



# ANNUAL REPORT FORM FOR INDIVIDUAL NPDES PERMITS FOR MUNICIPAL SEPARATE STORM SEWER SYSTEMS (RULE 62-624.600(2), F.A.C.)

- This Annual Report Form must be completed and submitted to the Department to satisfy the annual reporting requirements established in Rule 62-621.600, F.A.C.
- Submit this fully completed and signed form and any REQUIRED attachments by email to the NPDES Stormwater Program Administrator or to the MS4 coordinator. Their names and email addresses are available at: <http://www.dep.state.fl.us/water/stormwater/npdes/contacts.htm>. If files are larger than 10mb, materials may be placed on the NPDES Stormwater ftp site at: [ftp://ftp.dep.state.fl.us/pub/NPDES\\_Stormwater/](ftp://ftp.dep.state.fl.us/pub/NPDES_Stormwater/). After uploading the ANNUAL REPORT files, an email must be sent to the MS4 coordinator or the NPDES program administrator notifying them the report is ready for downloading
- Refer to the Form Instructions for guidance on completing each section.
- **Please print or type information in the appropriate areas below**

SECTION I. BACKGROUND INFORMATION			
<b>A.</b>	Permittee Name: Polk County / Town of Lake Hamilton		
<b>B.</b>	Permit Name: Polk County Municipal Separate Storm Sewer System		
<b>C.</b>	Permit Number: FLS000015-003 (Cycle 3)		
<b>D.</b>	Annual Report Year: <input type="checkbox"/> Year 1 <input type="checkbox"/> Year 2 <input checked="" type="checkbox"/> Year 3 <input type="checkbox"/> Year 4 <input type="checkbox"/> Year 5 <input type="checkbox"/> Other, specify Year:		
<b>E.</b>	Reporting Time Period (month/year): September / 2012 through September / 2013		
<b>F.</b>	Name of the Responsible Authority: Marlene Wagner		
	Title: Mayor		
	Mailing Address: P.O. Box 126		
	City: Lake Hamilton	Zip Code: 33851	County: Polk
	Telephone Number: 863-439-1910		Fax Number: 863-439-1421
	E-mail Address: sara@townoflakehamilton.com		
<b>G.</b>	Name of the Designated Stormwater Management Program Contact (if different from Section I.F above):		
	Title: N/A		
	Department: N/A		
	Mailing Address: N/A		
	City: N/A	Zip Code: N/A	County: N/A
	Telephone Number:		Fax Number:
	E-mail Address: N/A		

SECTION II. MS4 MAJOR OUTFALL INVENTORY (Not Applicable In Year 1)	
<b>A.</b>	Number of outfalls ADDED to the outfall inventory in the current reporting year (insert "0" if none): 0 (Does this number include non-major outfalls? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable) Not applicable since 0 reported
<b>B.</b>	Number of outfalls REMOVED from the outfall inventory in the current reporting year (insert "0" if none): 0 (Does this number include non-major outfalls? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable) Not applicable since 0 reported
<b>C.</b>	Is the change in the total number of outfalls due to lands annexed or vacated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable 0 reported

**SECTION III. MONITORING PROGRAM**

<b>A.</b>	Provide a brief statement as to the status of monitoring plan implementation: <i>There are no known major outfalls within the Town's MS4. As noted in the December 5, 2014 letter to the FDEP, the Town of Lake Hamilton is preparing an update to its inventory and will provide a list of any major outfalls within 9 months.</i>
<b>B.</b>	Provide a brief discussion of the monitoring results to date: <i>There are no known major outfalls within the Town's MS4. As noted in the December 5, 2014 letter to the FDEP, the Town of Lake Hamilton is preparing an update to its inventory and will provide a list of any major outfalls within 9 months.</i>
<b>C.</b>	Attach a monitoring data summary, as required by the permit. <i>Currently there is no water quality testing being performed by the Town.</i>

**SECTION IV. FISCAL ANALYSIS**

<b>A.</b>	Total expenditures for the NPDES stormwater management program for the current reporting year: \$55,502 <i>DEP Note: If program resources have decreased from the previous year, attach a discussion of the impacts on the implementation of the SWMP as per Part II.F of the permit.</i>
<b>B.</b>	Total budget for the NPDES stormwater management program for the subsequent reporting year: \$78,500

**SECTION V. MATERIALS TO BE SUBMITTED WITH THIS ANNUAL REPORT FORM**

Only the following materials are to be submitted to the Department along with this fully completed and signed Annual Report Form (check the appropriate box to indicate whether the item is attached or is not applicable):

<u>Attached</u>	<u>N/A</u>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>***DEP Note: Please complete Checklists A &amp; B at the end of the tailored form.***</b> Any additional information required to be submitted in this current annual reporting year in accordance with Part III.A of your permit that is not otherwise included in Section VII below.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	A monitoring data summary as directed in Section III.C above and in accordance with Rule 62-624.600(2)(c), F.A.C.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Year 1 ONLY: An inventory of all known major outfalls and a map depicting the location of the major outfalls (hard copy or CD-ROM) in accordance with Rule 62-624.600(2)(a), F.A.C.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Year 3 ONLY: The estimates of pollutant loadings and event mean concentrations for each major outfall or each major watershed in accordance with Rule 62-624.600(2)(b), F.A.C.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Year 4 ONLY: Permit re-application information in accordance with Rule 62-624.420(2), F.A.C.

**DO NOT SUBMIT ANY OTHER MATERIALS**  
(such as records and logs of activities, monitoring raw data, public outreach materials, etc.)

**SECTION VI. CERTIFICATION STATEMENT AND SIGNATURE**

*The Responsible Authority listed in Section I.F above must sign the following certification statement, as per Rule 62-620.305, F.A.C.:*

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 gathered and evaluated the information submitted. Based upon my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, 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

