# 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: Milwaukee

Municipality: Franklin, City

Permit Number: S050059

Facility Number: 31265

**Reporting Year:** 2022

Is this submittal also satisfying an Urban Nonpoint Source Grant funded deliverable? O Yes O 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	Franklin, City				
Facility ID # or (FIN):	31265				
Updated Information:	☐ Check to update mailing address information				
Mailing Address:	9229 W. Loomis Road				
Mailing Address 2:					
City:	Franklin, City				
State:	WI				
Zip Code:	53132 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 <i>create new</i> primary contact						
First Name:	Glen					
Last Name:	Morrow					
✓ Select to <i>update</i> current contact information						
Title:	City Engineer					
Mailing Address:	9229 W Loomis Rd					
Mailing Address 2:						
City:	Franklin					
State:	<u>WI</u>					
Zip Code:	53132	xxxxx or xxxxx	(-XXXX			
Phone Number:	414-425-7510	Ext:	xxx-xxx-xxxx			
Email:	gmorrow@franklir	nwi.gov				

# **Additional Contacts Information (Optional)**

✓ I&E Program

✓ IDDE Program

Individual with responsibility for: (Check all that apply)	<ul> <li>✓ IDDE Response Procedure Manual</li> <li>✓ Municipal-wide Water Quality Plan</li> <li>✓ Ordinances</li> <li>✓ Pollution Prevention Program</li> <li>✓ Post-Construction Program</li> <li>✓ Winter roadway maintenance</li> </ul>
First Name:	Tyler
Last Name:	Beinlich
Title:	Asst. City Engineer
Mailing Address:	9229 W Loomis Rd
Mailing Address 2:	
City:	Franklin
State:	<u>WI</u>
Zip Code:	53132 xxxxx or xxxxx-xxxx
Phone Number:	414-425-7510 Ext: xxx-xxx-xxxx
Email:	tbeinlich@franklinwi.gov
✓ Select to <i>create new</i> Billing contact  First Name:  Last Name:  ✓ Select to <i>update</i> current contact inform Title:  Mailing Address:  Mailing Address 2:  City:	Glen Morrow
State:	<u>WI</u>
Zip Code:	53132 xxxxx or xxxxx-xxxx
Phone Number:	414-425-7510 Ext: xxx-xxxx
Email:	gmorrow@franklinwi.gov
<ol> <li>Does the municipality rely on another e</li> <li>Yes O No</li> </ol>	entity to satisfy some of the permit requirements?
Public Education and Outreach Root-Pike Wi	IN .
✓ Public Involvement and Participation Root-Pike	e WIN
☐ Illicit Discharge Detection and Elimination	
✓ Construction Site Pollutant Control We have the	nree consultants that inspection permitted construction sites (GRAEF, raSmith, Ruekert & Mielk

Post-Construction Storm Water Management We have two consultants that review post-construction storm water management design (Ha	rw
Pollution Prevention	
<ul> <li>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)?</li> <li>○ Yes  No</li> </ul>	

# Minimum Control Measures- Section 1: Complete

# 1. Public Education and Outreach

<ul> <li>a. Does MS4 conduct any educational efforts or events ind</li> <li>No</li> </ul>	lependently (not with a group) OYes
b. How many total educational events were held during th	e reporting year: 88
c. The permit requires that both passive and interactive m	
interactive mechanisms were used during the reporting	vear? 34
Topics Covered	Target Audience
✓ Illicit discharge detection and elimination	✓ General Public
✓ Household hazardous waste disposal/pet waste management/vehicle	✓ Public Employees
washing	✓ Residents
✓ Yard waste management/pesticide and fertilizer application	Businesses
Stream and shoreline management	☐ Contractors
Residential infiltration	☐ Developers
Construction sites and post-construction storm water management	☐ Industries
Pollution prevention	✓ Public Officials
Green infrastructure/low impact development	Other
Other:	
Topics Covered	Target Audience
✓ Illicit discharge detection and elimination	✓ General Public
✓ Household hazardous waste disposal/pet waste management/vehicle	✓ Public Employees
washing	<b>✓</b> Residents
✓ Yard waste management/pesticide and fertilizer application	<b>✓</b> Businesses
Stream and shoreline management	✓ Contractors
Residential infiltration	<b>✓</b> Developers
Construction sites and post-construction storm water management	✓ Industries
Pollution prevention	✓ Public Officials
Green infrastructure/low impact development	☐ Other
Other:	
Topics Covered	Target Audience
☐ Illicit discharge detection and elimination	✓ General Public
✓ Household hazardous waste disposal/pet waste management/vehicle	☐ Public Employees
washing	<b>✓</b> Residents
✓ Yard waste management/pesticide and fertilizer application	<b>✓</b> Businesses
Stream and shoreline management	☐ Contractors
Residential infiltration	☐ Developers
Construction sites and post-construction storm water management	☐ Industries
Pollution prevention	☐ Public Officials

