Year 2 Annual Report

New Hampshire Small MS4 General Permit Reporting Period: July 1, 2019-June 30, 2020

Please DO NOT attach any documents to this form. Instead, attach all requested documents to an email when submitting the form

Unless otherwise noted, all fields are required to be filled out. If a field is left blank, it will be assumed the requirement or task has not been completed. Please ONLY report on activities between July 1, 2019 and June 30, 2020 unless otherwise requested.

Part I: Contact Information

Name of Municipality or Organization	ı: Town of Atkir	nson, NH	19. 10. 10.
EPA NPDES Permit Number: NHR04	1002		
Primary MS4 Program Manager Co	ontact Informat	ion	
Name: David Cressman		Title: Town Admin	istrator
Street Address Line 1: 19 Academy A	venue		
Street Address Line 2: na			
City: Atkinson	State: NH	Zip Code: 03811	
Email: cressmandg@atkinson-nh.gov		Phone Number: (60	03) 362-1060
Stormwater Management Program	(SWMP) Infori	nation	
SWMP Location (web address): http:/	/www.town-atk	insonnh.com/MS4.html	
Date SWMP was Last Updated:			
If the SWMP is not available on the w	eb please provid	le the physical address:	

Part II: Self-Assessment

Ht+

First, in the box below, select the impairment(s) and/or TMDL(s) that are applicable to your MS4. Make sure you are referring to the most recent EPA approved Section 303(d) Impaired Waters List which can be found here: https://www.epa.gov/tmdl/region-1-impaired-waters-and-303d-lists-state

Phosphorus White the state of
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Clear Impairments and TMDLs
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e procedure to the SWMP
rawings and ensure the long term I these procedures to the SWMP
for deicing or other purposes
and open space, buildings and the SWMP
ories of parks and open space, wentory to the SWMP
reduce the discharge of pollutants
lowing permittee owned or stations, and other waste handling
equirements listed above, provide could not be completed due to the inpleted, any actions taken to be completed below: "No" sanitary sewers in the Town ags and ensure long term operation

Provided an opportunity for public participation in review and implementation of SWMP and complied with State Public Notice requirements
⊠ Kept records relating to the permit available for 5 years and made available to the public
The SSO inventory has been updated, including the status of mitigation and corrective measures implemented
This is not applicable because we do not have sanitary sewer
O This is not applicable because we did not find any new SSOs
O The updated SSO inventory is attached to the email submission
O The updated SSO inventory can be found at the following website:
Properly stored and disposed of catch basin cleanings and street sweepings so they did not discharge to receiving waters
Provided training to employees involved in IDDE program within the reporting period
☑ All curbed roadways were swept at least once within the reporting period
☑ Updated outfall and interconnection inventory and priority ranking as needed
mpacts of COVID-19, please identify the requirement that could not be completed, any actions taken to attempt to complete the requirement, and reason the requirement could not be completed below:
Phosphorus Impairment Annual Requirements
"Public Education and Outreach* Distributed an annual message in the anning (April/Max) analyzed in the properties and display 1 of
Distributed an annual message in the spring (April/May) encouraging the proper use and disposal of grass clippings and encouraging the proper use of slow-release and phosphorus-free fertilizers
Distributed an annual message in the summer (June/July) encouraging the proper management of pet waste, including noting any existing ordinances where appropriate
Distributed an annual message in the fall (August/September/October) encouraging the proper disposal of leaf litter
* Public education messages can be combined with other public education requirements as applicable (see Appendix H and F for more information)
Good Housekeeping and Pollution Prevention for Permittee Owned Operations
Increased street sweeping frequency of all municipal owned streets and parking lots subject to Permit part 2.3.7.a.iii.(c) to a minimum of two times per year (spring and fall)

Potential structural BMPs

		Section 1				
Town of Atkinson, NI	H	•			,	Page 4
was tracke Appendix the estimat	ural BMPs already d and the phosphore. The BMP type, to ed phosphorus remarks BMP informated The BMP informated.	us removal by otal area treate oved in mass partion is attached	the BMP was end by the BMP, per year by the last to the email su	stimated consist the design stora BMP were documum storal storal consistency	stent with A age volume	Attachment 3 to
•	None of the existing that we had to do to	ng BMPs discl his.	narge into an im	paired water bo	ody; thus, w	ye did not believe
any additional details. The annual messa staff vacancies in the year. -Twice a year stre	would like to descritails, please use the age encouraging propacting our current set sweeping is not plus the Highway D	be progress m box below: per disposal of t operations and part of our per Dept. does not	of leaf litter was ad did not get th and the second	not distributed e educational m t as there is app	as the Townaterials pri proximately	d above or provide vn was addressing inted until later in y one quarter mile y as part of the
self-assessment:	box below to prov	de la companya de la		***************************************		