Name of Responsible Authority (type or print): Marlene Wagner

Title: Mayor

Signature: \_\_\_\_\_ Date: 03 / 30 / 15

**SECTION VII. STORMWATER MANAGEMENT PROGRAM (SWMP) SUMMARY TABLE**

A.	B.	C.	D.	E.	F.				
Permit Citation/ SWMP Element	Permit Requirement/Quantifiable SWMP Activity	Number of Activities Performed	Documentation / Record	Entity Performing the Activity	Comments				
Part III.A.1	<b>Structural Controls and Stormwater Collection Systems Operation</b>								
	<p>Maintain an up-to-date inventory of the structural controls and roadway stormwater collection structures operated by the permittee, including, at a minimum, all of the types of control structures listed in Table II.A.1.a of the permit. Report the current known inventory.</p> <p><i>DEP Note: The permittee needs to “customize” this section by adding any structural controls to the list below that are part of the permittee’s MS4 currently or are planned for the future. The permittee may remove any structural controls listed that it does not have currently or will likely not have during this permit cycle. Please see the attached description of each type of structure. In addition, the permittee may choose its own unit of measurement for each structural control to be consistent with the unit of measurement in the documentation. Unit options include: miles, linear feet, acres, etc.</i></p> <p>Provide an inventory of all known major outfalls covered by the permit and a map depicting the location of the major outfalls (hard copy or CD-ROM). Provide the outfall inventory and map with the Year 1 Annual Report. <b>There are no known outfalls within the Town’s MS4.</b></p> <p>Report the number of inspection and maintenance activities conducted for each type of structure included in Table II.A.1.a, and the percentage of the total inventory of each type of structure inspected and maintained. If the minimum inspection frequencies set forth in Table II.A.1.a were not met, provide as an attachment an explanation of why they were not and a description of the actions that will be taken to ensure that they will be met.</p> <p><i>DEP Note: If the minimum inspection frequencies set forth in Table II.A.1. a of the permit were not met for one or more type of structure, the permittee must provide as an attachment an explanation of why they were not and a description of the actions that will be taken to ensure that they will be met. Please provide the title of the attached explanation in Column D and the name of the entity who finalized the explanation in Column E.</i></p>								
	<b>Type of Structure</b>	<b>Number of Activities Performed</b>							
		<b>Total Number of Structures</b>	<b>Number of Inspections</b>	<b>Percentage Inspected</b>	<b>Number of Maintenance Activities</b>	<b>Percentage Maintained</b>	<b>Documentation/Record</b>	<b>Entity Performing the Activity</b>	<b>Comments</b>
	<b>Dry retention systems</b>	3	3	100%			NPDES SOP in Compliance Binder	Town of Lake Hamilton Utilities Department	As requested a checklist for routine inspections and proactive inspections of illicit discharges is attached
	<b>MS4 pipes / culverts (miles)</b>	1	4	100%			“	“	Procedures for documenting
	<b>Inlets / catch basins / grates</b>	50	25	50%			“	“	IDDE is

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	Ditches / conveyance swales (miles)	7	7	100%			"	"	Described
	ATTACH explanation if any of the minimum inspection frequencies in Table II.A.1.a were <u>not</u> met						"	"	Checklist attached
	Year 1 ONLY: Attach a map of all known major outfalls								
Part III.A.2	Areas of New Development and Significant Redevelopment								
	Report the number of significant redevelopment projects reviewed by the permittee for post-development stormwater considerations.								
	<i>DEP Note: Please provide an explanation in Column F for any "0" reported in Column C.</i>								
	Number of significant redevelopment projects reviewed					0			The code has been reviewed
	Provide in the Year 2 Annual Report the summary report of the review of local codes activity. Provide in the Year 4 Annual Report the follow-up report on plan implementation of modifying codes to allow low impact design BMPs. <b>N/A</b>								
	<i>DEP Note: Refer to Part III.A.2 of the permit for details regarding what the review entails, and what must be included in the summary report and follow-up report. Please provide the title of the attached report in Column D and the name of the entity who finalized the report in Column E.</i>								
	Year 2 ONLY: Attach the summary report of the review activity					1			Code recommendation to include LID will be presented in year 4.
	Year 4 ONLY: Attach the follow-up report on plan implementation					N/A			Not required for Year 3
Part III.A.3	Roadways								
	Annually review (and revise, as needed) and implement the permittee's written procedures for the litter control program(s) for public streets, roads, and highways, including rights-of-way, employed within the permittee's jurisdictional area and properly dispose of collected material. Implement the program on a monthly, or on an as needed, basis. Report on the litter control program, including the frequency of litter collection, an estimate of the total number of road miles cleaned or amount of area covered by the activities, and an estimate of the quantity of litter collected.								
	<i>DEP Note: Please provide an explanation in Column F for any "0" reported in Column C. In addition, the permittee may choose its own units of measurement for the reporting items. Unit options for the amount of litter include: bags, cubic yards, pounds, tons. Unit options for the amount of area covered by the activity include: square feet, linear feet, yards, miles, acres. If all litter collection is performed by staff or by contractors, but not by both, please remove the non-applicable reporting items.</i>								

**SECTION VII. STORMWATER MANAGEMENT PROGRAM (SWMP) SUMMARY TABLE**

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Permit Citation/ SWMP Element	Permit Requirement/Quantifiable SWMP Activity	Number of Activities Performed	Documentation / Record	Entity Performing the Activity	Comments
	<b>PERMITTEE Litter Control Program: Frequency of litter collection</b>	1 to 3 weekly	Town is establishing method of record keeping	Town of Lake Hamilton PW Dept	
	<b>PERMITTEE Litter Control Program: Estimated amount of area maintained (miles)</b>	21.36	"	"	
	<b>PERMITTEE Litter Control Program: Estimated amount of litter collected (tons)</b>	TBD	"	"	
	<b>CONTRACTOR Litter Control Program: Frequency of litter collection</b>	weekly	Tippage and invoices paid		
	<b>CONTRACTOR Litter Control Program: Estimated amount of area maintained (linear feet)</b>	21.36			2,357 acres
	<b>CONTRACTOR Litter Control Program: Estimated amount of litter collected (cubic yards)</b>	3845			
	If an Adopt-A-Road or similar program is implemented, report the total number of road miles cleaned and an estimate of the quantity of litter collected.				
	<i>DEP Note: The permittee may choose its own unit of measurement for the amount of litter collected. Unit options include: bags, cubic yards, pounds, tons. If an Adopt-A-Road or similar program is not implemented by the permittee, please note that in Column F but do not remove the Adopt-A-Road Program reporting items.</i>				
	<b>Trash Pick-up Events: Total miles cleaned</b>	0			
	<b>Trash Pick-up Events: Estimated amount of litter collected (cubic yards)</b>	0			
	<b>Adopt-A-Road Program: Total miles cleaned</b>	0			
	<b>Adopt-A-Road Program: Estimated amount of litter collected (cubic yards)</b>	0			
	Report on the street sweeping program, including the frequency of the sweeping, total miles swept, an estimate of the quantity of sweepings collected, and the total nitrogen (TN) and total phosphorus (TP) loadings that were removed by the collection of sweepings. If no street sweeping program is implemented, provide the explanation of why not in the Year 1 Annual Report.				
	<i>DEP Note: Please provide an explanation in Column F for any "0" reported in Column C. Also, the permittee may choose its own unit of measurement for the amount of sweeping material collected. Unit options include: cubic yards, pounds, tons.</i>				
	<i>DEP Note: If the permittee has curbs and gutters but no street sweeping program is implemented, the permittee must provide an explanation of why not in the Year 1 Annual Report. Refer to Part III.A.3 of the permit for the information that must be included in the explanation (including the alternate BMPs used or planned in lieu of street sweeping). Please provide the title of the attached explanation in Column D and the name of the entity who finalized the explanation in Column E.</i>				
	<b>Frequency of street sweeping</b>				See the December 5 2014
	<b>Total miles swept (per year)</b>				Letter to the FDEP
	<b>Estimated quantity of sweeping material collected (cubic yards)</b>				As noted alternative BMP
	<b>Total nitrogen loadings removed (pounds)</b>				of Public Outreach