☐ Green infrastructure/low impact development ☐ Other:				Other		
						_
d. Will additional inform ○ No	ation/sun	nmary of educatio	n events	be attached to	the annual report?	• Y
If no, please provide add	itional co	mment in the brie	ef explana	tion box belov	м. Limit response to	250
characters and/or attach	supplem	ental information	on the at	tachments pa	ge.	
See Root-Pike WIN year	end repo	rt				
					Form 3400-224	(R8/20
Minimum Control Meas	sures - Se	ction 2 : Complet	e			
2. Public Involvement a	nd Partic	ipation				
<b>a</b> . <u>Permit Activities</u> . Com	plete the	following informa	tion on P	ublic Involvem	nent and Participation	on
Activities related to stori	=	_				
activities were conveyed					•	
<b>Event Start Date</b>	1/1/202	2				
Project/Event Name	City We	bsite (Unified Develo	opment Or	dinance and Sto	orm Water Managem	]
Delivery Mechanism	Website	•	- р			
Tania Caranad			Estin	nated People	Regional Effort	
Topics Covered		Target Audience	Reac	hed (Optional)	(Optional)	
✓ MS4 Annual Report		✓ General Public	101+		○ Yes ● No	
Storm Water Managem	ent	Public Employees				
Program  ✓ Storm Water related or	dinance	✓ Residents  ✓ Businesses ✓ Contractors				
Other:	amanec					
		✓ Developers				
		✓ Industries				
		✓ Public Officials				
		☐ Other				
<b>b</b> . <u>Volunteer Activities</u> . C	-	_				
Activities related to store						iteer
activities were conveyed	to your p	opulation. Use th	e Add Eve	ent to add add	itional entries.	
Event Start Date	5/7/202	2	NA (Individ	dual Permittee).		
Project/Event Name	Annual	City-Wide Cleanup		addir crimetee).		
Delivery Mechanism	Clean up	•				
Topics Covered	Target Au		Estimated Reached	d People (Optional)	Regional Effort (Optional)	
Volunteer Opportunity	✓ Gener	ral Public	<u>101 +</u>		○Yes	

ı	1	1		I	1
	✓ Public Employe	es			
	<b>✓</b> Residents				
	<b>☑</b> Businesses				
	☐ Contractors				
	☐ Developers				
	✓ Industries				
	<b>✓</b> Public Officials				
	☐ Other				
	Brief explanation on Public Involvement 250 characters and/or attach suppleme				
				5 240	0 224 (00/2
N	linimum Control Measures - Section 3:	Complete		Form 340	0-224 (R8/2
	. Illicit Discharge Detection and Elimina				
	How many total outfalls does the munic		158	☐ Unsure	
b.	How many outfalls did the municipality of their routine ongoing field screening	77	☐ Unsure		
C.	From the municipality's routine screeni were confirmed illicit discharges?		0	Unsure	
d.	How many illicit discharge complaints d municipality receive?	lid the	4	Unsure	_
e.	From the complaints received, how ma confirmed illicit discharges?	ny were	0	Unsure	
f.	How many of the identified illicit discharge municipality eliminate in the reporting routine screening and complaints)?	_	0	□Unsure	_
g.	How many of the following enforcement use to enforce its illicit discharge ordinate enter the number of each used in the result.	ance? Check all th	•	y 🗌 Unsure	
	✓ Verbal Warning	2			
	✓ Written Warning (including email)	2			
	✓ Notice of Violation	0			
	✓ Civil Penalty/ Citation	0			
	Additional Information:		1		
h.	Brief explanation on Illicit Discharge De	tection and Elimir	nation reporting.	If you	

250 characters and/or attach supplemental information on the attachments page.