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Part III: Receiving Waters/Impaired Waters/TMDL

O Yes			
No			
s, describe below, including a	ny relevant impairn	nents or TMDLs:	
		•	

Part IV: Minimum Control Measures

Please fill out all of the metrics below. If applicable, include in the description who completed the task if completed by a third party.

MCM1: Public Education

Number of educational messages completed during this reporting period: 6
Below, report on the educational messages completed during this reporting period. For the measurable goal(s) please describe the method/measures used to assess the overall effectiveness of the educational program.
BMP:Public Education
Message Description and Distribution Method:
The Town Administrator included 4 messages-April 29, May 20, May 27 & June 3-regarding the proper use of fertilizer in his Newsletter. The Town Clerk distributed from March to June almost 900 brochures to dog owners regarding "animal waste" management as part of the annual licensing of dogs. The Highway Dept. distributed a handout at the transfer station concerning Green Grass & Clear Water during the Spring & Summer.
Targeted Audience: Residents & Businesses
Responsible Department/Parties: Town Administrator, Town Clerk & Road Agent
Measurable Goal(s):
Newsletters go to 2000 plus contacts in a Town of less than 7000 population and some Newsletters may go to multiple residents and/or businesses. Each newsletter averages over 50% of the recipients clicking on the email. For distribution to dog owners, this represented approximately 70 % of dog owners in town. At the Transfer station, approximately 40 fliers were distributed.
Message Date(s): See info above
Message Completed for: Appendix F Requirements ☐ Appendix H Requirements ☒ Was this message different than what was proposed in your NOI? Yes ⊙ No ○
If yes, describe why the change was made:
Messages were focused on residents and businesses and not on developers and industrial facilities as residents and businesses are greater contributors to storm-water issues in Atkinson than industrial facilities which are minimal in number and land use size or developers which are minimal in number and locations

Add an Educational Message

MCM2: Public Participation

The Selectmen had several meetings in the Summe Elimination Administrative program prior to it being for public participation as the meetings were open for public review. The Town maintains a web page report and other information relevant to stormwater	ng adopted on Sept. 1 to the public. The SW devoted to the MS-4	6, 2019. This provided a MP and annual reports	in opprotunity are available
Was this opportunity different than what was proportunity	osed in your NOI?	Yes O No 💿	
Describe any other public involvement or participal period:	tion opportunities con	ducted during this rep	orting
MCM3: Illicit Discharge I	Detection and Elin	nination (IDDE)	
Sanitary Sewer Overflows (SSOs)	.e. %	A.	
Check off the box below if the statement is true. ☑ This SSO section is NOT applicable	e because we DO NO	Γ have sanitary sewer	
Below, report on the number of SSOs identified in t	he MS4 system and re	moved during this repo	rting period.
Number of SSOs identified: 0			
Number of SSOs removed: 0			

MS4 System Mapping

Below, check all that apply.

The following elements of the Phase I map have been completed:

- ☐ Outfalls and receiving waters
- \boxtimes Open channel conveyances
- **☒** Interconnections
- ← Municipally-owned stormwater treatment structures
- Waterbodies identified by name and indication of all use impairments
- ☐ Initial catchment delineations

Describe any additional progress you made on your map during this reporting period or provide additional status information regarding your map:

