



RIPDES SMALL MS4 ANNUAL REPORT GENERAL INFORMATION PAGE

RIPDES PERMIT #RIR0400 -29 _____

REPORTING PERIOD: **YEAR 20**
Jan 2023-Dec 2023

OPERATOR OF MS4

| | | | | |
|--|--------------------------------|------------|-----------------------|--|
| Name: Town of West Greenwich | | | | |
| Mailing Address: 280 Victory Highway | | | | |
| City: West Greenwich | State: RI | Zip: 02817 | Phone: (401) 392-3800 | |
| Contact Person: David Provonsil | Title: Town Planner | | | |
| | Email: dprovonsil@wgtownri.org | | | |
| Legal status (circle one): PRI - Private PUB - Public BPP - Public/Private STA - State FED – Federal | | | | |
| Other (please specify): | | | | |

OWNER OF MS4 (if different from OPERATOR)

| | | | |
|------------------|--------|------|------------|
| Name: | | | |
| Mailing Address: | | | |
| City: | State: | Zip: | Phone: () |
| Contact Person: | Title: | | |
| | Email: | | |

CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under the 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.

Print Name Kevin A. Breene

Print Title Town Administrator

Signature _____ Date _____



MINIMUM CONTROL MEASURE #1:

PUBLIC EDUCATION AND OUTREACH (Part IV.B.1 General Permit)**SECTION I. OVERALL EVALUATION:****GENERAL SUMMARY, STATUS, APPROPRIATENESS AND EFFECTIVENESS OF MEASURABLE GOALS:**

Include information relevant to the implementation of each measurable goal, such as activities, topics addressed, audiences and pollutants targeted. Discuss activities to be carried out during the next reporting cycle. If addressing TMDL requirements, please indicate rationale for choosing the education activity to address the pollutant of concern.

(Note: Identify parties responsible for achieving the measurable goals and reference any reliance on another entity for achieving measurable goals. Mark with an asterisk (*) if this person/entity is different from last year.)

Responsible Party Contact Name & Title: David Provonsil, Town Planner

Phone: (401) 392-3800 **Email:** dprovonsil@wgtownri.org

IV.B.1.b.1 Use the space below to provide a General Summary of activities implemented to educate your community on how to reduce stormwater pollution. For TMDL affected areas, with stormwater associated pollutants of concern, indicate rationale for choosing the education activity. List materials used for public education and topics addressed. Summarize implementation status and discuss if the activity is appropriate and effective.

- The Town maintained website has a Stormwater management page.
- Required solar development to monitor the site in Watershed Watch.
- Maintained posting and pamphlets at Town Hall.

IV.B.1.b.2 Use the space below to provide a general summary of how the public education program was used to educate the community on how to become involved in the municipal or statewide stormwater program. Describe partnerships with governmental and non-governmental agencies used to involve your community.

- The Lake Mishnock Preservation Association raised \$4000. Treated Lake for milfoil overgrowth using Procellaror Aquatic Herbicide. Obtained funds to treat Hydrilla Verticillate, Town provided funding for septic system repairs, 2 in Mishnock.

Check all topics that were included in the Public Education and Outreach program during this reporting period. For each of the topics selected, provide:

Target Audience(s): Public Employees, Residents, General Public, Businesses, Industries, Restaurants, Contractors, Developers, Agriculture, Other (describe);

Target Pollutant(s): (e.g. pet waste, fertilizers, Total Suspended Solids, etc.);

Strategies/Media: Direct Mailings, List Servs, Kiosks or Other Displays, Newspaper Ads or Articles, Public Events or Presentations, School Programs, Printed Materials, Direct Trainings, Videos, Webpage, Other (describe)

| Topic | Target Audience(s) | Target Pollutant(s) | Strategies/Media |
|---|--------------------|---------------------|------------------------|
| <input checked="" type="checkbox"/> Construction Sites | Contractors | | Regulations; approvals |
| <input type="checkbox"/> Pesticide and Fertilizer Application | | | |
| <input checked="" type="checkbox"/> General Stormwater Management Info | General | Sediment | Town Code; website |
| <input type="checkbox"/> Pet Waste Management | | | |
| <input type="checkbox"/> Household Hazardous Waste Disposal | | | |
| <input checked="" type="checkbox"/> Recycling | Residents | Hazmat | Town Hall postings |
| <input type="checkbox"/> Illicit Discharge Detection and Elimination | | | |
| <input type="checkbox"/> Riparian Corridor Protection/Restoration | | | |
| <input type="checkbox"/> Infrastructure Maintenance | | | |
| <input type="checkbox"/> Trash Management | | | |
| <input type="checkbox"/> Smart Growth | | | |
| <input type="checkbox"/> Vehicle Washing | | | |
| <input type="checkbox"/> Storm Drain Marking | | | |
| <input type="checkbox"/> Water Conservation | | | |
| <input checked="" type="checkbox"/> Green Infrastructure/Better Site Design/LID | General | General | |
| <input type="checkbox"/> Wetland Protection | | | |
| <input type="checkbox"/> Other: | | | |
| <input type="checkbox"/> None | | | |

Additional Measurable Goals and Activities

Please list all stormwater training attended by your staff during the 2023 calendar year and list the name(s) and position of all staff who attended the training.

Trainings:

Attending name of staff and title: David Provonsil, Town Planner

Attending name of staff and title: _____



MINIMUM CONTROL MEASURE #2: PUBLIC INVOLVEMENT/PARTICIPATION (Part IV.B.2 General Permit)

SECTION I. OVERALL EVALUATION:

GENERAL SUMMARY, STATUS, APPROPRIATENESS AND EFFECTIVENESS OF MEASURABLE GOALS:

Include information relevant to the implementation of each measurable goal, such as types of activities and audiences/groups engaged. Discuss activities to be carried out during the next reporting cycle. If addressing TMDL requirements, please indicate rationale for the activities chosen to address the pollutant of concern.

(Note: Identify parties responsible for achieving the measurable goals and reference any reliance on another entity for achieving measurable goals. Mark with an asterisk (*) if this person/entity is different from last year.)

Responsible Party Contact Name & Title: David Provonsil, Town Planner

Phone: (401) 392-3800 **Email:** dprovonsil@wgtownri.org

IV.B.2.b.2.ii Use the space below to describe audiences targeted for the public involvement minimum measure, include a description of the groups engaged, and activities implemented and if a particular pollutant(s) was targeted. If addressing TMDL requirements indicate how the audience(s) and/or activity address the pollutant(s) of concern. Name of person(s) and/or parties responsible for implementation of activities identified. Assess the effectiveness of BMP and measurable goal.

- Funds approved for milfoil – Lake Mishnock Preservation Association.
- Lake Mishnock is on URI Watershed Watch monitoring.