Form 3400-224 (R8/2021)

Minimum Control Measures - Section 4	1: Complete		
4. Construction Site Pollutant Control			
How many total construction sites wi of land disturbing construction activit point in the reporting year?		21	□ Unsure
How many construction sites with on land disturbing construction activity of issue permits for in the reporting yea	did the municipality	21	☐ Unsure
How many erosion control inspection complete in the reporting year (at site more of land disturbing construction	es with one acre or	ту	✓ Unsure
<ul> <li>What types of enforcement actions d to compel compliance with the regular apply and enter the number of each to No Authority</li> </ul>	atory mechanism? Cl	neck all that	le 🗌 Unsure
✓ Verbal Warning	10		
Written Warning (including email)	15		
✓ Notice of Violation	0		
✓ Civil Penalty/ Citation	0		
✓ Stop Work Order	0		
✓ Forfeiture of Deposit	0		
Other - Describe below			
Prief explanation on Construction Site Unsure for any questions above, justificand/or attach supplemental informat City permitted construction sites are inspected (consultants). See attached.	fy the reasoning. Lim ion on the attachme	it response t nts page.	o 250 characters
Minimum Control Measures - Section 5 5. Post-Construction Storm Water Man			Form 3400-224 (R8/2
How many sites with new structural s management Best Management Prac received local approval?  *Engineered and constructed systems that are des	storm water tice (BMP) have		□ Unsure

	basins, grassed swales, permeable pavement,			
b.	boes the Mis I have procedures for mispeed	•	● Yes ○ No	☐ Unsure
	maintaining private storm water facilities?			_
C.	in res, now many privately owned storm w		✓ Unsure	
	management facilities were inspected in t Inspections completed by private landowners should be i number.			
d.	Does the municipality utilize privately owr		○ Yes • No	☐ Unsure
	_management BMP in its pollutant reduction If yes, does MS4 have maintenance author	•		✓ Unsure
	_privately owned BMPs?	iity on these		U disare
f.	How many municipally owned storm wate BMPs were inspected in the reporting yea	•	14	☐ Unsure
g.	What types of enforcement actions does to compel compliance with the regulatory apply and enter the number of each used  No Authority	the municipality have mechanism? Check	k all that	□ Unsure
	✓ Verbal Warning	0		
	Written Warning (including email)	0		
	✓ Notice of Violation	0		
	✓ Civil Penalty/ Citation	0		
	▼ Forfeiture of Deposit	0		
	✓ Complete Maintenance	0		
	☑ Bill Responsible Party	0		
	Other - Describe below			
e.	Brief explanation on Post-Construction Stomarked 'Unsure' on any questions above, j 250 characters and/or attach supplements	iustify your reasonin al information on th	ng. Limit your e attachments	response to s page.
S	ee attached. Some private BMPs were constructe	ed prior to maintenanc	ce agreement re	quirements.
				Form 3400-224 (R8/2021)
	Minimum Control Measures - Section 6: Co	omplete		
6	. Pollution Prevention			
	torm Water Management Best Managemen	•	ons 🗌 Not Ap	oplicable
a.	Enter the total number of municipally owr structural storm water management best	•	ces.	☐ Unsure
b.	How many new municipally owned storm	water management	best 0	☐ Unsure