Initial catchment delineation has not been done

Screening of Outfalls/Interconnections	
If conducted, please submit any outfall monitoring results from this reporting period. Outfall monitoring	
results should include the date, outfall/interconnection identifier, location, weather conditions at time of	
sampling, precipitation in previous 48 hours, field screening parameter results, and results from all analyse	S.
O The outfall screening data is attached to the email submission O The outfall screening data can be found at the following website:	٠.
- 一	1 3
Scheduled for Year 3 at the earliest	
Below, report on the number of outfalls/interconnections screened during this reporting period.	. 1
AMORPHICA TO CONTROL OF THE CONTROL	
Number of outfalls screened: 0	
Below, report on the percent of total outfalls/interconnections screened to date.	
Percent of total outfalls screened: 0	
Lance-representation of the second se	
Catchment Investigations	
If conducted, please submit all data collected during this reporting period as part of the dry and wet weather	r
investigations. Also include the presence or absence of System Vulnerability Factors for each catchment. O The catchment investigation data is attached to the email submission	
O The catchment investigation data can be found at the following website:	

No sanitary sewers so this is not applicable	
Below, report on the number of catchment investigations completed during this reporting period.	٠.
Number of catchment investigations completed this reporting period: 0	a.*
Below, report on the percent of catchments investigated to date.	
Percent of total catchments investigated: 0	
Optional: Provide any additional information for clarity regarding the catchment investigations below:	
A SECULIAR OF THE SECULIAR SECU	<i>7</i> 1
IDDE Progress	
If illicit discharges were found, please submit a document describing work conducted over this reporting period, and cumulative to date, including location,source; description of the discharge; method of discovery	,,
date of discovery; and date of elimination, mitigation, or enforcement OR planned corrective measures and	
schedule of removal.	
The illicit discharge removal report is attached to the email submission	
O The illicit discharge removal report can be found at the following website:	·
No reports of IDDE received in Year 2 of the permit	

Below, report on the removed during this		scharges identifi	ed and remo	oved, along w	ith the volume	of sewage
Num	ber of illicit dischar	ges identified: 0				
Num	ber of illicit dischar	ges removed: 0				
Estir	nated volume of sev	vage removed: 0		gallons/day		
Below, report on the the number of illicit						
Tota	l number of illicit di	scharges identifi	ed: 0		•	
Tota	l number of illicit di	scharges remove	d: 0			
Optional: Provide a planned to be remove		nation for clarity	regarding il	llicit discharg	es identified, re	emoved, or
Employee Training					2	
Describe the frequen		olovee training co	nducted du	ring the repo	orting period:	
Highway and code of	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~					***************************************
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			, , ,			
Below, report on the						eted during
Num	ber of site plan revie	ews completed: 8				
Num	ber of inspections co	ompleted: 27				
Num	ber of enforcement	actions taken: 0				
Optional: Enter any enforcement actions		ion relevant to co	onstruction :	site plan revie	ews, inspection	s, and
Regulations adopted	last year.					
			:			

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MCM5: Post-Construction Stormwa	ter Management in New Development and evelopment
Ordinance or Regulatory Mechanism	the transfer and the first the subsequence of the
Below, select the option that describes your ordinan	ce or regulatory mechanism progress.
O Bylaw, ordinance, or regulations are	updated and adopted consistent with permit requirements
O Bylaw, ordinance, or regulations are yet adopted	updated consistent with permit requirements but are not
O Bylaw, ordinance, or regulations hav	
ng German gervald endri og stiggtheligt i gelt gæ <mark>As-built Drawings</mark>	त्रपुर्व नेता है जो का का क्षेत्र के स्थानिक के किया है। यह उन्हें के स्थानिक के किया है। यह अपने क्षेत्र के आ अपने के किस्सारिक के किस्सारिक के किस्सारिक के किस्सारिक के किस्सारिक के किस्सारिक के अपने के अपने के अपने के
Describe the measures the MS4 has utilized to requiterm operation and maintenance of completed const	ire the submission of as-built drawings and ensure long ruction sites:
Included as a requirement in "draft" SWM regulatio	
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Street Design and Parking Lots Report	्राप्त के प्रतिकार के प्रत जिल्लामा
Describe the status of the street design and parking any planned or completed changes to local regulation	lots assessment due in year 4 of the permit term, including ons and guidelines:
No action.	
Green Infrastructure Report	and the first of the control of the The control of the control of
Describe the status of the green infrastructure report and progress towards making the practice allowable	t due in year 4 of the permit term, including the findings
No action	
	and the state of t

Retrofit Properties Inventory

Describe the status of the inventory, due in year 4 of the permit term, of permittee-owned properties that could be modified or retrofitted with BMPs to mitigate impervious areas and report on any properties that have been modified or retrofitted:

