input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Randall Elementary Storm Drain Mural Painting
<b>Delivery Mechanism</b>	<u>Other hands-on event</u>

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
Volunteer Opportunity	<input 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"/> Public Officials	<u>11-50</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

	<input checked="" type="checkbox"/> Other		
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<b>Event Start Date</b>	7/13/2022	<input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Spring Harbor Middle School Storm Drain Mural Painting	
<b>Delivery Mechanism</b>	<u>Other hands-on event</u>	

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
Volunteer Opportunity	<input 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"/> Public Officials <input checked="" type="checkbox"/> Other	<u>1 - 10</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

<b>Event Start Date</b>	5/17/2022	<input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Jefferson Middle School Storm Drain Mural Painting	
<b>Delivery Mechanism</b>	<u>Other hands-on event</u>	

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
Volunteer Opportunity	<input 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"/> Public Officials <input checked="" type="checkbox"/> Other	<u>11-50</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

<b>Event Start Date</b>	6/1/2022	<input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Cottage Grove Elementary Storm Drain Mural Painting	
<b>Delivery Mechanism</b>	<u>Other hands-on event</u>	

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
Volunteer Opportunity	<input type="checkbox"/> General Public <input type="checkbox"/> Public Employees <input type="checkbox"/> Residents <input type="checkbox"/> Businesses	<u>11-50</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

	<input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Public Officials <input checked="" type="checkbox"/> Other		
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<b>Event Start Date</b>	6/26/2022 <input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Warner Park Storm Drain Mural Painting
<b>Delivery Mechanism</b>	<u>Other hands-on event</u>

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 checked="" type="checkbox"/> Residents <input type="checkbox"/> Businesses <input type="checkbox"/> Contractors <input type="checkbox"/> Developers <input type="checkbox"/> Industries <input type="checkbox"/> Public Officials <input type="checkbox"/> Other	<u>1 - 10</u>	<input type="radio"/> Yes <input checked="" type="radio"/> No

<b>Event Start Date</b>	9/21/2022 <input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Mariposa Preschool Storm Drain Mural Painting- Fitchburg
<b>Delivery Mechanism</b>	<u>Other hands-on event</u>

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)
Volunteer Opportunity	<input 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"/> Public Officials <input checked="" type="checkbox"/> Other	<u>11-50</u>	<input type="radio"/> Yes <input type="radio"/> No

<b>Event Start Date</b>	9/17/2022 <input type="checkbox"/> NA (Individual Permittee).
<b>Project/Event Name</b>	Habitat for Humanity Rain Garden Installation
<b>Delivery Mechanism</b>	<u>Plant community rain garden</u>

Topics Covered	Target Audience	Estimated People Reached (Optional)	Regional Effort (Optional)

Volunteer Opportunity	<input type="checkbox"/> General Public	1 - 10	<input type="radio"/> Yes <input checked="" type="radio"/> No
	<input type="checkbox"/> Public Employees		
	<input checked="" type="checkbox"/> Residents		
	<input type="checkbox"/> Businesses		
	<input type="checkbox"/> Contractors		
	<input type="checkbox"/> Developers		
	<input type="checkbox"/> Industries		
	<input type="checkbox"/> Public Officials		
	<input checked="" type="checkbox"/> Other		

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

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**Minimum Control Measures - Section 3 : Complete**

**3. Illicit Discharge Detection and Elimination**

a. How many total outfalls does the municipality have?	<input type="text" value="6"/>	<input type="checkbox"/> Unsure
b. How many outfalls did the municipality evaluate as part of their routine ongoing field screening program?	<input type="text" value="0"/>	<input type="checkbox"/> Unsure
c. From the municipality's routine screening, how many were confirmed illicit discharges?	<input type="text" value="0"/>	<input type="checkbox"/> Unsure
d. How many illicit discharge complaints did the municipality receive?	<input type="text" value="15"/>	<input type="checkbox"/> Unsure
e. From the complaints received, how many were confirmed illicit discharges?	<input type="text" value="11"/>	<input type="checkbox"/> Unsure
f. How many of the identified illicit discharges did the municipality eliminate in the reporting year (from both routine screening and complaints)? <small>(If the sum of 3.c. and 3.e. does not equal 3.f., please explain below.)</small>	<input type="text" value="6"/>	<input type="checkbox"/> Unsure
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.	<input type="checkbox"/> Unsure	
<input checked="" type="checkbox"/> Verbal Warning	<input type="text" value="4"/>	
<input checked="" type="checkbox"/> Written Warning (including email)	<input type="text" value="7"/>	
<input checked="" type="checkbox"/> Notice of Violation	<input type="text" value="0"/>	
<input checked="" type="checkbox"/> Civil Penalty/ Citation	<input type="text" value="0"/>	

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.

Outreach letters sent to area carpet cleaning companies, concrete contractors, paving companies and lawn care businesses to make them aware of county regs regarding illicit discharges. Illicit Discharge Training to municipal field staff - 6/14/22.