	management practices were installed in the reporting year?			
c.	How many municipally owned storm water management best	14	□Unsure	
	management practices were inspected in the reporting year?			
d.	What elements are looked at during inspections (250 character limit)?			
	Pipes, structures, banks, berms, debris removal, sediment depth,	erosion	, invasive	
	weeds.			
e.	How many of these facilities required maintenance?	1	Unsure	
f.	Brief explanation on Storm Water Management Best Management Practice inspection reporting. If you marked Unsure for any question above, justify the reasoning. Limit response to 250 characters and attach supplemental information on the attachments page.	ions		
	DPW staff inspects twice yearly. Deficiencies are addressed as ne	-		
	ublic Works Yards & Other Municipally Owned Properties (SWPPP	Plan Re	-	Applic
	How many municipal properties require a SWPPP?	1	Unsure	
h.	How many inspections of municipal properties have been conducted in the reporting year?	2	Unsure	
i.	Have amendments to the SWPPPs been made?  ○ Yes   No   Unsure			
j.	If yes, describe what changes have been made. Limit response to and/or attach supplemental information on the attachment page		ıracters	]
k.	Brief explanation on Storm Water Pollution Prevention Plan report Unsure for any questions above, justify the reasoning. Limit respondental characters and/or attach supplemental information on the attach	onse to 2	250	1
	The DPW yard is monitored by Staff daily.			
_				
	ollection Services - <i>Street Sweeping / Cleaning Program</i> Not Ap			
I.	<ul> <li>Did the municipality conduct street sweeping/cleaning during the</li> <li>Yes ○ No ○ Unsure</li> </ul>	e report	ing year?	
m.	If known, how many tons of material was removed?		✓ Unsure	
n.	Does the municipality have a low hazard exemption for this material?	○ Ye	es O No	
0.	If street cleaning is identified as a storm water best management pollutant loading analysis, was street cleaning completed at the a	-		
	Yes - Explain frequency see attached			
	○ No - Explain			
	○ Not Applicable			

Cc	llection Services - Catch	Basin Sum	np Cleaning	Program	✓ Not Ap	plicable		
Сс	ollection Services - <i>Leaf C</i>	ollection F	Program $\square$	Not Appl	icable			
u. Does the municipality conduct curbside leaf collection? • Yes O No O Unsure								
V.	. , Does the municinality no	pality notify homeowners about pickup?   • Yes • No • Unsure						
w. Where are the residents directed to store the leaves for collection?								
☐ Pile on terrace ☐ Pile in street ☑ Bags on terrace ☐ Unsure								
	Other - Describe							
	What is the frequency of 4 times/yr (1 spring, 3 fa		1?	_				
у.	Is collection followed by	street swe	eeping/clea	aning?	•	Yes O No	O Unsure	
	Brief explanation on Coll marked Unsure for any q reasoning. Limit respons supplemental informatio	uestions a se to 250 c	ibove, justi haracters (	fy the and/or att				
	The City of Franklin offe City's refuse collection o			-	which is co	nducted b	y the	
W	inter Road Management	☐ Not Ap	plicable					
aa.	Note: We are requesting information that goes beyond the reporting year, answer the best you can.  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.)  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	
Sal	<u>t</u>	0	269	473	863	775	294	
Otl	ner_	0	0	0	0	0	0	
	Liquids (gallons) (ex. bri	ne)						
		Oct	Nov	Dec	Jan	Feb	Mar	
<u>Bri</u>		0	0	17660	24450	5600	21500	
Ch	<u>em-melt</u>	0	0	5630	1805	1255	1110	
ac. ad.	year?							
	training in the reporting  Training Date	•	raining Name			# Attendance		
				ns & Smart		# ALLEHUUNCE		
ae.	10/25/2022 Calibrating Winter Operations & Smart							

Inte	ernal (Staff) Education & Communication	
af.	training or education to staff implementing the municipality's procedures for each of the pollution prevention program element?  If yes, describe what training was provided (250 character limit):  DPW Superintendent and Asst. Super. train DPW staff on SWPPP and other pollution	
	when: Year round	
	How many attended: 19	
ag.		
	Elected officials are updated at internal and public meetings as well as in emails and phone calls as necessary.	
	Municipal Officials	
	Municipal officials are updated at internal and public meetings as well as in emails and phone calls as necessary.	
	Appropriate Staff ( such as operators, Department heads, and those that interact with public)	
	Staff is constantly communicating regarding these items.	
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
Mir	nimum Control Measures - Section 7: Complete	+ (110/2021
	Storm Sewer System Map	
(	Did the municipality update their storm sewer map this year?  ● Yes ○ No ○ Unsure  f yes, check the areas the map items that got updated or changed:  □ Storm water treatment facilities	
	<ul> <li>✓ Storm pipes</li> <li>✓ Vegetated swales</li> <li>✓ Outfalls</li> <li>✓ Other - Describe below</li> </ul>	

Other is Chem-melt/salt mix

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.