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	<b>Total phosphorus loadings removed (pounds)</b>				And Public Works process
	<b>Year 1 ONLY: If have curbs and gutters, attach explanation of why no street sweeping program and the alternate BMPs used or planned</b>				e.g. blowing off areas to help improve water quality
	<p>Annually review (and revise, as needed) and implement the permittee's written standard practices to reduce the pollutants in stormwater runoff from areas associated with road repair and maintenance, and from permittee-owned or operated equipment yards and maintenance shops that support road maintenance activities. Report the number of applicable facilities and the number of inspections conducted for each facility.</p> <p><i>DEP Note: The permittee needs to "customize" this section by listing the names of the applicable facilities in Column B and the number of inspections of each facility in Column C. Add more rows if necessary. If "0" is reported in Column C for the number of inspections conducted and the permittee has one or more applicable facilities, please provide an explanation in Column F for why no inspections were conducted. In addition, if the same facility is applicable under both Parts III.A.3 and III.A.5 of the permit, the same site inspection can count towards both inspection requirements as long as it covers the applicable waste area(s). Be sure to report the site inspection under both Parts III.A.3 and III.A.5.</i></p>				
		<b>Number of Inspections</b>			
	<b>Name of facility #1: Town maintenance facility at 215 Smith Avenue</b>	4	Town of Lake Hamilton SOP	Town of Lake Hamilton Utilities Department	Town's Maintenance Shop
	<b>Name of facility #2:</b>				
	<b>Name of facility #3:</b>				
	<b>Name of facility #4:</b>				
<b>Part III.A.4</b>	<b>Flood Control Projects</b>				
	<p>Report the total number of flood control projects that were constructed by the permittee during the reporting period and the number of those projects that did NOT include stormwater treatment. The permittee shall provide a list of the projects where stormwater treatment was not included with an explanation for each of why it was not. Report on any stormwater retrofit planning activities and the associated implementation of retrofitting projects to reduce stormwater pollutant loads from existing drainage systems that do not have treatment BMPs.</p> <p><i>DEP Note: A "stormwater retrofit project" is one implemented primarily to provide stormwater treatment for areas currently without treatment.</i></p> <p><i>DEP Note: The status of the flood control and retrofit projects should be reported as of the last day of the applicable reporting period. Therefore, there should be no duplication for those reported as planned, for those reported as under construction and for those reported as completed.</i></p> <p><i>DEP Note: If applicable, please provide the title of the attached list of flood control projects that did not include stormwater treatment in Column D and the name of the entity who finalized the list in Column E.</i></p>				
	<b>Flood control projects completed during the reporting period</b>	0			There were 0 flood projects
	<b>Flood control projects completed during the reporting period that did <u>not</u> include stormwater treatment</b>	0			Not applicable as there were 0 flood projects

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	ATTACH a list of the flood control projects that did <u>not</u> include stormwater treatment and an explanation for each of why it was not				"
	Stormwater retrofit projects planned	0			Not applicable as there were 0 retrofit projects
	Stormwater retrofit projects under construction during the reporting period	0			"
	Stormwater retrofit projects completed during the reporting period	0			"
Part III.A.5	Municipal Waste Treatment, Storage, and Disposal Facilities Not Covered by an NPDES Stormwater Permit				
	<p>Annually review (and revise, as needed) and implement the permittee's written procedures for inspections and the implementation of measures to control discharges from the following facilities that are not otherwise covered by an NPDES stormwater permit:</p> <ul style="list-style-type: none"> <li>• Operating municipal landfills;</li> <li>• Municipal waste transfer stations;</li> <li>• Municipal waste fleet maintenance facilities; and</li> <li>• Any other municipal waste treatment, waste storage, and waste disposal facilities.</li> </ul> <p>Report the number of applicable facilities and the number of the inspections conducted for each facility.</p> <p><i>DEP Note: The permittee needs to "customize" this section by listing the names of the applicable facilities in Column B and the number of inspections of each facility in Column C. Add more rows if necessary. If "0" is reported in Column C for the number of inspections conducted and the permittee has one or more applicable facilities, please provide an explanation in Column F for why no inspections were conducted. <b>An applicable facility under Part III.A.5 includes, but is not limited to, those facilities/yards where street sweeping material and/or yard waste are temporary stockpiled, and where solid waste collection vehicles are parked and/or maintained.</b> In addition, if the same facility is applicable under both Parts III.A.3 and III.A.5 of the permit, the same site inspection can count towards both inspection requirements as long as it covers the applicable waste area(s). Be sure to report the site inspection under both Parts III.A.3 and III.A.5.</i></p>				
		Number of Inspections			
	Name of facility #1:	0			The town does not operate
	Name of facility #2:	0			municipal-waste fleet or road-
	Name of facility #3:	0			repair yards which store haz
	Name of facility #4:	0			material or solid waste
Part III.A.6	Pesticides, Herbicides, and Fertilizer Application				
	Continue to require proper certification and licensing by the Florida Department of Agriculture and Consumer Services (FDACS) for all applicators contracted to apply pesticides, herbicides, or fertilizers on permittee-owned property, as well as any permittee personnel employed in the application of these products. Report the number				

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	<p>of permittee personnel applicators and contracted commercial applicators of pesticides and herbicides who are FDACS certified / licensed. Report the number of permittee personnel and contractors who have been trained through the Green Industry BMP Program, and the number of contracted commercial applicators of fertilizer who are FDACS certified / licensed.</p> <p><i>DEP Note: If "0" is reported in Column C for any of the reporting items, please include in Column F an explanation of why training was not provided to / obtained by personnel and contractors during the applicable reporting year, the most recent year that training / certification was previously provided / obtained, and the names of the personnel and contractors previously trained / certified.</i></p>				
	<b>PERSONNEL: Florida Department of Agriculture and Consumer Services (FDACS) certified applicators of pesticides and herbicides</b>	0			Town did not apply any
	<b>CONTRACTORS: FDACS certified/licensed applicators of pesticides and herbicides</b>	0			fertilizer, pesticides,
	<b>CONTRACTORS: FDACS certified/licensed applicators of fertilizer</b>	0			herbicides within it's MS4
	<b>PERSONNEL: Green Industry BMP Program training completed</b>	0			Met FDEP YR2
	<b>CONTRACTORS: Green Industry BMP Program training completed</b>	0			Expectations
	<p>Pursuant to SB 2080 (2009), all local governments are encouraged to adopt a Florida-friendly Landscaping Ordinance similar to the one set forth in the document "Florida-friendly Guidance Models for Ordinances, Covenants and Restrictions." If the broader Florida-friendly ordinance described above is not adopted, then <u>all local governments within the watershed of a nutrient-impaired water body</u> shall adopt the Department's Model Ordinance for Florida-Friendly Fertilizer Use on Urban Landscapes pursuant to SB 494 (2009) or an ordinance that includes all of the requirements set forth in the Model Ordinance. <u>The ordinance shall be adopted within 24 months of the date of permit issuance.</u> Provide a copy of the adopted ordinance with the subsequent Year 1 or Year 2 Annual Report.</p> <p><i>DEP Note: If this provision is not applicable because the permittee is not within the watershed of a nutrient-impaired water body, then please indicate that in Column F, but do not remove this reporting item.</i></p> <p><i>DEP Note: Please provide the title and citation of the ordinance in Column D, and the name of the entity who finalized the ordinance in Column E.</i></p>				
	<b>Year 1 or Year 2 ONLY: Attach copy of adopted Florida-friendly ordinance</b>		Town relies on	County Ordinance	
	<p>During Year 1 of the permit, develop and implement a written public education and outreach program plan to encourage citizens to reduce their use of pesticides, herbicides, and fertilizers. Report on the public education and outreach activities that are performed or sponsored by the permittee within the permittee's jurisdiction to encourage citizens to reduce their use of pesticides, herbicides, and fertilizers, including the type and number of activities conducted, the type and number of materials distributed, the percentage of the population reached by the activities in total, and the number of Web site visits (if applicable). Activities performed under the Florida Yards and Neighborhoods (FYN) program should only be reported if the permittee is contributing funding towards the FYN staff and program within its jurisdiction.</p> <p><i>DEP Note: The permittee should "customize" the list of public outreach activities by removing items or adding items to the list below as appropriate to their particular public outreach program. However, the reporting item of "Estimated percentage of the population reached by the activities in total" must remain. The permittee may add more specifics to the reporting items, such as the name of the brochure or newsletter distributed. If "0" is reported in Column C for all the reporting items please include in Column F an explanation for why no outreach was performed.</i></p> <p><i>DEP Note: Polk County is to report the public education and outreach activities that it performed county-wide (and not just in the unincorporated areas of Polk County). The co-permittees are to report just the public education and outreach activities that they performed.</i></p> <p><i>DEP Note: Indicate under Column E "Entity Performing the Activity" if FYN or IFAS is performing any of the reported public education and outreach activities. In addition, please complete the following line:</i></p>				