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### 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 (at sites with one acre or more of land disturbing construction activity)?   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.*

Acitivity within MAMSWaP boundaries: Towns of Blooming Grove, Burke, Madison, Middleton and Westport.

Form 3400-224 (R8/2021)

### Minimum Control Measures - Section 5 : Complete

#### 5. Post-Construction Storm Water Management

- a. How many sites with new structural storm water   Unsure

management Best Management Practice (BMP) have received local approval ?

\*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,

b. Does the MS4 have procedures for inspecting and maintaining private storm water facilities?  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 landowners should be included in the reported number.

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

e. If yes, does MS4 have maintenance authority on these privately owned BMPs?   Unsure

f. How many municipally owned storm water management BMPs were inspected in the reporting year?   Unsure

g. 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

Stop Work Order. Includes actions taken during construction of structural BMP.

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.*

Don't have numbers for inspections done by private land owners included c. Activity within MAMSWaP boundaries: Towns of Blooming Grove, Burke, Madison, Middleton and Westport



Storm Water Management Best Management Practice Inspections  Not Applicable

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

sediment accumulation, woody vegetation, debris, ponded water, invasive species, erosion, vegetation, rip rap, structure integrity

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

Only included Dane County stormwater facilities within the permitted area that fall within unincorporated townships.

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.*

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? (*One mile of a two-way road equals two lane miles.*)   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</u>	<input type="text" value="0"/>	<input type="text" value="231"/>	<input type="text" value="1681"/>	<input type="text" value="2641"/>	<input type="text" value="1956"/>	<input type="text" value="593"/>

Liquids (gallons) (ex. brine)

	Oct	Nov	Dec	Jan	Feb	Mar
<u>Brine</u>	<input type="text" value="0"/>	<input type="text" value="410"/>	<input type="text" value="12289"/>	<input type="text" value="7755"/>	<input type="text" value="11633"/>	<input type="text" value="4290"/>

- 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
<input type="text" value="10/1/2022"/>	<input type="text" value="Fall Rodeo Training"/>	<input type="text" value="95"/>
<input type="text" value="10/2/2022"/>	<input type="text" value="Brine Training"/>	<input type="text" value="95"/>

- 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*

Numbers are for Oct.-Dec.2021 and Jan.-Mar. 2022 to reflect the winter season for all county roads (no state roads). Newly hired employees had video training from Wilf Nixon Univ. of Iowa salt reduction and Jim Hughes WISDOT Brine and Salt reduction.

### Internal (Staff) Education & Communication

- af. Has the municipality provided an opportunity for internal training or education to staff implementing the municipality's procedures for each of the pollution prevention program element ?  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, procedures and pollution prevention program requirements.

Elected Officials

Weekly meetings with executive staff. Regular meetings with Environmental, Agriculture and Natural Resources Committee, and Lakes and Watershed Commission and Land Conservation Committee.

Municipal Officials

Regular updates to the Madison Area Municipal Stormwater Partnership (MAMSWaP) at quarterly meetings and through newsletters.

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

Weekly staff 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.*

Form 3400-224 (R8/2021)

## 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.*

**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.

<b>Annual Expenditure</b> Reporting Year	<b>Budget</b> Reporting Year	<b>Budget</b> Upcoming Year	<b>Source of Funds</b>
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**Element:** Public Education and Outreach

74219	74219	81116	<u>General revenue fund</u>
129344	83143	113073	<u>Other</u>

**Element:** Public Involvement and Participation

55933	55933	61589	<u>General revenue fund</u>
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**Element:** Illicit Discharge Detection and Elimination

12000	22006	12600	<u>General revenue fund</u>
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**Element:** Construction Site Pollutant Control

295341	295341	333639	<u>General revenue fund</u>
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**Element:** Post-Construction Storm Water Management

338193	338193	371599	<u>General revenue fund</u>
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**Element:** Pollution Prevention

131712	117598	138298	<u>General revenue fund</u>
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**Other** (describe)

Stormwater Quality Management

3398897	4261244	6750000	<u>General revenue fund</u>
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**Other** (describe)

Storm Sewer System Map

14317	14317	17241	<u>General revenue fund</u>
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Please provide a justification for a "0" entered in the Fiscal Analysis. *Limit response to 250 characters.*

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)

### Status of Total Maximum Daily Loads (TMDLs) Implementation

The permittee Dane County is subject to the following approved TMDLs: Rock River Basin and/or Beaver Dam Lake

The permittee intends to comply with the following permit requirements to show progress towards meeting the TMDL:

#### [A.3.2] The Permittee is participating in an approved Adaptive Management Project.

Attach a summary of adaptive management implementation actions for the reporting year, including:

- Most recent estimated pollutant of concern percent reduction levels (i.e. total phosphorus and total suspended solids/ sediment), as compared to no controls by reachshed, within the permittee's MS4 permitted area.
- Pollutant of concern percent reduction levels, as compared to no controls by reachshed, which the permittee intends to ultimately achieve within its own MS4 permitted area (not associated with AM buy-in).
- The financial dollar value contributed to an AM program for the reporting year.
- Identify any additional storm water measures that were initially implemented in the reporting year, which reduce the discharge of pollutants of concern from its MS4 permitted area (not associated with AM buy-in). If available, identify the incremental percent reduction gained by such measures relative to the MS4 permitted area.