Opportunities provided for public participation in implementation, development, evaluation, and improvement of the Stormwater Management Program Plan (SWMPP) during this reporting period. Check all that apply:

| | |
|--|---|
| <input checked="" type="checkbox"/> Cleanup Events | <input type="checkbox"/> Storm Drain Markings |
| <input type="checkbox"/> Comments on SWMPP Received | <input type="checkbox"/> Stakeholder Meetings |
| <input type="checkbox"/> Community Hotlines | <input type="checkbox"/> Volunteer Monitoring |
| <input checked="" type="checkbox"/> Community Meetings | <input type="checkbox"/> Plantings |
| <input checked="" type="checkbox"/> Other (describe) | |

Additional Measurable Goals and Activities

SECTION II. Public Notice Information (Parts IV.G.2.h and IV.G.2.i) ***Note: attach copy of public notice**

Was the availability of this Annual Report and the Stormwater Management Program Plan (SWMPP) announced via public notice? YES NO If YES, Date of Public Notice:

How was public notified:

| | |
|---|---|
| <input type="checkbox"/> List-Serve (Enter # of names in List: _____) | <input checked="" type="checkbox"/> Newspaper Advertising |
| <input type="checkbox"/> TV/Radio Notices | <input checked="" type="checkbox"/> Town Hall posting |
| <input checked="" type="checkbox"/> Website | <input type="checkbox"/> Other: |

Enter Web Page URL: www.wgtownri.org/planning/pages/storm-water-management-and-water-quality

Was public meeting held? YES NO

Date: May 23, 2024

Where: West Greenwich Town Hall

Summary of public comments received:

None received.

PUBLIC INVOLVEMENT/PARTICIPATION cont'd

Planned responses or changes to the program:

N.A.



MINIMUM CONTROL MEASURE #3: ILLICIT DISCHARGE DETECTION AND ELIMINATION (Part IV.B.3 General Permit)

SECTION I. OVERALL EVALUATION:

GENERAL SUMMARY, STATUS, APPROPRIATENESS AND EFFECTIVENESS OF MEASURABLE GOALS

Include information relevant to the implementation of each measurable goal, such as activities implemented (when reporting tracked and eliminated illicit discharges, please explain the rationale for targeting the illicit discharge) to comply with on-going requirements, and illicit discharge public education activities, audiences and pollutants targeted. Discuss activities to be carried out during the next reporting cycle. If addressing TMDL requirements, please indicate rationale for the activities chosen to address the pollutant of concern.

(Note: Identify parties responsible for achieving the measurable goals and reference any reliance on another entity for achieving measurable goals. Mark with an asterisk (*) if this person/entity is different from last year.)

Responsible Party Contact Name & Title: Claude Wright, Public Works Director

Phone: (401) 385-3854 **Email:** chwright@wgtownri.org

Has this person received training on Illicit Discharge Detection and Elimination (IDDE)? YES

If yes, when and where? Works with Town Planner, P.E.

If no, who is trained on IDDE? _____

| | |
|--|--|
| IV.B.3.b.1: | <p>If the outfall map was not completed, use the space below to indicate reasons why, proposed schedule for completion of requirement and person(s)/ Department responsible for completion. (The Department recommends electronic submission of updated EXCEL Tables if this information has been amended.)</p> <p>Number of Outfalls Mapped within regulated area: <u>5+1 to State Road</u></p> <p>Percent Complete: <u>100</u></p> <p>If 100% Complete, Provide Date of Completion: <u>2016</u></p> |
| IV.B.3.b.2 | Indicate if your MS4 chose to implement the tagging of outfalls activity under the IDDE minimum measure, activities and actions undertaken under the 2023 calendar year. |
| Previously completed | |
| IV.B.3.b.3 | Use the space below to provide a summary of the implementation of recording of system additional elements (catch basins, manholes, and/or pipes). Indicate if the activity was implemented as a result of the tracing of illicit discharges, new MS4 construction projects, and inspection of catch basins required under the IDDE and Pollution Prevention and Good Housekeeping Minimum Measures, and/or as a result of TMDL related requirements and/or investigations. Assess effectiveness of the program minimizing water quality impacts. |
| No new development in the "Urban Area" | |
| IV.B.3.b.4 | Indicate if the IDDE ordinance was <u>not</u> developed, adopted, and submitted to RIDEM, explain reasons why, submit proposed schedule for completion and identify person(s) / Department and/or parties responsible for the completion of this requirement. Date of Adoption: _____ If the Ordinance was amended in 2023, please indicate why changes were necessary. |
| | |

ILLICIT DISCHARGE DETECTION AND ELIMINATION cont'd

| | |
|--|--|
| IV.B.3.b.5.ii, iii, iv, & v | Use the space below to provide a summary of the implementation of procedures for receipt and consideration of complaints, tracing the source of an illicit discharge, removing the source of the illicit discharge and program evaluation and assessment as a result of removing sources of illicit discharges. Identify person(s) / Department and/or parties responsible for the implementation of this requirement. |
| No Complaints (DPW or Planning Department) | |
| IV.B.3.b.5.vi | <p>Use the space below to provide summary of implementation of catch basin and manhole inspections for illicit connections and non-stormwater discharges. If the required measurable goal of inspecting all catch basins and manholes for this purpose was not accomplished, please indicate reasons why, the proposed schedule of completion and identify person(s) / Department and/or parties responsible for the implementation of this requirement. Evaluate effectiveness of the implementation of this requirement. The operator must keep records of all inspections and corrective actions required and completed.</p> <p>Number of Catch Basins and Manholes Inspected for illicit connections/IDDE: <u>0 (of 24)</u></p> <p>Percent Complete: <u>50 %</u></p> <p>Date of Completion: <u>Oct 2023</u></p> |
| | |
| IV.B.3.b.5.vii | <p>If dry weather surveys including field screening for non-stormwater flows and field tests of selected parameters and bacteria were not completed, indicate reasons why, proposed schedule for the completion of this measurable goal and person(s) / Department and/or parties for the completion of this requirement. Evaluate effectiveness of the implementation of this requirement. The results of the dry weather survey investigations should be submitted to RIDEM electronically, if not already submitted or if revised since 2009, in the RIDEM-provided EXCEL Tables and should include visual observations for all outfalls during both the high and low water table timeframes, as well as sampling results for those outfalls with flow. The EXCEL Tables must include a report of all outfalls and indicate the presence or absence of dry weather discharges.</p> <p>Number of Outfalls Surveyed Jan-Apr: <u>_____</u> Number of Outfalls Surveyed Jul-Oct: <u>_____</u></p> <p>Percent Complete: <u>_____ %</u></p> <p>Date of Completion: <u>_____</u></p> |
| | |
| IV.B.3.b.7 | Use the space below to provide a description of efforts and actions taken as a result of for coordinating with other physically interconnected MS4s, including State and federal owned or operated MS4s, when illicit discharges were detected or reported. Identify person(s) / Department and/or parties responsible for the implementation of this requirement. Evaluate effectiveness of the implementation of this requirement. |
| N/A | |
| IV.B.3.b.8 | Use the space below to provide a description of efforts and actions taken for the referral to RIDEM of non-stormwater discharges not authorized in accordance to Part I.B.3 of this permit or another appropriate RIPDES permit, which the operator has deemed appropriate to continue discharging to the MS4, for consideration of an appropriate permit. Identify person(s) / Department and/or parties responsible for the implementation of this requirement. Evaluate effectiveness of the implementation of this requirement. |

| | |
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| IV.B.3.b.9 | <p>Use the space below to provide a description of efforts and actions taken to inform public employees, businesses, and the general public of hazards associated with illegal discharges and improper disposal of waste, as well as allowable non-stormwater discharges identified as significant contributors of pollutants. Include a description on how this activity was coordinated with the public education minimum measure and the pollution prevention/good housekeeping minimum measure programs. Identify person(s) / Department and/or parties responsible for the implementation of this requirement. Evaluate effectiveness of the implementation of this requirement.</p> <ul style="list-style-type: none"> - Maintain Stormwater Management webpage. - Posting for education and awareness at Town Hall. |
| <p>Additional Measurable Goals and Activities</p> | |