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	<b>FYN PROGRAM FUNDING: Permittee Provides Funding? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Amount of Funding = \$</b>				
	Estimated percentage of the population reached by the activities in total	30%	Estimate based on Town & County effort	Town of Lake Hamilton	
	Brochures/Flyers/Fact sheets distributed	100	NPDES Compliance binder and Town Hall	Town of Lake Hamilton	
	FYN: Brochure/Flyers/Fact sheets distributed			FYN	
	Neighborhood presentations: Number conducted				
	FYN: Neighborhood presentations: Number of participants			FYN	
	FYN: Neighborhood presentations: Number conducted			FYN	
	Neighborhood presentations: Number of participants				
	Newspapers & newsletters: Number of articles/notices published				
	Newsletters: Number of newsletters distributed				
	Public displays (e.g., kiosks, storyboards, posters, etc.)				
	FYN: Public displays (e.g., kiosks, storyboards, posters, etc.)			FYN	
	Radio or television Public Service Announcements (PSAs)	Please refer to PC records.	PGTV playback server – Polk County	Polk County Communications Division	
	FYN: Radio or television Public Service Announcements (PSAs)			FYN	
	School presentations: Number conducted				
	School presentations: Number of participants				
	FYN: School presentations: Number conducted			FYN	
	FYN: School presentations: Number of participants			FYN	
	Seminars/Workshops: Number conducted				
	Seminars/Workshops: Number of participants				
	FYN: Seminars/Workshops: Number conducted			FYN	
	FYN: Seminars/Workshops: Number of participants			FYN	
	Special events: Number conducted				
	Special events: Number of participants				
	FYN: Special events: Number conducted			FYN	
	FYN: Special events: Number of participants			FYN	
	Web Site: Number of hits / visitors to the stormwater-related pages				
Part III.A.7.a	<b>Illicit Discharges and Improper Disposal — Inspections, Ordinances, and Enforcement Measures</b>				
	Where applicable, strengthen the legal authority to conduct inspections, conduct monitoring, control illicit discharges, illicit connections, illegal dumping and spills into the MS4 and to require compliance with conditions in ordinances, permits, contracts, and orders. Report amendments, as needed.				
	<i>DEP Note: If applicable, please provide the title of the attached report in Column D and the name of the entity who finalized the report in Column E.</i>				

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	<b>ATTACH a report on any amendments to the applicable legal authority</b>																																		
<b>Part III.A.7.c</b>	<b>Illicit Discharges and Improper Disposal — Investigation of Suspected Illicit Discharges and/or Improper Disposal</b>																																		
	<p>During Year 1 of the permit, develop and implement a written proactive inspection program plan for identifying and eliminating sources of illicit discharges, illicit connections, or dumping to the MS4. Report on the proactive inspection program, including the number of inspections conducted, the number of illicit activities found, and the number and type of enforcement actions taken.</p> <p><i>DEP Note: If "0" is reported in Column C for the first reporting item, please include an explanation in Column F for why no proactive inspections were performed. In addition, the permittee should re-word the "NOVs / warning letters / citations issued" reporting item to more accurately reflect its particular initial enforcement activity, if necessary.</i></p> <p><i>DEP Note: Proactive inspections may include, for example, suspect areas (e.g., industrial areas), commercial businesses (e.g., restaurants, car washes, service stations, laundries / dry cleaners, auto body shops, mobile carpet cleaners) or temporary activities (e.g., special events / fairs / circus) that would not otherwise be inspected during routine inspections and maintenance of the MS4, in association with high risk industrial facilities or construction sites, or in response to citizen or staff reports.</i></p> <p><i>DEP Note: Polk County is to report the ONLY the proactive inspections it performed in the unincorporated areas of Polk County – any proactive inspections it performed in the co-permittees' jurisdictions are to be reported by the co-permittees. Each co-permittee is to report the Polk County proactive inspections in their jurisdiction separately from the proactive inspections that the co-permittee performed itself.</i></p> <p><i>DEP Note: Refer to Part III.A.7.c of the permit for what must be included in the written proactive inspection program plan. Please provide the title of the attached plan in Column D and the name of the entity who finalized the plan in Column E.</i></p> <table border="1"> <tr> <td><b>Proactive inspections performed by Polk County for suspected illicit discharges / connections / dumping</b></td><td>0</td><td></td><td></td><td>See attached</td></tr> <tr> <td><b>Proactive inspections performed by the permittee for suspected illicit discharges / connections / dumping</b></td><td>4</td><td>NPDES Compliance Binder - Lake Hamilton SOP</td><td>Town of Lake Hamilton</td><td>Inspection checklist for</td></tr> <tr> <td><b>Illicit discharges / connections / dumping found during a proactive inspection</b></td><td>0</td><td></td><td></td><td>the routine</td></tr> <tr> <td><b>Notices of Violation (NOVs) / warning letters / citations issued for illicit discharges / connections / dumping found during a proactive inspection</b></td><td>0</td><td></td><td></td><td>Inspection of the MS4</td></tr> <tr> <td><b>Fines issued for illicit discharges / connections / dumping found during a proactive inspection</b></td><td>0</td><td></td><td></td><td>With Proactive Inspections</td></tr> <tr> <td><b>Year 1 ONLY: Attach the written proactive inspection program plan</b></td><td></td><td></td><td></td><td></td></tr> </table> <p>Annually review (and revise, as needed) and implement the permittee's written procedures to conduct reactive investigations to identify and eliminate the source(s) of illicit discharges, illicit connections or improper disposal to the MS4, based on reports received from permittee personnel, contractors, citizens, or other entities regarding suspected illicit activity. Report on the reactive investigation program as it relates to responding to reports of suspected illicit discharges, including the number of reports received, the number of investigations conducted, the number of illicit activities found, and the number and type of enforcement actions taken.</p> <p>If a permittee relies on Polk County to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Polk County shall make available) the necessary annual report information from the County.</p>					<b>Proactive inspections performed by Polk County for suspected illicit discharges / connections / dumping</b>	0			See attached	<b>Proactive inspections performed by the permittee for suspected illicit discharges / connections / dumping</b>	4	NPDES Compliance Binder - Lake Hamilton SOP	Town of Lake Hamilton	Inspection checklist for	<b>Illicit discharges / connections / dumping found during a proactive inspection</b>	0			the routine	<b>Notices of Violation (NOVs) / warning letters / citations issued for illicit discharges / connections / dumping found during a proactive inspection</b>	0			Inspection of the MS4	<b>Fines issued for illicit discharges / connections / dumping found during a proactive inspection</b>	0			With Proactive Inspections	<b>Year 1 ONLY: Attach the written proactive inspection program plan</b>				
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**SECTION VII. STORMWATER MANAGEMENT PROGRAM (SWMP) SUMMARY TABLE**