### 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.*

**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.

### Adaptive Management Summary

 File Attachment

[AdaptiveMgmtSummary.pdf](#)

### Attach - Other Supporting Documents

#### AR MuniSWPPP

 File Attachment

[DaneCountyHighwayMEEastCampusSWPPPFinal2022-03-09.pdf](#)

#### AR EO

 File Attachment

[AnnualReport2022MAMSWaPIESummary-DaneCo.docx](#)

#### AR MuniSWPPP

 File Attachment

[AlliantEnergySWPPPFinal2022-03-09.pdf](#)

#### AR MuniSWPPP

 File Attachment

[HwyGarageSWPPPFinal2022-03-09.pdf](#)

#### AR MuniFacInsp

 File Attachment

[BMPInspectionForms1.pdf](#)

#### AR MuniFacInsp

 File Attachment

[2023AECMunicipalSiteInspectionForm.pdf](#)

#### AR BMPInspSum

 File Attachment

[BMPInspectionForm2.pdf](#)

#### AR BMPInspSum

 File Attachment

[BMPInspectionForm3.pdf](#)

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**AR BMPInspSum**

 File Attachment

[BMPInspectionForm4.pdf](#)

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**AR BMPInspSum**

 File Attachment

[BMPInspectionForm5.pdf](#)

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**AR BMPInspSum**

 File Attachment

[BMPInspectionForm6.pdf](#)

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**AR BMPInspSum**

 File Attachment

[BMPInspectionForm7.pdf](#)

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**AR BMPInspSum**

 File Attachment

[BMPInspectionForm8.pdf](#)

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**AR BMPInspSum**

 File Attachment

[BMPInspectionForm9.pdf](#)

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**AR BMPInspSum**

 File Attachment

[BMPInspectionForm10.pdf](#)

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**AR BMPInspSum**

 File Attachment

[2023DaneCo.pdf](#)

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**AR MuniFacInsp**

 File Attachment

[ParksStormwaterFacilityInspectionFormsandPhotos2022.pdf](#)

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**AR IDDE**

 File Attachment

[7HillsStripingInc.pdf](#)

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**AR IDDE**

 File Attachment

[ACleanCarpetandUpholstery.pdf](#)

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**AR IDDE**

 File Attachment

[AEConcreteConstruction.pdf](#)

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**AR IDDE**

 File Attachment

[ALawnCareLLC.pdf](#)

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**AR IDDE**

 File Attachment

[2022-07-12ETowerRoadMcFarland\\_IncidentReportandResolution.pdf](#)

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**AR IDDE**

 File Attachment

[2022-07-22209EMainStMountHoreb\\_IncidentReportandResolution.pdf](#)

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**AR IDDE**

 File Attachment

[2022-08-15AllenBlvdMiddleton\\_IncidentReportandResolution.pdf](#)

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**AR IDDE**

 File Attachment

[WindsorIDReport.pdf](#)

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**AR IDDE**

 File Attachment

[VeronaAveIDReport.pdf](#)

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**AR IDDE**

 File Attachment

[PineLawnPrkwyIDReport.pdf](#)

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**AR IDDE**

 File Attachment

[CenturyAveIDReport.pdf](#)

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**AR IDDE**

 File Attachment

[AllenBlvdIDReport.pdf](#)

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**AR IDDE**

 File Attachment

[2ndstmthorebIDReport.pdf](#)

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**AR IDDE**

 File Attachment

[BloomingGrovelIDReport.pdf](#)

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**AR IDDE**

 File Attachment

[ClubCircleMiddletonIDReport.pdf](#)

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[MedianIDReport.pdf](#)

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 File Attachment

[MountHoreb2IDReport.pdf](#)

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AR IDDE

 File Attachment

[MountHorebIDreport.pdf](#)

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AR MuniFacInsp

 File Attachment

[MunicipalStormwaterInspFishHatchery.pdf](#)

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AR MuniFacInsp

 File Attachment

[MunicipalStormwaterInsp.pdf](#)

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(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**

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EO Program

 File Attachment

[2023DaneCountyWPDESIEWorkplan.pdf](#)

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EO Program

 File Attachment

[2023MAMSWaPIEWorkPlanFINAL.pdf](#)

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(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 Dane 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:** Jeremy Balousek

**Title:** Water Resource Engineering Division Manager

Authorized Signature.

- I accept the above terms and conditions.

Signed by : i:0#.f|wamsmembership|danecountywre on 2023-03-24T09:51:37

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.