SECTION II.A Other Reporting Requirements - Illicit Discharge Investigation and System Mapping (Part IV.G.2.m)

| | |
|--|--|
| # of Illicit Discharges Identified in 2023: | # of Illicit Discharges Tracked in 2023: |
| # of Illicit Discharges Eliminated in 2023: | # of Complaints Received: |
| # of Complaints Investigated: | # of Violations Issued: |
| # of Violations Resolved: | # of Unresolved Violations Referred to RIDEM: |
| Total # of Illicit Discharges Identified to Date (since 2003): | Total # of Illicit Discharges remaining unresolved at the end of 2023: |
| <p>Summary of Enforcement Actions:</p> | |

Total # of Outfalls identified and mapped to date: 6

Total # of Interconnections with other MS4s identified and mapped to date: 1

Extent to which the MS4 system has been mapped (% complete): 100

| | | | | | |
|--|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| Identify how the following components of the MS4 system have been mapped: | Not mapped | GIS | Auto CAD | Paper | Other (please specify) |
| Catch basins | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Manholes | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pipes, ditches, and other conduits | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Flow direction and connectivity | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Interconnections with other regulated MS4s | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| MS4-owned stormwater controls (BMPs, not including catch basins or manholes) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Delineation of outfall catchment/drainage areas | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ILLICIT DISCHARGE DETECTION AND ELIMINATION cont'd

SECTION II.B Interconnections (Parts IV.G.2.k and IV.G.2.l)

| Interconnection: | Date Found: | Location: | Name of MS4: | Originating Source: | Planned and Coordinated Efforts and Activities with Connectee: |
|------------------|-------------|-----------|--------------|---------------------|--|
| | | | | | |
| | | | | | |
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MINIMUM CONTROL MEASURE #4: CONSTRUCTION SITE STORMWATER RUNOFF CONTROL (Part IV.B.4 General Permit)

SECTION I. OVERALL EVALUATION:

GENERAL SUMMARY, STATUS, APPROPRIATENESS AND EFFECTIVENESS OF MEASURABLE GOALS:

Include information relevant to the implementation of each measurable goal, such as activities implemented to support the review, issuance and tracking of permits, inspections and receipt of complaints. Discuss activities to be carried out during the next reporting cycle. If addressing TMDL requirements, please indicate rationale for the activities chosen to address the pollutant of concern.

(Note: Identify parties responsible for achieving the measurable goals and reference any reliance on another entity for achieving measurable goals. Mark with an asterisk (*) if this person/entity is different from last year.)

Responsible Party Contact Name & Title: David Provonsil, Town Planner

Phone: (401) 392-3800 **Email:** dprovonsil@wgtownri.org

| | |
|--|--|
| IV.B.4.b.1 | <p>Indicate if the Sediment and Erosion Control and Control of Other Wastes at Construction Sites ordinance was not developed, adopted, and submitted to RIDEM, explain reasons why, submit proposed schedule for completion and identify person(s) / Department and/or parties responsible for the completion of this requirement.</p> <p>Date of Adoption: <u>10/16/2002</u></p> <p>If the Ordinance was amended in 2023, please indicate why changes were necessary and provide references to the amended portions of the local codes/ordinances.</p> |
| IV.B.4.b.6 | Use the space below to describe actions taken as a result of receipt and consideration of information submitted by the public. |
| IV.B.4.b.8 | Use the space below to describe activities and actions taken as a result of referring to the State non-compliant construction site operators. The operator may rely on the Department for assistance in enforcing the provisions of the RIPDES General Permit for Stormwater Discharges Associated with Construction Activity to the MS4 if the operator of the construction site fails to comply with the local and State requirements of the permit and the non-compliance results or has the potential to result in significant adverse environmental impacts. |
| Additional Measurable Goals and Activities | |

SECTION II. A - Plan and SWPPP/SESC Plan Reviews during Year 20 (2023), Part IV.B.4.b.2: Issuance of permits and/or implementation of policies and procedures for all construction projects resulting in land disturbance of greater than 1 acre. **Part IV.B.4.b.4:** Review 100% of plans and SWPPPs/SESC Plans for construction projects resulting in land disturbance of 1-5 acres, not reviewed by other State programs, must be conducted by adequately trained personnel and incorporate consideration of potential water quality impacts.

of Construction Applications Received: 4

of Construction Reviews Completed: 3

of Permits/Authorizations Issued: 4

Summary of Reviews and Findings, include an evaluation of the effectiveness of the program.

Identify person(s) /Department and/or parties responsible for the implementation of this requirement:

David Provonsil, Planning

Identify the type and date of training this person(s)/parties has/have received to be considered "adequately trained":

P.E. #5160

SECTION II.B - Erosion and Sediment Control Inspections during Year 20 (2023), Parts IV.G.2.n and IV.B.4.b.7: Inspection of 100% of all construction projects within the regulated area that discharge or have the potential to discharge to the MS4. (The program must include two inspections of all construction sites, first inspection to be conducted during construction for compliance of the Erosion and Sediment controls at the site, the second to be conducted after the final stabilization of the site.) Inspections must be conducted by adequately trained personnel.

| | |
|--------------------------------------|---|
| # of Active Construction Projects: 4 | |
| # of Site Inspections: 15 | # of Complaints Received: |
| # of Violations Issued: 3 | # of Unresolved Violations Referred to RIDEM: 0 |

Summary of Enforcement Actions, include an evaluation of the effectiveness of the program.

Stop Work orders; quick response and extra crew; matters resolved, re-inspection

Identify person(s) /Department and/or parties responsible for the implementation of this requirement:

Building Official/Town Planner/Public Works Director

Identify the type and date of training this person(s)/parties has/have received to be considered "adequately trained":

Certified Building Official and P.E.



MINIMUM CONTROL MEASURE #5: POST CONSTRUCTION STORMWATER MANAGEMENT IN NEW DEVELOPMENT AND REVELOPMENT (Part IV.B.5 General Permit)

SECTION I. OVERALL EVALUATION:

GENERAL SUMMARY, STATUS, APPROPRIATENESS AND EFFECTIVENESS OF MEASURABLE GOALS:

Include information relevant to the implementation of each measurable goal, such as activities implemented to support the review, issuance and tracking of permits, inspections and receipt of complaints, etc. Please indicate if any projects have incorporated the use of Low Impact Development techniques. Discuss activities to be carried out during the next reporting cycle. If addressing TMDL requirements, please indicate rationale for the activities chosen to address the pollutant of concern.