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	<p><i>DEP Note: Polk County is to report the ONLY the reactive inspections it performed in the unincorporated areas of Polk County – any reactive inspections it performed in the co-permittees' jurisdictions are to be reported by the co-permittees. Each co-permittee is to report the Polk County reactive inspections in their jurisdiction separately from the reactive inspections that the co-permittee performed itself.</i></p> <p><i>DEP Note: If the number of reports received differs from the number of reactive investigations, please provide an explanation for the discrepancy in Column F. In addition, the permittee should re-word the "NOVs / warning letters / citations issued" reporting item to more accurately reflect its particular initial enforcement activity, if necessary.</i></p>				
	Reports received by Polk County of suspected illicit connections / discharges / dumping received	0			
	Reports received by the permittee of suspected illicit connections / discharges / dumping received	0			
	Reactive investigations of reports of suspected illicit discharges/ connections / dumping	0			
	Illicit discharges / connections / dumping found during a reactive investigation	0			
	Notices of Violation (NOVs) / warning letters / citations issued for illicit discharges / connections / dumping found during a reactive investigation	0			
	Fines issued for illicit discharges / connections / dumping found during a reactive investigation	0			
	<p>During Year 1 of the permit, develop and implement a written plan for the training of all appropriate permittee personnel (including field crews, fleet maintenance staff, and inspectors) <u>and contractors</u> to identify and report conditions in the stormwater facilities that may indicate the presence of illicit discharges/ connections/dumping to the MS4. Refresher training shall be provided annually. Report the type of training activities, and the number of permittee personnel and contractors trained (both in-house and outside training).</p> <p><i>DEP Note: If "0" is reported for either reporting item, please include in Column F an explanation of why training was not provided to / obtained by personnel and contractors during the applicable reporting year, the most recent year that training was previously provided / obtained, and the names of the personnel and contractors previously trained.</i></p>				
		<b>Initial Training</b>	<b>Refresher Training</b>		
	<b>Personnel trained</b>	0			Reporting "0" for this period, although Town has gotten training after this reporting period.
	<b>Contractors trained</b>	0			Contractors will be expected to be certified in this area.
<b>Part III.A.7.d</b>	<b>Illicit Discharges and Improper Disposal — Spill Prevention and Response</b>				

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Permit Citation/ SWMP Element	Permit Requirement/Quantifiable SWMP Activity	Number of Activities Performed	Documentation / Record	Entity Performing the Activity	Comments
	<p>Annually review (and revise, as needed) and implement the permittee's written spill-prevention/spill-response plan and procedures to prevent, contain, and respond to spills that discharge into the MS4. Report on the spill prevention and response activities, including the number of spills addressed. If a permittee relies on the Polk County Fire Rescue or Fire Services Division to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Polk County Fire Rescue/Fire Services Division shall make available) the necessary annual report information from the County.</p> <p><i>DEP Note: The permittee may report the number of hazardous material spills separately from the number of non-hazardous material spills, <u>or</u> report one combined number, to more accurately reflect its tracking of these spills.</i></p>				
	<b>Hazardous and non-hazardous material spills responded to</b>	0			
	<p>During Year 1 of the permit, develop and implement a written plan for the training of all appropriate permittee personnel (including field crews, firefighters, fleet maintenance staff and inspectors) <u>and</u> contractors on proper spill prevention, containment, and response techniques and procedures. Refresher training shall be provided annually. Report the type of training activities, and the number of permittee personnel and contractors trained (both in-house and outside training).</p> <p><i>DEP Note: If "0" is reported for either reporting item, please include in Column F an explanation of why training was not provided to / obtained by personnel and contractors during the applicable reporting year, the most recent year that training was previously provided / obtained, and the names of the personnel and contractors previously trained. Due to Town staff turnover, training has not been conducted. The Town has already selected several training opportunities for staff in the next reporting period.</i></p>				
		<b>Initial Training</b>	<b>Refresher Training</b>		
	<b>Personnel trained</b>	0			Reporting "0" for this period, although Town has gotten training after this reporting period
	<b>Contractors trained</b>	0			Contractors will be expected to be certified in this area.
<b>Part III.A.7.e</b>	<b>Illicit Discharges and Improper Disposal — Public Reporting</b>				
	<p>During Year 1 of the permit, develop and implement a written public education and outreach program plan to promote, publicize, and facilitate public reporting of the presence of illicit discharges and improper disposal of materials into the MS4. Report on the public education and outreach activities that are performed or sponsored by the permittee within the permittee's jurisdiction to encourage the public reporting of suspected illicit discharges and improper disposal of materials, including the type and number of activities conducted, the type and number of materials distributed, the percentage of the population reached by the activities in total, and the number of Web site visits (if applicable).</p> <p><i>DEP Note: The permittee should "customize" the list of public outreach activities by removing items or adding items to the list below as appropriate to their particular public outreach program. However, the reporting item of "Estimated percentage of the population reached by the activities in total" must remain. The permittee may add more specifics to the reporting items, such as the name of the brochure or newsletter distributed. If "0" is reported in Column C for all the reporting items, please include in Column F an explanation for why no outreach was performed.</i></p>				

