

520 Lafayette Road North St. Paul, MN 55155-4194

## MS4 Annual Report for 2019

Municipal Separate Storm Sewer Systems (MS4s) Reporting period January 1, 2019, to December 31, 2019 Due June 30, 2020

Doc Type: Permitting Annual Report

Introduction: This document is a formatted version of the MS4 Annual Report for 2019, which is completed online by each MS4 permittee. This report is a summary of activities completed under the 2013 MS4 Permit (Permit) between January 1, 2019, and December 31, 2019. For more information about the annual report, please visit the Minnesota Pollution Control Agency's (MPCA) MS4 annual report website at <a href="https://stormwater.pca.state.mn.us/index.php?title=MS4\_Annual\_Report">https://stormwater.pca.state.mn.us/index.php?title=MS4\_Annual\_Report</a>.

MS4	general contact information				
Full na	ame: Lauren Letsche	Т	itle: Engine	ering Technician / Stori	mwater Specialist
Mailing	g address: 637 38th Ave NE				
Citv:	Columbia Heights	State:	MN	Zip code:	55421
-			-	olumbiaheightsmn.gov	
FIIOHE	e:	Liliali.	iieiscrie@cc	Jumbianeignismii.gov	
Prep	oarer contact information (if dif	ferent from the	MS4 Gener	al contact)	
Full na	ame:	Т	ïtle:		
Organi	ization				
-	a addraga:				
7					
City:					
Phone	): 	Email:			
	ollowing questions refer to Part III.D.1. of ew permittees only: Since this annual rep		riod prior to th	ne deadline for this mini	imum control measure
	), the following questions are optional.	or is for a time per	nou prior to tri	ie deadilile for triis friirii	mum control measure
Q2	•	of high priority to	ha amphasize	ad during this Darmit	
QZ	Did you select a stormwater-related issue term? [Part III.D.1.a.(1)]	; or riight phonity to	be emphasize	sa dannig tilis Ferrint	Yes
Q3	If "Yes" in Q2, what is your stormwater-re	lated issue(s)?			<del> </del>
QJ	Q3 Options	1	r answers		
	Q3:1 TMDL(s)	TMDL(s)			<del></del>
	Q3:1 FNDE(s)  Q3:2 Local businesses	TWDE(3)	<u>!</u>		<del></del>
	Q3:3 Residential BMPs	Residen <sup>a</sup>	tial BMPs		<del></del>
	Q3:4 Pet waste	resident	tiai bivii 3		<del></del>
	Q3:5 Yard waste				<del></del>
	Q3:6 Deicing materials	Deicing	materials		<del></del>
	Q3:7 Household chemicals		a.oa.o		<del></del>
	Q3:8 Construction activities				<del></del>
	Q3:9 Post-construction activities				<del>_</del>
	Q3:10 Other				
	If "Other," describe:				
<b>.</b> .			, , , , ,		
Q4	Have you distributed educational material discharge recognition and reporting? [Pa		treach to the	public focused on illicit	Yes
		` / <del>-</del>		<b>-</b>	-
Q5	Do you have an implementation plan as r	equired by the Per	mıt?  Part III.	.D.1.b.l	Yes