(Note: Identify parties responsible for achieving the measurable goals and reference any reliance on another entity for achieving measurable goals. Mark with an asterisk (*) if this person/entity is different from last year.)

Responsible Party Contact Name & Title: David Provonsil, Town Planner

Phone: (401) 392-3800 **Email:** dprovonsil@wgtownri.org

IV.B.5.b.5 Use the space below to describe activities and actions taken to coordinate with existing State programs requiring post-construction stormwater management.

- Inspections required
- Bonds posted

IV.B.5.b.6 Use the space below to describe actions taken for the referral to RIDEM of new discharges of stormwater associated with industrial activity as defined in §1.4(A)(111) in the *Regulations for the Rhode Island Pollutant Discharge Elimination System* (RIPDES Regulations) (the operator must implement procedures to identify new activities that require permitting, notify RIDEM, and refer facilities with new stormwater discharges associated with industrial activity to ensure that facilities will obtain the proper permits).

IV.B.5.b.9 Indicate if the Post-Construction Runoff from New Development and Redevelopment Ordinance was not developed, adopted, and submitted to RIDEM, explain reasons why, submit proposed schedule for completion and identify person(s) / Department and/or parties responsible for the completion of this requirement.

Date of Adoption: _____

If the Ordinance was amended in 2023, please indicate why changes were necessary. Please also indicate if **amendments have been made based on the 2010 RI Stormwater Design and Installation Standards Manual, and provide references to the amended portions of the local codes/ordinances.**

- Regulations refer to "the most current edition of"

IV.B.5.b.12 Use the space below to describe activities and actions taken to identify existing stormwater structural BMPs discharging to the MS4 with a goal of ensuring long term O&M of the BMPs.

POST CONSTRUCTION STORMWATER MANAGEMENT IN NEW DEVELOPMENT AND REDEVELOPMENT
cont'd

Additional Measurable Goals and Activities

SECTION II.A. - Plan and SWPPP/SWMP Reviews during Year 20 (2023), Part IV.B.5.b.4: Review 100% of post-construction BMPs for the control of stormwater runoff from new development and redevelopment projects that result in discharges to the MS4 which incorporates consideration of potential water quality impacts (the program requires reviewing 100% of plans for development projects greater than 1 acre, not reviewed by other State programs). Plan reviews must be conducted by adequately trained personnel.

of Post-Construction Applications Received: 0

of Post-Construction Reviews Completed: 4

of Permits/Authorizations Issued: 4 commercial projects (not in MS4)

Summary of Reviews and Findings, include an evaluation of the effectiveness of the program.

Identify person(s) /Department and/or parties responsible for the implementation of this requirement:

Identify the type and date of training this person(s)/parties has/have received to be considered "adequately trained":

SECTION II.B. - Post Construction Inspections during Year 20 (2023), Parts IV.G.2.o and IV.B.5.b.10 - Proper Installation of Structural BMPs: Inspection of BMPs, to ensure these are constructed in accordance with the approved plans (the program must include inspection of 100% of all development greater than one acre within the regulated areas that result in discharges to the MS4 regardless of whom performs the review). Inspections must be conducted by adequately trained personnel.

| | |
|--|---|
| # of Active Construction Projects: 3 | # of Construction Projects Completed: 2 |
| # of Site Inspections for proper Installation of BMPs: 8 | # of Complaints Received: 0 |
| # of Violations Issued: 3 | # of Unresolved Violations Referred to RIDEM: 0 |

Summary of Enforcement Actions:

Identify person(s) /Department and/or parties responsible for the implementation of this requirement:

Planning

Identify the type and date of training this person(s)/parties has/have received to be considered "adequately trained":

SECTION II.C. - Post Construction Inspections during Year 20 (2023), Parts IV.G.2.p and IV.B.5.b.11 - Proper Operation and Maintenance of Structural BMPs: Describe activities and actions taken to track required Operations and Maintenance (O&M) actions for site inspections and enforcement of the O&M of structural BMPs. Tracking of required O&M actions for site inspections and enforcement of the O&M of structural BMPs.

| | |
|---|---|
| # of Site Inspections for proper O&M of BMPs: 5 | # of Complaints Received: 0 |
| # of Violations Issued: 0 | # of Unresolved Violations Referred to RIDEM: 0 |

POST CONSTRUCTION STORMWATER MANAGEMENT IN NEW DEVELOPMENT AND REDEVELOPMENT
cont'd

Summary of Activities and Enforcement Actions. Evaluate the effectiveness of the Program in minimizing water quality impacts.

Identify person(s) /Department and/or parties responsible for the implementation of this requirement:

David Provonsil, Town Planner/Engineer

Strategies for requiring the use of non-structural Low Impact Development (LID) site design practices and techniques into stormwater management designs for new and redevelopment projects, check all that apply in your municipality/MS4:

- None
- Ordinances or by-laws requiring LID standards (e.g. reduced road widths, % conservation land, etc.)
- Ordinances or by-laws requiring LID design at conceptual review (i.e., Pre-application and/or Master Plan) stages for municipal review prior to plans being engineered.
- Ordinances or by-laws requiring LID standards only in impaired waterbody drainage areas
- Local development regulations requiring use of LID to the maximum extent practicable
- LID Guidance available in written form
- LID Guidance available at pre-application meetings
- Other strategies to ensure incorporation of LID to the maximum extent practicable, describe:

Person(s)/Department responsible for reviewing submissions for LID: Town Planner

Person(s)/Department/Board responsible for approving submissions for LID at Preliminary and/or Final Review, if applicable:
Planning Board

Are you aware of the Municipal LID Self-Assessment that was introduced by the DEM and RI NEMO in 2019 and finalized and distributed in March 2020?

Yes No

A final version of the Municipal LID Self-Assessment is available on the DEM's website:

<http://www.dem.ri.gov/programs/benviron/water/permits/ripdes/stwater/t4guide/lid-checklist-primer.pdf>

Additional guidance is also available:

<http://www.dem.ri.gov/programs/benviron/water/permits/ripdes/stwater/t4guide/lid-assessment-fs.pdf>

<http://www.dem.ri.gov/programs/benviron/water/permits/ripdes/stwater/pdfs/lidfactsheet.pdf>

<http://www.dem.ri.gov/programs/benviron/water/permits/ripdes/stwater/t4guide/lidplan.pdf>

Did your community complete the Municipal LID Self-Assessment? Yes No

If yes and it was completed in 2023, please provide a copy as an attachment to this Annual Report, if you have not already submitted it.

If no, does your community plan to complete it?

Yes No

If No, why not?

