



**Tennessee Department of Environment and Conservation**  
**Division of Water Resources**  
**William R. Snodgrass Tennessee Tower, 312 Rosa L. Parks Avenue, 11th Floor, Nashville, Tennessee 37243**  
**1-888-891-8332 (TDEC)**

**Municipal Separate Storm Sewer System (MS4) Annual Report**

**1. MS4 INFORMATION**

Town of Nolensville TNS077801

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Name of MS4 MS4 Permit Number

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Don Swartz, P.E. dswartz@nolensvilletn.gov

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Name of Contact Person Email Address

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615-776-3323

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Telephone (including area code)

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7218 Nolensville Road

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Mailing Address

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Nolensville TN 37135

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City State ZIP code

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What is the current population of your MS4? 8,000

What is the reporting period for this annual report? From July 1, 2015 to June 30, 2016

**2. WATER QUALITY PRIORITIES (SECTION 3.1)**

A. Does your MS4 discharge into waters listed as impaired on TN's most current 303(d) list and/or according to the on-line GIS mapping tool?  Yes  No

B. If yes, please attach a list all impaired waters within your jurisdictional area.

C. Does your MS4's jurisdictional area contain any waterbodies where a TMDL has been approved for parameters other than pathogens, siltation and habitat alterations? If yes, please attach a list.  Yes  No

D. Does your MS4 discharge to any Exceptional TN Waters (ETWs) or Outstanding National Resource Waters (ONRWs)? If yes, please attach a list.  Yes  No

E. Are you implementing additional specific provisions to ensure the continued integrity of ETWs or ONRWS located within your jurisdiction?  Yes  No

**3. PROTECTION OF STATE OR FEDERALLY LISTED SPECIES (SECTION 3.2.1 General Permit for Phase II MS4s)**

A. Are there any state or federally listed species within the MS4's jurisdiction?  Yes  No

B. Are any of the MS4 discharges or discharge-related activities likely to jeopardize any state or federally listed species?  Yes  No

C. Please attach any authorizations or determinations by U.S. Fish & Wildlife Service on the effect of the MS4 discharges on state or federally listed species.

**4. PUBLIC EDUCATION AND PUBLIC PARTICIPATION (SECTION 4.2.1 AND 4.2.2)**

A. Have you developed a Public Information and Education plan (PIE)?  Yes  No

B. Is your public education program targeting specific pollutants and sources of those pollutants, such as Hot Spots?  Yes  No

C. If yes, what are the specific causes, sources and/or pollutants addressed by your public education program?N/A

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- D. Note specific successful outcome(s) (NOT tasks, events, publications) fully or partially attributable to your public education program during this reporting period. N/A
- E. Do you have an advisory committee or other body comprised of the public and other stakeholders that provides regular input on your stormwater program?  Yes  No
- F. How do you facilitate, advertise, and publicize public involvement and participation opportunities? N/A
- G. Do you have a webpage dedicated to your stormwater program?  Yes  No  
If so, what is the link/URL:  
<http://www.nolensvilletn.gov/data/sites/1/media/documents/engineering/Stormwater%20Requirements.pdf>
- H. Are you tracking and maintaining records of public education, outreach, involvement and participation activities? Please attach a summary of these activities.  Yes  No

### 5. ILLICIT DISCHARGE DETECTION AND ELIMINATION (SECTION 4.2.3)

- A. Have you completed a map of all outfalls and receiving waters of your storm sewer system?  Yes  No
- B. Have you completed a map of all storm drain pipes of storm sewer system?  Yes  No
- C. How many outfalls have you identified in your system? Approximately 38 (see supplemental information for 5.A.)
- D. Have any of these outfalls been screened for dry weather discharges?  Yes  No
- F. What is your frequency for screening outfalls for illicit discharges? Semi - Annually
- G. Do you have an ordinance that effectively prohibits illicit discharges?  Yes  No
- H. During this reporting period, how many illicit discharges/illegal connections have you discovered (or been reported to you)? 0
- I. Of those illicit discharges/illegal connections that have been discovered or reported, how many have been eliminated? 0