<b>Q</b> 7	For the items	listed	in Q6,	cational material cational material who is the intendent enter the total categorial cate	ded audier	nce?	•	-	estimate).	[see tab	ole below] ole below] ole below]
Optio	ons		Q6 – yoı	ur answers	Q7	Q7	Q7	Q7	Q7	Q7	Q8
		=			Residents	Local businesses	Developers	Students	Employees	Other	Total
Brock	hure		Brochure	2	Residents	Local Businesses					19496
	sletter	_	Newslett		Residents	Businesses					19496
Utility	y bill insert: mer	-									10.00
	spaper ad	J									
Radio		_									
Telev	vision ad	_									
Cable	e access chann	nel									
Storn	nwater-related e	event	Stormwa	iter-related event	Residents			Students			200
	ool project or entation	_									
						Local					
Web		_	Website		Residents	Businesses	Developers		Employees	Other	19496
Othe	` ,	_	Other (1)		Residents						267000
<b>.</b>		_		at MN State Fair							
Othe	` ,	-	Other (2)		Residents	1				]	62
0.1		cribe:	Storm Dr	rain Stenciling							
1+h 0	r (3)										
r <b>Q9</b> rksho	desc and Q10 belo op, school pre- ber 31, 2019.	sentat [Part	tion, put III.D.1.c	` '-	house) hel	d and the da					
r <b>Q9</b> rksho	desc and Q10 belo op, school pres	<b>ow</b> , pressentat Part	tion, pub	olic works open	house) hel	d and the da	ate each act	ivity was h			
r <b>Q9</b> rksho	and Q10 belop, school presor 31, 2019.	<b>ow</b> , pressentat Part	tion, pub	olic works open (4)] Q10 Description	house) hel	d and the da	ate each act	ivity was h			
r Q9 rksho cemb	and Q10 belop, school preson 31, 2019.  Q9 Date of act 6/27/2019	ow, presentate [Part extivity]	, 2019,	colic works open (4)]  Q10 Description Stormwater Infor  and December olic education a	n of activity mational Tab	d and the da	e Community	Picnic	eld from Janu		
r Q9 rksho cemb	desc and Q10 belo op, school presoer 31, 2019. Q9 Date of act 6/27/2019 Between Janu or future plans	ow, presentate [Part extivity]	, 2019, /our pub	colic works open (4)]  Q10 Description Stormwater Infor  and December olic education a	n of activity mational Tab	d and the da	e Community	Picnic	eld from Janu	uary 1, 20	
r Q9 rkshocemb	and Q10 belop, school presoer 31, 2019.  Q9 Date of act 6/27/2019  Between January or future plans of future plans of future plans of the company of the com	ow, presentate [Part stivity]  uary 1 as for year better the part stivity	, 2019, vour pub	and December obdifications:  tion/involverage of the control of th	n of activity mational Tab  31, 2019, ond outreach	did you modin program?	e Community  ify your BMF [Part IV.B.]	Picnic Picnic	able goals,		019 to
cemble ce	and Q10 belop, school presoer 31, 2019.  Q9 Date of act 6/27/2019  Between January or future plans of future plans of future plans of the company of the com	ow, presentate [Part stivity]  uary 1 as for year better the part stivity	, 2019, vour pub	colic works open (4)]  Q10 Description Stormwater Inform  and December olic education a podifications:	n of activity mational Tab  31, 2019, ond outreach	did you modin program?	e Community  ify your BMF [Part IV.B.]	Picnic Picnic	able goals,		019 to

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Q13	If 'Yes' in Q12, what was the opportunity that you	provided?	
	Q13 Options	Q13 – your answers	
	Q13:1 Public meeting		
	Q13:2 Public event	Public event	
	Q13:3 Other		
Q14	If 'Public meeting' in Q13, did you hold a stand-ale Date of the public meeting: Number of citizens that attended and were inform		
045		led about your SWITI.	<u> </u>
Q15	If "Public event" in Q13, describe:		
	Stormwater Informational Table @ Citywide Com Date of the public event: Number of citizens that attended and were inform		6/27/2019
Q16	If "Other" in Q13, describe:		
	Date of this action:  Number of citizens that attended and were inform	ned about your SWPPP	
047		•	
Q17	Between January 1, 2019, and December 31, 20 SWPPP?		No
	If 'Yes,' enter the total number of individuals or or SWPPP:		
Q18	If 'Yes' in Q17, did you modify your SWPPP as a	result of written input received? [Part III.D.2.b.(2)]	
	If "Yes," describe those modifications:		
Q19	Between January 1, 2019, and December 31, 20 or future plans for your public education and outre		No
	If "Yes," describe those modifications:		
MCN	13: Illicit discharge detection and e	elimination	
The fo	llowing questions refer to Part III.D.3. of the Per	rmit.	
Q20	Do you have a regulatory mechanism which proh	ibits non-stormwater discharges to your MS4?	Yes
For ne are opt		a time period prior to the deadline for this MCM, the	ne following questions
Q21	Did you identify any illicit discharges between Jar III.D.3.h.(4)]	Yes	
Q22	If 'Yes' in Q21, enter the number of illicit discharg	3	
Q23	If 'Yes' in Q21, how did you discover these illicit d		
~_0	Q23 Options	Q23 – your answers	
	Q23:1 Public complaint	Public complaint	
	Q23:2 Staff	Staff	
Q24	If 'Public complaint' in Q23, enter the number disc	covered by the public:	1
Q25	If 'Staff' in Q23, enter the number discovered by s	staff:	2
Q26	If 'Yes' in Q21, did any of the discovered illicit disc		
	includes verbal warnings)?	G	Yes

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Q27 If 'Yes' in Q26, what type of enforcement action(s) was taken and how many of each action were issued between January 1, 2019, and December 31, 2019?