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Permit Citation/ SWMP Element	Permit Requirement/Quantifiable SWMP Activity	Number of Activities Performed	Documentation / Record	Entity Performing the Activity	Comments
	<i>DEP Note: Polk County is to report the public education and outreach activities that it performed county-wide (and not just in the unincorporated areas of Polk County). The co-permittees are to report just the public education and outreach activities that they performed.</i>				
	Estimated percentage of the population reached by the activities in total	10%	Estimate based on Town & County effort	Estimate based on Town & County effort	Website Education is being considered
	Publicize the Polk County or local Pollution Complaint Hotline Brochures/Flyers/Fact sheets distributed	100	NPDES Compliance Binder and Town Hall	Town of Lake Hamilton	Website Education is being considered
	Neighborhood presentations: Number conducted				
	Neighborhood presentations: Number of participants				
	Newspapers & newsletters: Number of articles/notices published				
	Newsletters: Number of newsletters distributed				
	Public displays (e.g., kiosks, storyboards, posters, etc.)				
	Radio or television Public Service Announcements (PSAs)				
	School presentations: Number conducted				
	School presentations: Number of participants				
	Seminars/Workshops: Number conducted				
	Seminars/Workshops: Number of participants				
	Special events: Number conducted				
	Special events: Number of participants				
	Web Site: Number of visitors to the stormwater-related pages				
Part III.A.7.f	<b>Illicit Discharges and Improper Disposal — Oils, Toxics, and Household Hazardous Waste Control</b>				
	<p>During Year 1 of the permit, develop and implement a written public education and outreach program plan to encourage the proper use and disposal of used motor vehicle fluids, leftover hazardous household products, and lead acid batteries. On a routine basis, inform the public of the locations of collection facilities for these materials, including a description of the types of materials accepted and the hours of operation. Report on the public education and outreach activities that are performed or sponsored by the permittee within the permittee's jurisdiction to encourage the proper use and disposal of oils, toxics, and household hazardous waste, including the type and number of activities conducted, the type and number of materials distributed, the amount of waste collected / recycled / properly disposed, the percentage of the population reached by the activities in total, and the number of Web site visits (if applicable).</p> <p><i>DEP Note: The permittee should "customize" the list of public outreach activities by removing items or adding items to the list below as appropriate to their particular public outreach program. However, the reporting items of "Estimated percentage of the population reached by the activities in total" and "Publicize the Polk County Home Chemical Collection Program" must remain. The permittee may add more specifics to the reporting items, such as the name of the brochure or newsletter distributed. If "0" is reported in Column C for all the reporting items, please include in Column F an explanation for why no outreach was performed.</i></p> <p><i>DEP Note: Polk County is to report the public education and outreach activities that it performed county-wide (and not just in the unincorporated areas of Polk County). The co-permittees are to report just the public education and outreach activities that they performed.</i></p>				

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Permit Citation/ SWMP Element	Permit Requirement/Quantifiable SWMP Activity	Number of Activities Performed	Documentation / Record	Entity Performing the Activity	Comments
	Estimated percentage of the population reached by the activities in total	20%	Estimate based on Town & County effort	Town of Lake Hamilton	Website Education is being considered
	Publicize the Polk County Home Chemical Collection Program Brochures/Flyers/Fact sheets distributed	100	NPDES Compliance binder and Town Hall	Town of Lake Hamilton	Website Education is being considered
	Household Hazardous Waste (HHW) Collection Day: Events				
	HHW Collection Day: Amount of waste collected/recycled/properly disposed (tons)				
	Neighborhood presentations: Number conducted				
	Neighborhood presentations: Number of participants				
	Newspapers & newsletters: Number of articles/notices published				
	Newsletters: Number of newsletters distributed				
	Public displays (e.g., kiosks, storyboards, posters, etc.)				
	Radio or television Public Service Announcements (PSAs)				
	School presentations: Number conducted				
	School presentations: Number of participants				
	Seminars/Workshops: Number conducted				
	Seminars/Workshops: Number of participants				
	Special events: Number conducted				
Special events: Number of participants					
Storm sewer inlets newly marked/replaced					
Web Site: Number of visitors to the stormwater-related pages					
Part III.A.7.g	<b>Illicit Discharges and Improper Disposal — Limitation of Sanitary Sewer Seepage</b>  Annually review (and revise, as needed) and implement the permittee's written procedures to reduce or eliminate <u>sanitary wastewater contamination into the MS4</u> , including discharges to the MS4 from sanitary sewer overflows (SSOs) and from inflow/ infiltration from collection / transmission systems and/or septic tank systems. Advise the appropriate utility owner of a violation if constituents common to wastewater contamination are discovered in the MS4. Report on the type and number of activities undertaken to reduce or eliminate SSOs and inflow/ infiltration, the number of SSOs or inflow / infiltration incidents found and the number resolved, and the name of the owner of the sanitary sewer system within the permittee's jurisdiction.  <u>DEP Note:</u> The permittee needs to "customize" this section as it pertains to the type of activities undertaken to reduce or eliminate SSOs and inflow / infiltration into the MS4. The first three reporting items below are <u>examples</u> .  <u>DEP Note:</u> The permittee should contact the appropriate authorities for accurate reporting information, such as the sanitary sewer system operator who is responsible for investigating and eliminating SSOs and the local health department who is responsible for permitting/overseeing septic tank systems.  <u>DEP Note:</u> Report only the SSOs and inflow / infiltration incidents <u>into the MS4</u> .				

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A.	B.	C.	D.	E.	F.
Permit Citation/ SWMP Element	Permit Requirement/Quantifiable SWMP Activity	Number of Activities Performed	Documentation / Record	Entity Performing the Activity	Comments
	Activity to reduce/eliminate SSOs and inflow / infiltration: Repair / lining of sanitary sewer system	0	There is no Sanitary Sewage within the Town's MS4	There is no Sanitary Sewage within the Town's MS4	There is no Sanitary Sewage within the Town's MS4
	Activity to reduce/eliminate SSOs and inflow / infiltration: Septic systems removed	0	""	""	""
	Activity to reduce/eliminate SSOs and inflow / infiltration: Emergency generator added	0	""	""	""
	SSO incidents discovered	0	""	""	""
	SSO incidents resolved	0	""	""	""
	Inflow/ infiltration incidents discovered	0	""	""	""
	Inflow/ infiltration incidents resolved	0	""	""	""
	Name of owner of the sanitary sewer system	The town does not own any sanitary sewer			
Part III.A.8.a	Industrial and High-Risk Runoff — Identification of Priorities and Procedures for Inspections				
	<p>Continue to maintain an up-to-date inventory of all existing high risk facilities discharging into the permittee's MS4. The inventory shall identify the outfall and surface water body into which each high risk facility discharges. For the purposes of this permit, high risk facilities include:</p> <ul style="list-style-type: none"><li>• Operating municipal landfills;</li><li>• Hazardous waste treatment, storage, disposal and recovery facilities;</li><li>• Facilities that are subject to EPCRA Title III, Section 313 (also known as the Toxics Release Inventory (TRI) maintained by the U.S. EPA); and</li><li>• Any other industrial or commercial discharge that the permittee determines is contributing a substantial pollutant loading to the permittee's MS4. This could include facilities identified through the proactive inspection program as per Part III.A.7.c of the permit.</li></ul> <p>Report on the high risk facilities inventory, including the type and total number of high risk facilities and the number of facilities newly added each year. If a permittee relies on Polk County to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Polk County shall make available) the necessary annual report information from the County.</p> <p><i>DEP Note: The TRI is updated every spring / summer by the U.S. EPA at <a href="http://www.epa.gov/triexplorer">www.epa.gov/triexplorer</a>. Select "Facility" on the left, chose your Geographic Location, and then select "Generate Report." Please indicate in Column F when (month / year) you last checked EPA's TRI for applicable facilities.</i></p> <p>During Year 1 of the permit, develop and implement a written plan for conducting inspections of high risk facilities to determine compliance with all appropriate aspects of the stormwater program. While the permittee may determine the order and frequency of the inspections, the permittee shall inspect each identified facility at least once during the permit term; however, facilities identified as high risk due to the findings of the proactive inspection program as per Part III.A.7.c of the permit shall be inspected annually. Report on the high risk facilities inspection program, including the number of inspections conducted and the number and type of enforcement actions taken. If a permittee relies on Polk County to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Polk County shall make available) the necessary annual report information from the County.</p> <p><i>DEP Note: If "0" is reported for the number of inspections conducted and the permittee has one or more high risk facilities, please provide an explanation in Column F for why no inspections were conducted. In addition, the permittee should re-word the "NOVs / warning letters / citations issued" reporting item to more accurately reflect its particular initial enforcement activity, if necessary.</i></p>				