POST CONSTRUCTION STORMWATER MANAGEMENT IN NEW DEVELOPMENT AND REDEVELOPMENT
cont'd

Strategies being implemented to ensure long-term Operation and Maintenance (O&M) of privately-owned structural stormwater BMPs, check all that apply in your municipality/MS4:

- None
- Ordinances or by-laws identify BMP inspection responsible party
- Ordinances or by-laws identify BMP maintenance responsible party
- Ordinances or by-laws identify BMP inspections and maintenance requirements
- Ordinances or by-laws provide for easements or covenants for inspections and maintenance
- Ordinances or by-laws require for every constructed BMP an inspections and maintenance agreement
- Ordinances or by-laws contain requirements for documenting and detailing inspections
- Ordinances or by-laws contain requirements for documenting and detailing maintenance
- Ordinances or by-laws contain authority to enforce for lack of maintenance or BMP failure
- The MS4 is responsible for inspections of all privately-owned BMPs
- The MS4 is responsible for maintenance of all privately-owned BMPs
- Establishment of escrow account for use in case of failure of BMP
- Other strategies to ensure long-term O&M of privately-owned BMPs, describe:

Does your municipality/MS4 require the use BMPs Operations and Maintenance Agreements? YES NO

If YES, please indicate if the Operations and Maintenance Agreements include the following:

| | |
|---|---|
| a. Party responsible for the long-term O&M of permanent stormwater management BMPs | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| b. A description of the permanent stormwater BMPs that will be operated and maintained | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| c. The location of the permanent stormwater BMPs that will be operated and maintained | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| d. A timeframe for routine and emergency inspections and maintenance of all permanent stormwater management BMPs | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| e. A requirement that all inspections and maintenance activities are documented | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| f. Annual submission of inspection/maintenance certification/documentation to the MS4 | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| g. Stormwater management easement for access for inspections and maintenance or the preservation of stormwater runoff conveyance, infiltration, and detention areas and other stormwater controls and BMPs by persons other than the property owner | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| h. Steps available for addressing a failure to maintain the stormwater controls and BMPs | <input type="checkbox"/> YES <input type="checkbox"/> NO |

Please elaborate, if appropriate:

Does your municipality/MS4 keep an inventory of privately-owned BMPs? YES NO

For privately-owned structural BMPs, does your municipality/MS4 have a system for tracking:

| | |
|---|---|
| a. Agreements and arrangements to ensure O&M of BMPs? | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| b. Inspections? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| c. Maintenance and schedules? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| d. Complaints? | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| e. Non-Compliance? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| f. Enforcement actions? | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |

Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections, and maintenance? YES NO

If yes, please elaborate on which tools are used:

NOTE: BMP maintenance tasks can be a great way to involve and educate the community to their purpose and function. BMPs have the potential to create a highly interactive environment for community members and volunteers to get involved.



MINIMUM CONTROL MEASURE #6: POLLUTION PREVENTION AND GOOD HOUSEKEEPING IN MUNICIPAL OPERATIONS (Part IV.B.6 General Permit)

SECTION I. OVERALL EVALUATION:

GENERAL SUMMARY, STATUS, APPROPRIATENESS AND EFFECTIVENESS OF MEASURABLE GOALS:

Include information relevant to the implementation of each measurable goal, such as activities and practices used to address on-going requirements, and personnel responsible. Discuss activities to be carried out during the next reporting cycle. If addressing TMDL requirements, please indicate rationale for the activities chosen to address the pollutant of concern.

(Note: Identify parties responsible for achieving the measurable goals and reference any reliance on another entity for achieving measurable goals. Mark with an asterisk (*) if this person/entity is different from last year.)

Responsible Party Contact Name & Title: _____ Claude Wright, Public Works Director

Phone: _____ (401) 385-3854 **Email:** _____ chwright@wgtownri.org

| | |
|--------------|---|
| IV.B.6.b.1.i | <p>Use the space below to describe activities and actions taken to identify structural BMPs (these include but are not limited to: retention/detention basins, vegetated treatment, infiltration and pre-treatment controls, etc.) owned or operated by the small MS4 operator (the program must include identification and listing of the specific location and a description of all structural BMPs in the SWMPP and update the information in the Annual Report). Evaluate appropriateness and effectiveness of this requirement.</p> <p>Do you have an inventory of MS4-owned/operated BMPs? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>Total # of MS4-owned/operated BMPs (does not include CBs or MHs): _____</p> |
|--------------|---|

Older area with little water quality or flood mitigation: Mishnock Technology Way, built in 1980's by the State of RI; 18" storm drain connects to a State Road Section

| | |
|---------------|---|
| IV.B.6.b.1.ii | <p>Use the space below to describe activities and actions taken for inspections, cleaning and repair of detention/retention basins, storm sewers and catch basins with appropriate scheduling given intensity and type of use in the catchment area. Evaluate appropriateness and effectiveness of this requirement.</p> <p># of MS4-owned/operated BMPs inspected in 2023: _____</p> <p># of MS4-owned/operated BMPs maintained/cleaned in 2023: _____</p> <p># of MS4-owned/operated BMPs repaired in 2023: _____</p> <p>Does your municipality/MS4 have a system for tracking:</p> <p>a. Inspection schedules of MS4-owned BMPs? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>b. Maintenance/cleaning schedules of MS4-owned BMPs? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>c. Repairs, corrective actions needed? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>d. Complaints? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track stormwater BMPs, inspections, and maintenance? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> |
|---------------|---|

Two (2) inspections/cleanings in Mishnock.

POLLUTION PREVENTION AND GOOD HOUSEKEEPING IN MUNICIPAL OPERATIONS cont'd

| | |
|-----------------------------|---|
| IV.B.6.b.1.iii | <p>Use the space below to describe activities and actions taken to support the requirement of yearly inspection and cleaning of all catch basins (a lesser frequency of inspection based on at least two consecutive years of operational data indicating the system does not require annual cleaning might be acceptable). Evaluate appropriateness and effectiveness of this requirement.</p> <p>Total # of CBs within regulated area (including SRPW and TMDL areas): <u>28-Mishnock; 7-Technology Way</u></p> <p># of CBs inspected in 2023: <u>28</u> % of Total inspected: <u>100</u></p> <p># of CBs cleaned in 2023: <u>28/7</u> % of Total cleaned: <u>100</u></p> <p>If determined, approximate quantity of sand/debris collected by cleaning of catch basins: <u>11.0 cubic yards</u></p> <p>Location used for the disposal of debris: <u>DPW yard</u></p> <p>Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track the inspections and cleaning of catch basins?</p> <p align="center"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> |
| IV.B.6.b.1.iv | <p>Use the space below to describe activities and actions taken to minimize erosion of road shoulders and roadside ditches by requiring stabilization of those areas. Evaluate appropriateness and effectiveness of this requirement.</p> |
| IV.B.6.b.1.v | <p>Use the space below to describe activities and actions taken to identify and report known discharges causing scouring at outfall pipes or outfalls with excessive sedimentation, for the Department to determine on a case-by-case basis if the scouring or sedimentation is a significant and continuous source of sediments. Evaluate appropriateness and effectiveness of this requirement.</p> |
| <p>No problem outfalls.</p> | |
| IV.B.6.b.1.vi | <p>Use the space below to indicate if all streets and roads within the urbanized area were swept annually and if not indicate reason(s). The operator is required to sweep all streets and roads within the regulated area annually unless a lesser frequency can be justified based on at least two consecutive years of data indicating the street or road does not require annual sweeping. Evaluate appropriateness and effectiveness of this requirement.</p> <p>Total roadway miles within regulated area (including SRPW and TMDL areas): <u>4.6-including private road 0.4-Technology Way</u></p> <p>Roadway miles that were swept in 2023: <u>5</u> % of Total swept: <u>100</u></p> <p>Type of sweeper used: <input checked="" type="checkbox"/> Rotary brush street sweeper <input type="checkbox"/> Vacuum street sweeper</p> <p>If determined, approximate quantity of sand/debris collected by sweeping of streets and roads: <u>67 C.Y. approx</u></p> <p>Location used for the disposal of debris: <u>DPW yard</u></p> <p>Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track the annual sweeping of streets and roads?</p> <p align="center"><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> |