Q27 Options	Q27 – your answers	
Q27:1 Verbal warning	Verbal warning	3
Q27:2 Notice of violation		
Q27:3 Fine		
Q27:4 Criminal action		
Q27:5 Civil penalty		
Q27:6 Other		

If "Other," describe:

Q28	If 'Yes' in Q26, did the enforcement action(s) take	Yes		
Q29	If 'No' in Q28, why was the enforcement not suffice			
Q30	Do you have written Enforcement Response Procillicit discharge regulatory mechanism(s)? [Part III	· · · · · · · · · · · · · · · · · · ·	_Yes	
Q31	Between January 1, 2019, and December 31, 20 recognition (including conditions which could cau discharges for further investigations? [Part III.D.3	Yes		
Q32	If 'Yes' in Q31, how did you train your field staff?			
	Q32 Options	Q32 – your answers		
	Q32:1 Email			
	Q32:2 PowerPoint	PowerPoint		
	O32:3 Presentation	Presentation		

If "Other," describe:

Q32:4 Video
Q32:5 Field training
Q32:6 Other

## The following questions refer to Part III.C.1. of the Permit.

Q33	Did you update your storm sewer system map between January 1, 2019, and December 31, 2019? [Part III.C.1.]	Yes
	For new permittees only, the question instead is: Have you developed a storm sewer system map? [Part III.C.1.]	
Q34	Does your storm sewer map include all pipes 12 inches or greater in diameter and the direction of stormwater flow in those pipes? [Part III.C.1.a.]	Yes
Q35	Does your storm sewer map include outfalls, including a unique identification (ID) number and an associated geographic coordinate? [Part III.C.1.b.]	Yes
Q36	Does your storm sewer map include all structural stormwater BMPs that are part of your MS4? [Part III.C.1.c.]	Yes
Q37	Does your storm sewer map include all receiving waters? [Part III.C.1.d.]	Yes
Q38	In what format is your storm sewer map available?  If "Other," describe:	GIS

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Q39	Between January 1, 2019, and December 31, 20 or future plans for your illicit discharge detection If "Yes," describe those modifications:	No	
MCN	1 4: Construction site stormwater r	runoff control	
Γhe fo	llowing questions refer to Part III.D.4. of the Pe	rmit.	
Q40	Discharge Stormwater Associated with Construct	east as stringent as the Agency's general permit to tion Activity (CSW Permit) No. MN R100001 ument.html?gid=18984) for erosion and sediment	Yes
Q41	Have you developed written procedures for site p III.D.4.b.]	plan reviews as required by the Permit? [Part	Yes
Q42	Have you documented each site plan review as r	required by the Permit? [Part III.D.4.f.]	Yes
Q43	Enter the number of site plan reviews conducted 2019. and December 31, 2019:	for sites an acre or greater between January 1,	2
Q44	What types of enforcement actions do you have regulatory mechanism? Check all that apply and 2019, to December 31, 2019.		
	Q44 Options	Q44 – your answers	
	Q44:1 Verbal warning	Verbal warnings	0
	Q44:2 Notice of violation	Notice of violation	0
	Q44:3 Administrative order	Administrative orders	0
	Q44:4 Stop-work order	Stop-work orders	0
	Q44:5 Fine	Fines	0
	Q44:6 Forfeit of security bond money	Forfeit of security of bond money	0
	Q44:7 Withholding of certificate of occupancy	Withholding of certificate of occupancy	0
	Q44:8 Criminal action	Criminal actions	0
	Q44:9 Civil penalty	Civil penalties	0
	Q44:10 Other		
	If "Other," describe:		
Q45	Do you have written Enforcement Response Proconstruction site stormwater runoff control regula	Yes	
Q46	Enter the number of active construction sites and between January 1, 2019, and December 31, 20	1	
Q47	Do you have written procedures for identifying pr	iority sites for inspections? [Part III.D.4.d.(1)]	Yes
Q48			
Q40	If 'Yes' in Q47, how are sites prioritized for inspections?		
	Q48 Options	Q48 – your answers	
	Q48:1 Site topography Q48:2 Soil characteristics		
	Q46.2 Soli characteristics  Q48:3 Type of receiving water(s)	Types of receiving water(s)	
	Q46.3 Type of receiving water(s)  Q48:4 Stage of construction	Stage of construction	
	Q48:5 Compliance history	Compliance history	
	Q48:6 Weather conditions	Weather conditions	
	O48:7 Citizen complaints	Citizen complaints	

If "Other," describe:

Q48:8 Project size Q48:9 Other

Do you have a checklist or other written means to document site inspections when determining compliance? [Part III.D.4.d.(4)] Q49