### 6. CONSTRUCTION SITE STORMWATER RUNOFF (SECTION 4.2.4)

- A. Do you have an ordinance or adopted policies stipulating:
- Erosion and sediment control requirements?  Yes  No
- Other construction waste control requirements?  Yes  No
- Requirement to submit construction plans for review?  Yes  No
- MS4 enforcement authority?  Yes  No
- B. How many active construction sites disturbing at least one acre were there in your jurisdiction this reporting period? ???
- C. How many of these active sites did you inspect this reporting period? ???
- D. On average, how many times each, or with what frequency, were these sites inspected (e.g., weekly, monthly, etc.)? ????
- E. Do you prioritize certain construction sites for more frequent inspections?  Yes  No  
If Yes, based on what criteria? Proximity to Waters of the State

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### 7. PERMANENT STORMWATER CONTROLS (SECTION 4.2.5)

- A. Do you have an ordinance or other mechanism to require:
- |   |   |  |
|---|---|--|
| Site plan reviews of all new and re-development projects?     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Maintenance of stormwater management controls?                | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Retrofitting of existing BMPs with green infrastructure BMPs? | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
- B. What is the threshold for new/redevelopment stormwater plan review? (e.g., all projects, projects disturbing greater than one acre, etc.) 5,000 Square Feet
- C. Have you implemented and enforced performance standards for permanent stormwater controls?  Yes  No
- D. Do these performance standards go beyond the requirements found in Section 4.2.5.2 and require that pre-development hydrology be met for:
- |                      |   |  |
|----------------------|---|--|
| Flow volumes         | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Peak discharge rates | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Discharge frequency  | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Flow duration        | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
- E. Please provide the URL/reference where all permanent stormwater management standards can be found.  
<http://www.nolensvilletn.gov/data/sites/1/media/documents/engineering/Stormwater%20Requirements.pdf>
- F. How many development and redevelopment project plans were reviewed for this reporting period? ????
- G. How many development and redevelopment project plans were approved? ????
- H. How many permanent stormwater management practices/facilities were inspected? ????
- I. How many were found to have inadequate maintenance? ????
- J. Of those, how many were notified and remedied within 30 days? (If window is different than 30 days, please specify) ????
- K. How many enforcement actions were taken that address inadequate maintenance? ?????
- L. Do you use an electronic tool (e.g., GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintenance?  Yes  No
- M. Do all municipal departments and/or staff (as relevant) have access to this tracking system?  Yes  No
- N. Has the MS4 developed a program to allow for incentive standards for redeveloped sites?  Yes  No
- O. How many maintenance agreements has the MS4 approved during the reporting period? ????

### 8. CODES AND ORDINANCES REVIEW AND UPDATE (SECTION 4.2.5.3)

- A. Is a completed copy of the EPA Water Quality Scorecard submitted with this report?  Yes  No
- B. Include status of implementation of code, ordinance and/or policy revisions associated with permanent stormwater management. Current Storm Water Ordinance/Regulations are being updated to include permanent storm water management revisions.

### 9. STORMWATER MANAGEMENT FOR MUNICIPAL OPERATIONS (SECTION 4.2.6)

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- A. Have stormwater pollution prevention plans (or an equivalent plan) been developed for:
- |   |                              |  |
|---|------------------------------|--|
| All parks, ball fields and other recreational facilities            | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| All municipal turf grass/landscape management activities            | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| All municipal vehicle fueling, operation and maintenance activities | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| All municipal maintenance yards                                     | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| All municipal waste handling and disposal areas                     | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
- B. Are stormwater inspections conducted at these facilities?  Yes  No
1. If Yes, at what frequency are inspections conducted? \_\_\_\_\_
- C. Have standard operating procedures or BMPs been developed for all MS4 field activities? (e.g., road repairs, catch basin cleaning, landscape management, etc.)  Yes  No
- D. Do you have a prioritization system for storm sewer system and permanent BMP inspections?  Yes  No
- E. On average, how frequently are catch basins and other inline treatment systems inspected? Quarterly
- F. On average, how frequently are catch basins and other inline treatment systems cleaned out/maintained?  
Quarterly
- G. Do municipal employees in all relevant positions and departments receive comprehensive training on stormwater management?  Yes  No
- H. If yes, do you also provide regular updates and refreshers?  Yes  No
- If so, how frequently and/or under what circumstances? \_\_\_\_\_

### 10. STORMWATER MANAGEMENT PROGRAM UPDATE (SECTION 4.4)

- A. Describe any changes to the MS4 program during the reporting period including but not limited to:
- Changes adding (but not subtracting or replacing) components, controls or other requirements (Section 4.4.2.a). None
- Changes to replace an ineffective or unfeasible BMP (Section 4.4.2.b). None
- Information (e.g. additional acreage, outfalls, BMPs) on program area expansion based on annexation or newly urbanized areas. ?????
- Changes to the program as required by the division (Section 4.4.3). None

### 11. EVALUATING/MEASURING PROGRESS

- A. What indicators do you use to evaluate the overall effectiveness of your Stormwater Management Program, how long have you been tracking them, and at what frequency? Note that these are not measurable goals for individual BMPs or tasks, but large-scale or long-term metrics for the overall program, such as in-stream macroinvertebrate community indices, measures of effective impervious cover in the watershed, indicators of in-stream hydrologic stability, etc.