| | |
|--|--|
| | |
| IV.B.6.b.1.vii | Use the space below to describe activities and actions taken for controls to reduce floatables and other pollutants from the MS4. Evaluate appropriateness and effectiveness of this requirement. |
| <p>Lake Michnock is self patrolled by the Preservation Association; - pretty clean.</p> | |
| IV.B.6.b.1.viii | Use the space below to describe the method for disposal of waste removed from MS4s and waste from other municipal operations, including accumulated sediments, floatables and other debris and methods for record-keeping and tracking of this information. |
| <p>Do you have a system for tracking actions to remove and dispose of waste? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> | |
| <p>Town collects only street sweepings – approximately 71 C.Y. at DPW yard</p> | |
| IV.B.6.b.2 | <p>Use the space below to describe any operations under the MS4's legal control, including activities and facilities, that have the potential to introduce pollutants into stormwater runoff, such as pesticide/herbicide/fertilizer application, chemical and waste handling and storage, vehicle fueling, vehicle washing, vehicle maintenance, sand/salt storage, snow disposal, facilities such as public works facilities with maintenance and storage yards, waste transfer stations, municipal wastewater and water treatment facilities, and municipal parking owned and operated by the MS4.</p> <p>Does your MS4 have any salt piles, or piles containing salt, used for deicing?</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>If yes:</p> <p>Are these piles covered to prevent exposure to rain, snow, snowmelt and/or runoff?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If yes, check the type of cover used:</p> <p><input type="checkbox"/> Weatherproof permanent structure/shelter</p> <p><input type="checkbox"/> A temporary, secured, durable, waterproof covering (e.g., tarpaulin, polyethylene, polyurethane)</p> <p>Are these piles located on impermeable surfaces?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> |
| | |
| IV.B.6.b.5 | For all facilities with discharges of stormwater associated with industrial activity, use the space below to describe and indicate activities and corrective actions for the evaluation of compliance. This evaluation must include visual quarterly monitoring; routine visual inspections of designated equipment, processes, and material handling areas for evidence of, or the potential for, pollutants entering the drainage system or point source discharges to waters of the State; and inspection of the entire facility at least once a year for evidence of pollution, evaluation of BMPs that have been implemented, and inspection of equipment. A Compliance Evaluation report summarizing the scope of the inspection, personnel making the inspection, major observations related to the implementation of the Stormwater Management Plan (formerly known as a Stormwater Pollution Prevention Plan), and any actions taken to amend the Plan must be kept for record-keeping purposes. |

POLLUTION PREVENTION AND GOOD HOUSEKEEPING IN MUNICIPAL OPERATIONS cont'd

No BMP's in MS4; pipes, basins; outfalls inspected twice per year.

| | |
|------------|---|
| IV.B.6.b.7 | Use the space below to describe actions taken to ensure that new flow management projects undertaken by the operator are assessed for potential water quality impacts and existing projects are assessed for incorporation of additional water quality protection devices or practices. Evaluate appropriateness and effectiveness of this requirement. |
|------------|---|

Additional Measurable Goals and Activities

POLLUTION PREVENTION AND GOOD HOUSEKEEPING IN MUNICIPAL OPERATIONS cont'd

SECTION II.A - Structural BMPs (Part IV.B.6.b.1.i) These include but are not limited to: retention/detention basins, vegetated treatment, infiltration, and pre-treatment controls, etc.

| BMP ID: | Location: | Name of BMP Owner/Operator: | Description of BMP: | Frequency of Inspection: |
|---------|-----------|--------------------------------|---------------------|--------------------------|
| | | | | |
| | | | | |
| | | | | |

SECTION II.B - Discharges Causing Scouring or Excessive Sedimentation (Part IV.B.6.b.1.v)

| Outfall ID: | Location: | Description of Problem: | Description of Remediation Taken, include dates: | Receiving Water Body Name/Description: |
|-------------|-----------|-------------------------|---|--|
| | | | | |
| | | | | |
| | | | | |

SECTION II.C - Note any planned municipal/MS4-owned construction projects/opportunities to incorporate water quality BMPs, low impact development, or activities to promote infiltration and recharge (Part IV.G.2.j).

SECTION II.D - Please include a summary of results of any other information that has been collected and analyzed. This includes any type of data (Part IV.G.2.e).



TOTAL MAXIMUM DAILY LOAD (TMDL) or other Water Quality Determination REQUIREMENTS

SECTION I. If you have been notified that discharges from your MS4 require non-structural or structural stormwater controls based on an approved TMDL or other water quality determination, please provide an assessment of the progress towards meeting the requirements for the control of stormwater identified in the approved TMDL (Part IV.G.2.d). Please indicate rationale for the activities chosen to address the pollutant of concern.

(Note: Identify parties responsible for achieving the measurable goals and reference any reliance on another entity for achieving measurable goals. Mark with an asterisk (*) if this person/entity is different from last year.)

Responsible Party Contact Name & Title: _____

Phone: _____ Email: _____

| LIST OF IMPAIRED WATERS: | | | | |
|--|---------------------------------|---|---|-------------------|
| Impaired Water Body: WBID: | Pollutants Causing Impairments: | Has TMDL been completed? Has MS4 been notified of TMDL requirements? Has MS4 developed a Scope of Work or TMDL Implementation Plan? | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Impaired Water Body: WBID: | Pollutants Causing Impairments: | Has TMDL been completed? Has MS4 been notified of TMDL requirements? Has MS4 developed a Scope of Work or TMDL Implementation Plan? | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| [add as necessary] | | | | |
| | | | | |
| What kind of public education and outreach strategy does the MS4 implement to target each pollutant of concern? (e.g., signage on installed stormwater controls, resources on website, pamphlets about litter, pet waste, grass clippings, fertilizer use, etc.) | | | | |
| Pollutant of Concern: | Strategy: | Target Audience: | | |
| Has the MS4 installed stormwater BMPs or required the installation of stormwater BMPs on private property to address impairments? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | |
| If yes, indicate the name of the impaired water body associated with the stormwater control, type of stormwater control, date installed, ownership, and who is responsible for maintenance: | | | | |
| Impaired water body | Type of Stormwater Control: | Date Installed: | <input type="checkbox"/> Municipally/MS4-Owned <input type="checkbox"/> Privately-Owned | Who maintains it? |
| [add as necessary] | | | | |
| | | | | |