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Permit Citation/ SWMP Element	Permit Requirement/Quantifiable SWMP Activity	Number of Activities Performed	Documentation / Record	Entity Performing the Activity	Comments																																		
	<p><i>DEP Note: Polk County is to report ONLY the inventory of high risk facilities in the unincorporated areas of Polk County – the inventory of high risk facilities located in the co-permittees' jurisdictions are to be reported by the co-permittees. Likewise, the County is to report ONLY the high risk facility inspections it performed in the unincorporated areas of Polk County – any high risk facility inspections it performed in the co-permittees' jurisdictions are to be reported by the co-permittees. Each co-permittee is to obtain the necessary information from Polk County that pertains to its jurisdiction.</i></p>																																						
		<table border="1"> <thead> <tr> <th rowspan="2">Number of Facilities</th><th rowspan="2">Number of Inspections</th><th colspan="2">For violations discovered during a high risk inspection</th></tr> <tr> <th>Fines issued</th><th>Notices of Violation (NOVs) /warning letters/citations issued</th></tr> </thead> <tbody> <tr> <td>Total high risk facilities</td><td>0</td><td></td><td></td></tr> <tr> <td>New high risk facilities added to the inventory during the current reporting period</td><td>0</td><td></td><td></td></tr> <tr> <td>Operating municipal landfills</td><td>0</td><td></td><td></td></tr> <tr> <td>Hazardous waste treatment, storage, disposal and recovery (HWTSDR) facilities</td><td>0</td><td></td><td></td></tr> <tr> <td>EPCRA Title III, Section 313 facilities (that are not landfills or HWTSDR facilities)</td><td>0</td><td></td><td></td></tr> <tr> <td>Facilities determined as high risk by the permittee through the proactive inspections as per Part III.A.7.c</td><td>0</td><td></td><td></td></tr> <tr> <td>Other facilities determined as high risk by the permittee (that are <u>not</u> facilities identified through the proactive inspections)</td><td>0</td><td></td><td></td></tr> </tbody> </table>	Number of Facilities	Number of Inspections	For violations discovered during a high risk inspection		Fines issued	Notices of Violation (NOVs) /warning letters/citations issued	Total high risk facilities	0			New high risk facilities added to the inventory during the current reporting period	0			Operating municipal landfills	0			Hazardous waste treatment, storage, disposal and recovery (HWTSDR) facilities	0			EPCRA Title III, Section 313 facilities (that are not landfills or HWTSDR facilities)	0			Facilities determined as high risk by the permittee through the proactive inspections as per Part III.A.7.c	0			Other facilities determined as high risk by the permittee (that are <u>not</u> facilities identified through the proactive inspections)	0					
Number of Facilities	Number of Inspections	For violations discovered during a high risk inspection																																					
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Facilities determined as high risk by the permittee through the proactive inspections as per Part III.A.7.c	0																																						
Other facilities determined as high risk by the permittee (that are <u>not</u> facilities identified through the proactive inspections)	0																																						
Part III.A.8.b	<b>Industrial and High-Risk Runoff — Monitoring for High Risk Industries</b>																																						
	<p>Sampling of the discharge to the stormwater system may be required on an as-needed basis in the event that inspections of high-risk facilities disclose suspected illicit discharges to the MS4. New high-risk industrial facilities as defined in 40 CFR 122.26(d)(2)(iv)(C) must be evaluated to determine if the new discharge is contributing a substantial pollutant load to the MS4. The evaluation may include site-specific monitoring. If a permittee relies on Polk County to conduct these activities on its behalf, the permittee shall obtain (and, upon request, Polk County shall make available) the necessary annual report information from the County. Report the number of high risk facilities sampled.</p> <p><i>DEP Note: Polk County is to report ONLY the number of high risk facilities in the unincorporated areas of Polk County that were sampled – the high risk facilities located in the co-permittees' jurisdictions that were sampled by the County are to be reported by the co-permittees.</i></p>																																						
	High risk facilities sampled																																						
Part III.A.9.a	<b>Construction Site Runoff — Site Planning and Non-Structural and Structural Best Management Practices</b>																																						



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	Continue to implement the local codes or land development regulations and the written pre-construction site plan review procedures that require the use and maintenance of appropriate structural and non-structural erosion and sedimentation controls during construction to reduce the discharge of pollutants to the MS4. Report the number of permittee and private pre-construction site plans <u>reviewed for stormwater, erosion, and sedimentation controls</u> , and the number approved.				
	<i>DEP Note: Please provide an explanation in Column F for any "0" reported in Column C.</i>				
	PERMITTEE SITES: Construction site plans reviewed	0			
	PERMITTEE SITES: Construction site plans approved	0			
	PRIVATE SITES: Construction site plans reviewed	7	Building Permit	Building official and Planner	6 single family and 1 warehouse
	PRIVATE SITES: Construction site plans approved	7	"	"	"
	Annually review (and revise, as needed) and implement the permittee's written procedures to notify all new development/ redevelopment permit applicants of the need to obtain all required stormwater permits. Report the number of new development/redevelopment permit applicants notified of the ERP and CGP, and the number of applicants who confirmed ERP and CGP coverage.				
	<i>DEP Note: Please provide an explanation in Column F for any "0" reported in Column C. If the number of applicants notified of ERP or CGP coverage is less than the number of construction site plans reviewed, please provide an explanation for the discrepancy in Column F.</i>				
	Notified of ERP stormwater permit requirements	0			The Town
	Confirmed ERP coverage	0			Requires
	Notified of CGP stormwater permit requirements	0			ERPs and CGP
	Confirmed CGP coverage	0			Coverage when applicable
Part III.A.9.b	<b>Construction Site Runoff — Inspection and Enforcement</b>				
	As an attachment to the Year 1 Annual Report, the permittee shall submit a written plan that details the standard operating procedures for implementation of the stormwater, erosion and sedimentation inspection program for construction sites discharging stormwater to the MS4. The permittee shall implement the plan for inspecting construction sites <u>immediately upon written approval by the Department</u> . Prior to Department approval, the permittee shall continue to perform inspections in accordance with its previously developed construction site inspection procedures. Report on the inspection program for privately-operated and permittee-operated construction sites, including the number of active construction sites during the reporting year, the number of inspections of active construction sites, the percentage of active construction sites inspected, and the number and type of enforcement actions / referrals taken.				
	<i>DEP Note: If "0" is reported in Column C for the number of inspections conducted, please provide an explanation in Column F of why no inspections were conducted. If the number of inspections reported is equal to or less than the number of active construction sites, or the percentage inspected is less than 100%, please provide an explanation in Column F. In addition, the permittee should re-word the "NOVs / warning letters / citations issued" reporting item to more accurately reflect its particular initial enforcement activity, if necessary.</i>				
	<i>DEP Note: Refer to Part III.A.9.b of the permit for what must be included in the construction site inspection program plan. Please provide the title of the attached plan in Column D and the name of the entity who finalized the plan in Column E.</i>				
	PERMITTEE SITES: Active construction sites	0			Inspections
	PERMITTEE SITES: Inspections of active construction sites for proper stormwater, erosion and sedimentation BMPs	0			would have occurred
	PERMITTEE SITES: Percentage of active construction sites inspected	0			If there was
	PRIVATE SITES: Active construction sites	0			construction