- 1	No action	•			

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	MCM	6: Good F	Housekeeping	
	Cleaning t on the number of catch basins to the catch basins during this re			tal volume of material
	Number of catch basins inspec	eted: 275		
	Number of catch basins cleaned	ed: 275		
	Total volume or mass of mate	rial removed	from all catch basins: 1	cubic yards
Below, repor	t on the total number of catch ba	sins in the A	AS4 system.	
	Total number of catch basins:	0		•
If applicable				. •
Report on th	e actions taken if a catch basin sucleaning events:	amp is more	than 50% full during two co	onsecutive routine
em mineral and and transition in the finance of the first state of the				
Street Swee				· .
Report on str	eet sweeping completed during t 	this reportin	g period using one of the th	ree metrics below,
(Number of miles cleaned: 7			
(• Volume of material removed:	20	cubic yards	
(Weight of material removed:		[Select Units]	
O CAED.		, 0 1		
Below, check	dures and Inventory of Permit all that apply. g permittee-owned properties have			
	☐ Parks and open spaces		•	
	Buildings and facilities		4,	
צ	∨ Ehicles and equipment			
The followin	g O&M procedures for permittee	-owned proj	perties have been completed	l:
	Parks and open spaces			
	✓ Parks and open spaces			

Town of Atkinson, NH			$\frac{1}{4}\frac{\Lambda}{R}$.	Page 12
⊠ Buildings	and facilities			
- · · · · · · · · · · · · · · · · · · ·	and equipment			
<u>_</u>	1 <u>f</u>			
Stormwater Pollution P	revention Plan (SWPPP)			
Below, report on the num	ber of site inspections for fac	cilities that requir	e a SWPPP completed d	luring this
reporting period.	Pak Europe in a version of source		4 °	
Number o	f site inspections completed:	2		•
		<u> </u>		1000 (100 <u>110 1</u> 10 110 110 110 110 110 110 110 110
Describe any corrective a	actions taken at a facility with	n a SWPPP:		e salah s
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	Additiona	Information	the transfer of the second	er Berggis
Monitoring or Study Re		anioi mation		
	cable s from additional reports or s s from additional reports or s	studies are attache		on
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Additional Information			•	
- ,	tional information relevant to od. Include any BMP modific			e 🚊 in and in
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COVID-19 Impacts

optional: If any of the above year 2 requirements could not be completed due to the impacts of COVID-19, please identify the requirement that could not be completed, any actions taken to attempt to complete the requirement, and reason the requirement could not be completed below:				

Activities Planned for Next Reporting Period

Please confirm that your SWMP has been, or will be, updated to comply with all applicable permit requirements including but not limited to the year 3 requirements summarized below. (Note: impaired waters and TMDL requirements are not listed below)

Yes, I agree ⊠

- Inspect all outfalls/ interconnections (excluding Problem and Excluded outfalls) for the presence of dry weather flow
- Complete follow-up ranking as dry weather screening becomes available

Annual Requirements

- Annual report submitted and available to the public
- Annual opportunity for public participation in review and implementation of SWMP
- Keep records relating to the permit available for 5 years and make available to the public
- Properly store and dispose of catch basin cleanings and street sweepings so they do not discharge to receiving waters
- Annual training to employees involved in IDDE program
- Update inventory of all known locations where SSOs have discharged to the MS4 in the last 5 years
- Continue public education and outreach program
- Update outfall and interconnection inventory and priority ranking and include data collected in connection with the dry weather screening and other relevant inspections conducted
- Implement IDDE program
- Review site plans of construction sites as part of the construction stormwater runoff control program
- Conduct site inspection of construction sites as necessary
- Inspect and maintain stormwater treatment structures
- Log catch basins cleaned or inspected
- Sweep all uncurbed streets at least annually
- Continue investigations of catchments associated with Problem Outfalls

- Review inventory of all permittee owned facilities in the categories of parks and open space, buildin and facilities, and vehicles and equipment; update if necessary					
Provide any additional details	on activities planned fo	or permit year 3 below:			
	•				

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Part V: Certification of Small MS4 Annual Report 2020

40 CFR 144.32(d) Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Name:	David Cressman	Title:	Town Administrator
Signature	Dent Cum	_ Date:	09/24/20
	[Signatory may be a duly authorized representative]		<u> </u>