TOTAL MAXIMUM DAILY LOAD (TMDL) OR OTHER WATER QUALITY DETERMINATION REQUIREMENTS cont'd

Additional enhanced minimum measures used to address water quality issues (e.g., increased street sweeping or catch basin cleaning in areas with high pollutant loading, installation of floatable traps/screens, etc.):



SPECIAL RESOURCE PROTECTION WATERS (SRPWs)

SECTION I. In accordance with Title 250 RICR-150-10-1 (“RIPDES Regulations”) §1.32(A)(5)(a)(7), on or after March 10, 2008, any discharge from a small municipal separate storm sewer system to any Special Resource Protection Waters (SRPWs) or impaired water bodies within its jurisdiction must obtain permits if a waiver has not been granted in accordance with RIPDES Regulations §1.32(G)(5)(c). A list of SRPWs can be found in Title 250-RICR-150-05-1 (“Water Quality Regulations”) §1.28 at this link:

<https://rules.sos.ri.gov/regulations/part/250-150-05-1>

The State of Rhode Island 2022 Integrated Water Quality Monitoring and Assessment Report (which includes the Section 305(b) State of the State’s Waters Report and the Section 303(d) List of Impaired Waters) can be found here: <https://dem.ri.gov/sites/g/files/xkqbur861/files/2022-09/RIDEM%202022%20Integrated%20Report%202003-29-2022.pdf>

If you have discharges from your MS4 (regardless of its location) to any of the listed SRPWs or impaired waters (including impaired waters when a TMDL has not been approved), please provide an assessment of the progress towards expanding the MS4 Phase II Stormwater Program to include the discharges to the aforementioned waters and adapting the Six Minimum Control Measures to include the control of stormwater in these areas. Please indicate a rationale for the activities chosen to protect these waters. Please note that all of the measurable goals and BMPs required by the 2003 MS4 General Permit may not be applicable to these discharges.

TEL: 401-392-3800
FAX: 401-392-3805



MAILING ADDRESS
280 VICTORY HIGHWAY
WEST GREENWICH
RHODE ISLAND 02817-2113

May 13, 2024

STORM WATER AND BASIN CLEANING – MS4 URBAN AREAS
MISHNOCK AREA AND TECHNOLOGY WAY; 2023

During the months of April through November, the 28 catch basins and structures in the Mishnock area cleaned and inspected.

The 7 catch basins in Technology Way were cleaned in the late summer. No other work was done.

Street sweeping occurred during the months of March through May.

Claude H. Wright,

A handwritten signature in black ink that appears to read "Claude H. Wright".

Highway Supervisor



==

SCIENTIFIC INFORMATION

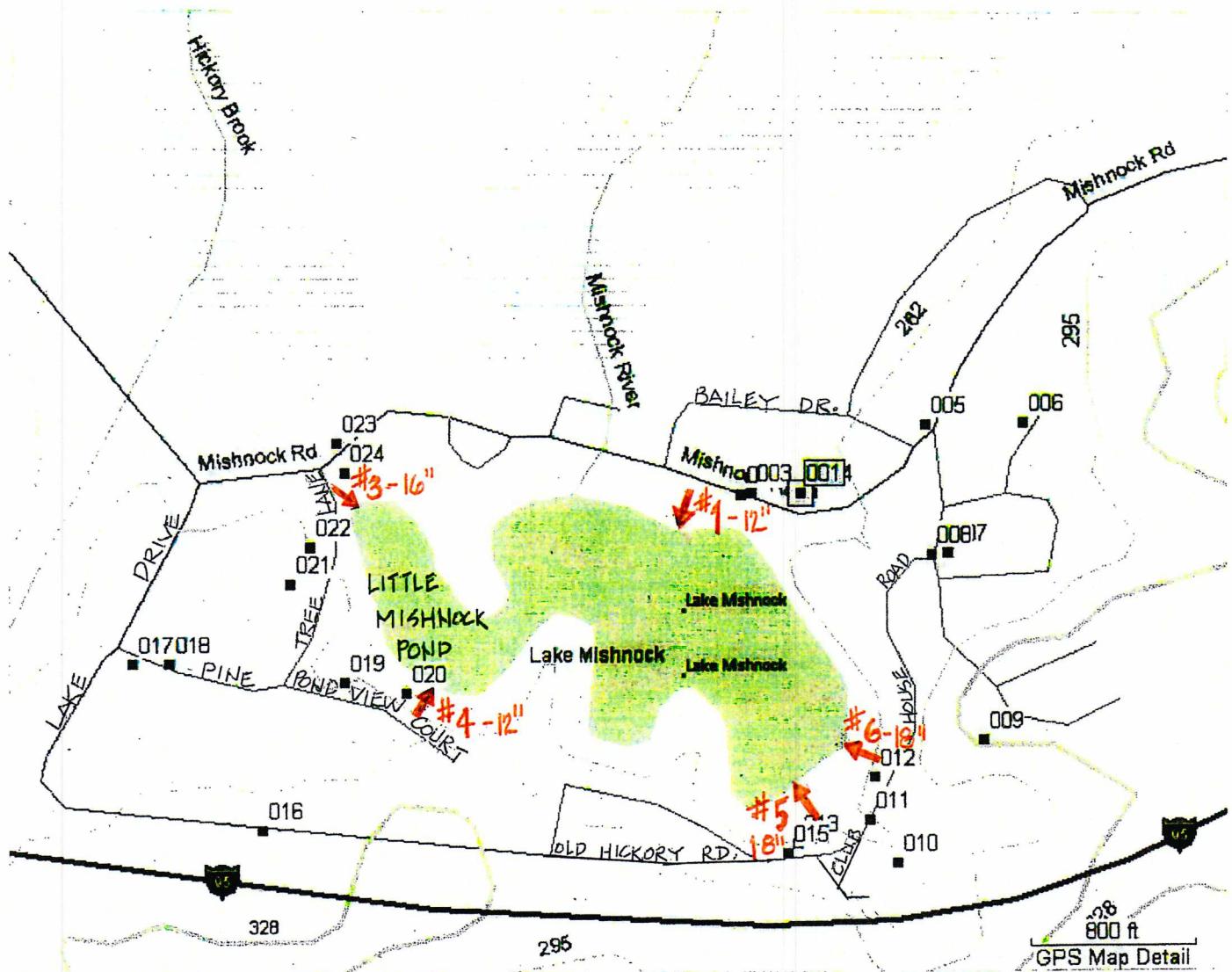
Color map of weed distribution



LMPA has had an ongoing weed-management program for many years. The above map is representative of what the lake can look like. Note the red represents dense milfoil. There are some misconceptions about so called beautiful yards. They can be quite harmful to the overall health of a lake.