Indicator	Began Tracking (year)	Frequency	Number of Locations
<i>Example: E. coli</i>	<i>2003</i>	<i>Weekly April–September</i>	<i>20</i>
<hr/>			
N/A			
<hr/>			
N/A			
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B. Provide a summary of data (e.g., water quality information, performance data, modeling) collected in order to evaluate the performance of permanent stormwater controls installed throughout the system. This evaluation may include a comparison of current and past permanent stormwater control practices. None

### 12. ENFORCEMENT (SECTION 4.5)

A. Identify which of the following types of enforcement actions you used during the reporting period, indicate the number of actions, the minimum measure (e.g., construction, illicit discharge, permanent stormwater control) or note those for which you do not have authority:

Action	Construction	Permanent Stormwater Controls	Illicit Discharge	Authority?	
Notice of violation	#_____	#_____	#_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Administrative fines	#_____	#_____	#_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Stop Work Orders	#_____	#_____	#_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Civil penalties	#_____	#_____	#_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Criminal actions	#_____	#_____	#_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Administrative orders	#_____	#_____	#_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other _____	#_____	#_____	#_____		

B. Do you use an electronic tool (e.g., GIS, data base, spreadsheet) to track the locations, inspection results, and enforcement actions in your jurisdiction?  Yes  No

C. What are the 3 most common types of violations documented during this reporting period? By far - sediment release/EPSC not being maintained/

### 13. PROGRAM RESOURCES (OPTIONAL)

A. What was your annual expenditure to implement the requirements of your MS4 NPDES permit and SWMP this past reporting period? \_\_\_\_\_

B. What is next year's budget for implementing the requirements of your MS4 NPDES permit and SWMP?  
\_\_\_\_\_

C. Do you have an independent financing mechanism for your stormwater program?  Yes  No

D. If so, what is it/are they (e.g., stormwater fees), and what is the annual revenue derived from this mechanism?

Source: \_\_\_\_\_ Amount \$

Source: \_\_\_\_\_ Amount \$

E. How many full time employees does your municipality devote to the stormwater program (specifically for implementing the stormwater program vs. municipal employees with other primary responsibilities that dovetail with stormwater issues)? 1

F. Do you share program implementation responsibilities with any other entities?  Yes  No

<b>Entity</b>	<b>Activity/Task/Responsibility</b>	<b>Your Oversight/Accountability Mechanism</b>
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G. Please attach a copy of your Organizational Chart

### 14. CERTIFICATION

**This report must be signed by a ranking elected official or by a duly authorized representative of that person. See signatory requirements in sub-part 6.7.2 of the permit.**

*“I certify under penalty of law that this document and all attachments were prepared by me, or under my direction or supervision. The submitted information 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. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.”*

Printed Name and Title	Signature	Date

**Annual reports must be submitted in accordance with the requirements of Section 5.4. (Reporting) of the permit. Annual reports must be submitted to the appropriate Environmental Field Office (EFO) by September 30 of each calendar year, as shown in the table below:**

EFO	Street Address	City	Zip Code	Telephone
Chattanooga	540 McCallie Avenue STE 550	Chattanooga	37402	(423) 634-5745
Columbia	1421 Hampshire Pike	Columbia	38401	(931) 380-3371
Cookeville	1221 South Willow Ave.	Cookeville	38506	(931) 432-4015
Jackson	1625 Hollywood Drive	Jackson	38305	(731) 512-1300
Johnson City	2305 Silverdale Road	Johnson City	37601	(423) 854-5400
Knoxville	3711 Middlebrook Pike	Knoxville	37921	(865) 594-6035
Memphis	8383 Wolf Lake Drive	Bartlett	38133	(901) 371-3000
Nashville	711 R S Gass Boulevard	Nashville	37216	(615) 687-7000