As soon as any of the system is changed the as-builts are delivered to our GIS Department and all files are updated.

# **Final Evaluation - Complete**

### **Fiscal Analysis**

Complete the fiscal analysis table provided below. For municipalities that do not break out funding into permit program elements, please enter the monetary amount to your best estimate of what funding may be going towards these programs.

Annual Expenditure Reporting Year	<b>Budget</b> Reporting Year	<b>Budget</b> Upcoming Year	Source of Funds
Element: Public	Education and Out	reach	
2875	2875	2875	General revenue fund
Element: Public	Involvement and P	articipation	
2875	2875	2875	General revenue fund
Element: Illicit D	ischarge Detection	and Eliminati	ion
3400	6000	6000	General revenue fund
Element: Constru	uction Site Polluta	nt Control	
25150	19000	18000	General revenue fund
Element: Post-C	onstruction Storm	Water Manag	gement
28190	28200	34100	General revenue fund
Element: Polluti	on Prevention		
75541	77052	78000	General revenue fund
Other (describe)			
			Select

a: Were there any known water quality improvements in the receiving waters to which					
municipality's storm sewer	system directly discharges to?				
○Yes   No ○Unsure	If Yes, explain below:				
<b>b</b> : Were there any known w	vater quality degradation in the receiving waters to which th	ıe			
municipality's storm sewer	system directly discharges to?				
○Yes ● No ○ Unsure	If Yes explain helow:				

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
<ul> <li>d: Has the municipality evaluated their storm water practices to reduce the pollutants of concern?</li> <li>● Yes ○ No ○ Unsure</li> </ul>
Storm Water Quality Management
<b>a</b> . 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
<b>b</b> . If yes, enter percent reduction in the annual average mass discharging from the entire MS4 to surface waters of the state as compared to implementing no storm water management controls:  Total suspended solids (TSS)
Total phosphorus (TP)
Additional Information
Based on the municipality's storm water program evaluation, describe any proposed changes to the municipality's storm water program. <i>If your response exceeds the 250 character limit, attach supplemental information on the attachments page.</i>
We post our annual MS4 Report on our Storm Water Management webpage and update it periodically with education and resources.

# **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) - <u>Help reduce file size and trouble shoot file uploads</u>
\*Required Item

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

Storm Sewer System	Map	
■ File Attachment	SWMap FR 2022.pdf	
Attach Other Suppo	rting Documents	
Attach - Other Suppor	ting Documents	
AR_IDDE		
File Attachment	AR IDDE FR 2022.pdf	
AR Other		
■ File Attachment	AR Other FR 2022.pdf	
AR MuniSWPPP		
■ File Attachment	PP_FacSWPPP_DPW_FR_2022.pdf	
(To remove items, use your cur  Attach - Permit Comp  PP_BMPInventory	sor to hover over the attachment section. When the drop down arrow appears, select remove item)  liance Documents	
File Attachment	PP_BMPInventory_FR_2022.pdf	
PP_BMPInsp		
■ File Attachment	PP BMPInspection FR 2022.pdf	
EO_Program		
	EO_Program_FR_2022.pdf	
IP Program		
File Attachment	PI_Program_FR_2022.pdf	

■ File Attachment	IDDE Program FR 2022.pdf
CS Program  ### File Attachment	CS Program FR 2022.pdf
PCSSW_Program  ### File Attachment	PC_SSW_Program_FR_2022.pdf

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

### **Sign and Submit Your Application**

### Steps to Complete the signature process

- 1. Read and Accept the Terms and Conditions
- 2. Press the Submit and Send to the DNR button

**NOTE**: For security purposes all email correspondence will be sent to the address you used when registering your WAMS ID. This may be a different email than that provided in the application. For information on your WAMS account click <u>HERE</u>.

#### **Terms and Conditions**

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

Name:	Tyler Beinlich	
	Title:	Assistant City Engineer
Authorized Signature.  ✓ I accept the above terms and conditions.		Signed by: i:0#.f wamsmembership tylerbeinlich on 2023-03-28T11:55:10  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.