Think Twice about Lawn and Garden Chemicals

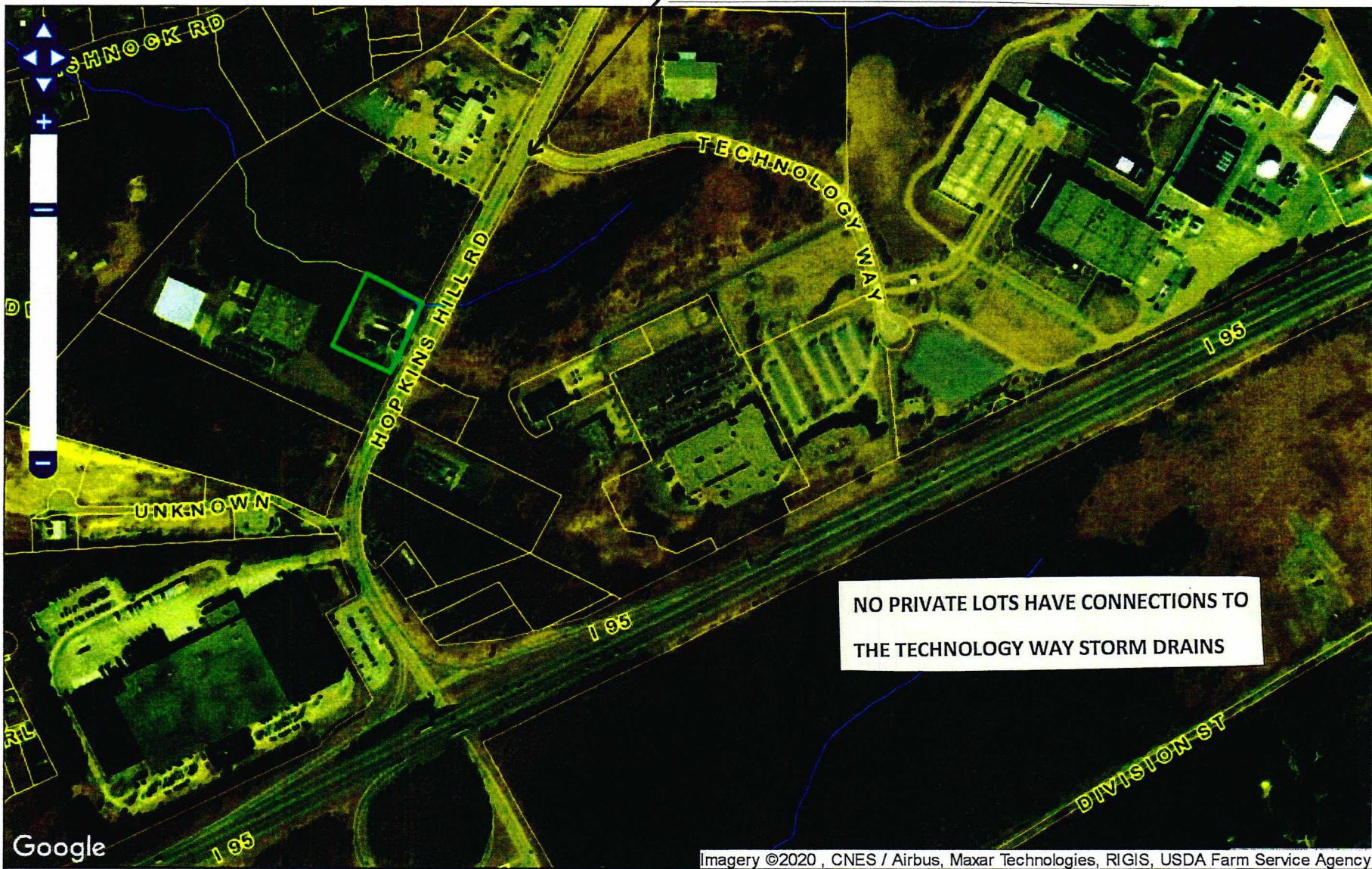
Limit the use of pesticides or fertilizers, and always follow the label directions.



Town of West Greenwich
 GPS Located
 Catch Basins and Outfalls = (#2 NOT USED)
 in
 Lake Mishnock Urban Area

MS 4 ~ 2023
 ANNUAL REPORT
 MISHNOCK URBAN AREA

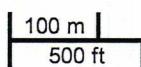
18" STORM DRAIN CONNECTION TO STATE DRAIN



Town of West Greenwich, Rhode Island

Selected Parcel: 73 HOPKINS HILL RD ID: 003/0021/00

Printed on 12/23/2020



MainStreetMaps
MainStreetGIS, LLC
www.mainstreetgis.com

This map is for informational purposes only. It is not for appraisal of, description of, or conveyance of land. The Town of West Greenwich, Rhode Island and MainStreetGIS, LLC assume no legal responsibility for the information contained herein.

MS4 2023 ANNUAL REPORT
TECHNOLOGY WAY

Name of Town: WEST GREENWICH

| General Information | | | | Location in Decimal Degrees | | | | | |
|---------------------|---------------|----------|----------|-----------------------------|----------|-------------------------------------|-----------|------------------|------------|
| Inspector(s) | Outfall ID | Date | Time | Longitude | Latitude | Method of Collection | in-meters | Horizontal Datum | Photo Name |
| C.W. | 1-MISHNOCK | 6/6/2018 | 10:50 AM | -71.6551 | +41.5888 | GPS_CODE_STANDARD_POSITION_(SA_OFF) | <15m | NAD83 | HPIM0014 |
| C.W. | 3-PINE TREE | 6/6/2018 | 10:00 AM | -71.6552 | +41.5961 | GPS_CODE_STANDARD_POSITION_(SA_OFF) | <15m | NAD83 | HPIM0008 |
| C.W. | 4-POND VIEW | 6/6/2018 | 10:15 AM | -71.6255 | +41.5947 | GPS_CODE_STANDARD_POSITION_(SA_OFF) | <15m | NAD83 | HPIM0009 |
| C.W. | 5-OLD HICKORY | 6/6/2018 | 10:30 AM | -71.6504 | +41.5875 | GPS_CODE_STANDARD_POSITION_(SA_OFF) | <15m | NAD83 | HPIM0010 |
| C.W. | 6-CLUB HOUSE | 6/6/2018 | 10:40 AM | -71.6509 | +41.5861 | GPS_CODE_STANDARD_POSITION_(SA_OFF) | <15m | NAD83 | HPIM0012 |

| Receiving Water Body Information | | | Outfall Information | | | | | | | |
|----------------------------------|-----------|-----------------|---------------------|----------|-----------|----------|----------|----------|--------|----------|
| Outfall ID | Type | Name | Material | If Other | Shape | If Other | Diameter | If Other | Type | If Other |
| 1-MISHNOCK | LAKE/POND | LAKE MISHNOCK | CONCRETE | | CIRCULAR | | 12" | | SINGLE | |
| 3-PINE TREE | LAKE/POND | LITTLE MISHNOCK | CONCRETE | | CIRCULAR | | 16" | | SINGLE | |
| 4-POND VIEW | LAKE/POND | LITTLE MISHNOCK | CONCRETE | | CIRCULAR | | 12" | | SINGLE | |
| 5-OLD HICKORY | LAKE/POND | LAKE MISHNOCK | CONCRETE | | TRAPOZOID | | 18" | | SINGLE | |
| 6-CLUB HOUSE | LAKE/POND | LAKE MISHNOCK | CONCRETE | | TRAPOZOID | | 18" | | SINGLE | |