Yes

Project size

Q50	Enter the number of site in 2019, and December 31, 2	_1		
Q51	Enter the frequency at whi III.D.4.d.(2)]:	conducted (e.g. daily, weekly, monthly): [Part		
	weekly / after 0.5" rainfall	event		
Q52	Enter the number of traine between January 1, 2019,	1		
Q53			s) and/or organization that conducts construction imary construction stormwater contact first if you	
	1 Inspector name:	Lauren Letsche		
	Organization:	City of Columbia Heights	3	=
	Office phone:	763-706-3709		=
	Work/Cell phone:	612-363-8961		=
	Email address:	lletsche@columbiaheigh	ntsmn.gov	_
	Preferred contact method:	E moil	V	_
	2 Inspector name:			_
	Organization:			_
	Office phone:			_
	Work/Cell phone:			_
	Email address:			_
	Preferred contact method:			_
	3 Inspector name:			=
	Organization:			_
	Office phone:			_
	Work/Cell phone:			_
	Email address:	-		_
	Preferred contact method:			
Q54	What training did inspecto	re receive?		=
QUT	Q54 Options	13 Teceive:	Q54 – your answers	
	Q54:1 University of Min	nesota Frosion and	University of Minnesota Erosion and Stormwater	
		nt Certification Program	Management Certification Program	
	Q54:2 Qualified Compli Stormwater (QCIS)	ance Inspector of		
	Q54:3 Minnesota Labor Stormwater Pollution Pr or Supervisor			
		Contractors Association		
	Q54:5 Certified Profess Sediment Control (CPE			
	Q54:6 Certified Profess Quality (CPSWQ)	ional in Stormwater		
	Q54:7 Certified Erosion Water Inspector (CESS			
	Q54:8 Other			
	If "Other," describe:			
Q55	Between January 1, 2019,	, and December 31, 201	19, did you modify your BMPs, measurable goals,	
			ter runoff control program? [Part IV.B.]	No
	If "Yes," describe those me	odifications:		

The following questions refer to Part III.D.5. of the Permit
--

Q56	Do you have a regulatory mechanism which meets all requirements as specified in Part III.D.5.a of
	the Permit?

Yes

Q57 What approach are you using to meet the performance standard for Volume, Total Suspended Solids (TSS), and Total Phosphorus (TP) as required by the Permit? [Part III.D.5.a.(2)] Check all that apply. Refer to the MPCA website at http://www.pca.state.mn.us/index.php/viewdocument.html?gid=17815 for guidance on stormwater management approaches.

Q57 Options	Q57 – your answers
Q57:1 Retain a runoff volume equal to one inch times the area of the proposed increase of impervious surfaces on-site	Retain a runoff volume equal to one inch times the area of the proposed increase of impervious surfaces on-site
Q57:2 Retain the post-construction runoff volume on site for the 95th percentile storm	
Q57:3 Match the pre-development runoff conditions	Match the pre-development runoff conditions
Q57:4 Adopt the Minimal Impact Design Standards (MIDS)	
Q57:5 An approach has not been selected	
Q57:6 Other method (Must be technically defensiblee.g., based on modeling, research and acceptable engineering practices)	

If "Other," describe:

Q58 Do you have written Enforcement Response Procedures (ERPs) to compel compliance with your post-construction stormwater management regulatory mechanism(s)? [Part III.B.]

Yes

Between January 1, 2019, and December 31, 2019, did you modify your BMPs, measurable goals, Q59 or future plans for your post-construction site stormwater management program? [Part IV.B.]

No

If "Yes," describe those modifications:

## MCM 6: Pollution prevention/good housekeeping for municipal operations

## The following questions refer to Part III.D.6. of the Permit.

For new permittees only: Since this annual report is for a time period prior to the deadline for this MCM, the following questions are optional.

Enter the total number of structural stormwater BMPs, outfalls (excluding underground outfalls), Q60 and ponds within your MS4 (exclude privately owned).

Q60:a Structural stormwater BMPs	_29
Q60:b Outfalls	_38
Q60:c Ponds	_16
Enter the number of structural stormwater BMPs, outfalls (ponds that were inspected from January 1, 2019, to December 1, 2019, to December 2, 2019, to Decem	5 7

Q61 privately owned), [Part III.D.6.e.]

	pa.e., ee.,	
	Q61:a Structural stormwater BMPs	29
	Q61:b Outfalls	38
	Q61:c Ponds	16
Q62	Have you developed an alternative inspection frequency for any structural stormwater BMPs, as allowed in Part III.D.6.e.(1) of the Permit?	Yes

Based on inspection findings, did you conduct any maintenance on any structural stormwater BMPs? [Part III.D.6.e.(1)]

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Q64	If 'Yes,' briefly	/ describe	the maintenance tha	t was conducted:				
	Cleaned out le	eaves and	d debris. Made repair	rs where necessary.				
Q65	Do you own o III.D.6.e.(3)]	or operate	Yes					
Q66	If 'Yes' in Q65 [Part III.D.6.e.		Yes					
Q67	If 'Yes' in Q66 and/or storage	s, based c	<del></del>					
Q68	If 'Yes' in Q67							
		d dispose		street sweepings. Swept th	e yard with a street			
Q69				1, 2019, did you modify you good housekeeping for mur				
	If 'Yes' in Q69	, describ	e those modifications:					
f requ	uired, you must	t comple	te the TMDL Annual	Neport Form, available o	n the MPCA's website at			
				ownload_page_with_TMD				
Attach	your completed	d TMDL A	Annual Report Form a	s instructed in the online Ar	nnual Report. [Part III.E]			
Q71	If a file was successfully uploaded, a reference number will appear: ref:0000000069:Q71							
٩lun	n or Ferric (	Chloric	de Phosphorus	Treatment System	is (not required)			
			r to Part III.F.3.a. of t eatment system.	he Permit. Provide the in	formation below as it per	tains to your alum or		
Q72			ım/dd/yyyy - mm/dd/y	,,,,,,)				
Q / Z	Janu	-	iiiii/da/yyyy iiiiii/da/y	<i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>				
	Febr	ruary				<u> </u>		
	Marc	ch _						
	April							
	May	, <u> </u>				<u></u>		
	June							
	July	· _						
	Augu	ust						
	Sept							
	Octo	ober				<del></del>		
-	Nove	<del></del>						
	Dece	ember _				<u>—</u>		
		072						
				074	075	070		
	Manth	Q73	W	Q74 Gallons of alum or ferric	Q75	Q76 Calculated pounds of		
	Month		l(s) used for treatment		Q75 Gallons of water treated			
	January		l(s) used for treatment	Gallons of alum or ferric		Calculated pounds of		
	January February		l(s) used for treatment	Gallons of alum or ferric		Calculated pounds of		
	January February March		l(s) used for treatment	Gallons of alum or ferric		Calculated pounds of		
	January February March April		l(s) used for treatment	Gallons of alum or ferric		Calculated pounds of		
	January February March April May		l(s) used for treatment	Gallons of alum or ferric		Calculated pounds of		
	January February March April		l(s) used for treatment	Gallons of alum or ferric		Calculated pounds of		

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	August								
	September								
	October								
	November								
	December								
Q77		nance issues and corrective action(s), including 1, 2019, and December 31, 2019:	ding the date(s) when correc	etive action(s) were taken,					
Parti	nerships	i							
Q78	Did you re	ely on any other regulated MS4s to satis	sfy one or more Permit re	equirements?	Yes				
Q79		If 'Yes' in Q78, describe the agreements you have with other regulated MS4s and which Permit requirements the other regulated MS4s help satisfy: [Part IV.B.6.]							
	RCWD provided us with educational information / newsletter articles for education requirements of the permit. Although the MWMO is not a regulated MS4, they provide information that supports the City's public education and outreach goals.								
Addi	itional ir	formation							
files. F	For each s <sub>l</sub>	to provide any additional files to acc pace, you may attach one file. You m MS4NameHere_2019AR to <u>ms4permi</u> t	nay provide additional e	xplanation and/or inform					
Q80	If a file wa	s successfully uploaded, a reference n	number will appear:						
Q81	If a file was successfully uploaded, a reference number will appear:								
Q82	If a file was successfully uploaded, a reference number will appear:								
Q83	Optional,	describe the file(s) uploaded:							
Own	ner of op	erator certification							
MS4 A	Annual Rep	overall administrative responsibility ort. This person must be duly author inistrator) or ranking elected official	rized and should be eith	ner a principal executive					
	direction of properly of persons we information	nder penalty of law that this document a presupervision in accordance with a system athered and evaluated the information who manage the system, or those person, the information submitted is, to the blete (Minn. R. 7001.0070). I am aware mation, including the possibility of fine a	stem designed to assure to submitted. Based on my ons directly responsible for poest of my knowledge and that there are significant	hat qualified personnel inquiry of the person or gathering the belief, true, accurate, penalties for submitting	Yes				
	By typing my name in the following box, I certify the above statements to be true and correct, to the best of my knowledge, and that information can be used for the purpose of processing my MS4 Annual Report.								
	Name:	Kevin Hansen							
	_				<u> </u>				
	Title:	Director of Public Works / City Enginee	er						

Date:

6/26/2020

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