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	<b>PRIVATE SITES: Inspections of active construction sites for proper stormwater, erosion and sedimentation BMPs</b>	0							
	<b>PRIVATE SITES: Percentage of active construction sites inspected</b>	0							
	<b>Notices of Violation (NOVs)/warning letters/citations issued</b>	0							
	<b>Stop Work Orders issued</b>	0							
	<b>Fines issued</b>	0							
	<b>Year 1 ONLY: Attach the written construction site inspection program plan</b>								
<b>Part III.A.9.c</b>	<b>Construction Site Runoff — Site Operator Training</b>								
	<p>During Year 1 of the permit, develop and implement a written plan for stormwater training/outreach for construction site plan reviewers, site inspectors and site operators. Provide training for permittee personnel (employed by <u>or under contract with</u> the permittee) involved in the site plan review, inspection or construction of stormwater management, erosion, and sedimentation controls. Also provide training for private construction site operators. All permittee inspectors (employed by or under contract with the permittee) of construction sites shall be certified through the Florida Stormwater, Erosion and Sedimentation Control Inspector Training program, or an equivalent program approved by the Department. Refresher training shall be provided annually. Report the type of training activities, the number of inspectors, site plan reviewers and site operators trained (both in-house and outside training), and the number of private construction site operators trained by the permittee.</p> <p><i>DEP Note: If "0" is reported for any of these reporting items, please include in Column F an explanation of why training was not provided to / obtained by the permittee's staff and private construction site operators during the applicable reporting year.</i></p> <p><i>DEP Note: The permittee should report only the number of staff and private construction site operators trained / certified during the applicable reporting year, and then note in Column F the number of staff who were previously trained / certified. Private site operator training can include pre-construction meetings.</i></p>								
		<b>Inspector Certification Training</b>	<b>Non-inspector Initial Training (non-certification)</b>	<b>Refresher Training</b>					
	<b>Permittee construction site inspectors</b>	1		0				Haines City and the Town	See the attached ILA as requested
	<b>Permittee construction site plan reviewers</b>		1			Training Certifications obtained by the Town during Yr 4		Haines City and Town	The site plan reviewer has recently become certified as an Erosion and Sedimentation Control Inspector
	<b>Permittee construction site operators</b>		0						Contractors will be expected to be certified in this area.
	<b>Private construction site operators</b>		0						"

## SECTION VIII. EVALUATION OF THE STORMWATER MANAGEMENT PROGRAM (SWMP)

A.	Permit Citation/ SWMP Element	SWMP EVALUATION
	<b>Part II.A.1 Structural control inspection and maintenance</b>	Strengths: Town is increasing its funding of NPDES activities and progress is being made with training in this area. Note: The Town has very permeable soils which reduce the potential of runoff and pollutant entrainment in runoff to the MS4.
		Weaknesses: The town has generally inspected its system but has not kept detailed documentation.
		SWMP Revisions to address deficiencies: The Town staff will enhance its recording activities.
	<b>Part II.A.2 Significant redevelopment</b>	Strengths: Town is increasing its funding of NPDES activities and progress is being made with training in this area. Note: The Town has very permeable soils which reduce the potential of runoff and pollutant entrainment in runoff to the MS4.
		Weaknesses: The Town of Lake Hamilton did not have updated training for this reporting period but has since obtained training for better awareness, review and inspection capacity.
		SWMP Revisions to address deficiencies: The Town staff has planned for training during the reporting period and has since obtained training for better awareness, review and inspection capacity. The town will enhance its recording activities.
	<b>Part II.A.3 Roadways</b>	Strengths: Town is increasing its funding of NPDES activities and progress is being made to better assess quantities of material collected.
		Weaknesses: The Town of Lake Hamilton did not have updated training for this reporting period but has since obtained training for better awareness, review and inspection capacity.
		SWMP Revisions to address deficiencies: The Town staff will enhance its recording activities.
	<b>Part II.A.4 Flood control</b>	Strengths: Treatment is required as a part of new development project improvements in open sub basins which discharge. The Town has very permeable soils which reduce the potential of runoff and pollutant entrain in runoff.
		Weaknesses: The Town of Lake Hamilton did not have updated training for this reporting period but has since obtained training for better awareness, review and inspection capacity.
		SWMP Revisions to address deficiencies: Revisions to address deficiencies: The Town of Lake Hamilton is currently investigating opportunities to generate a stormwater master plan. Not applicable to this reporting period but the Town is proceeding with mapping and inventory work. The Town of Lake Hamilton did not have updated training for this reporting period but has since obtained training for better awareness, review and inspection capacity.
	<b>Part II.A.5 Waste TSD Facilities</b>	Strengths: See comment in this section above.
		Weaknesses:
		SWMP Revisions to address deficiencies: The Town of Lake Hamilton did not have updated training for this reporting period but has since obtained training for better awareness, review and inspection capacity for activities in the MS4
	<b>Part II.A.6</b>	Strengths: The Town of Lake Hamilton does not apply Pesticides, Herbicides, or fertilizer within the public MS4. Note: The Town has very permeable soils which reduce the potential of runoff and pollutant entrainment in runoff.

## SECTION VIII. EVALUATION OF THE STORMWATER MANAGEMENT PROGRAM (SWMP)

	<b>Pesticide, herbicide, fertilizer application</b>	Weaknesses: Not applicable
		SWMP Revisions to address deficiencies: Progress is being made with updated training for this reporting period and has after this reporting period obtained training for better awareness, review and inspection capacity.
	<b>Part II.A.7 Illicit Discharge Detection and Elimination</b>	Strengths: The town has certified employees with background in detecting and elimination of discharges.
		Weaknesses: The Town needs up to date refresher training.
	<b>Part II.A.8 High Risk Industry Runoff</b>	SWMP Revisions to address deficiencies: Town is increasing its funding of NPDES activities. Progress is being made with updated training for this reporting period and has after this reporting period obtained training for better awareness, review and inspection capacity.
		Strengths: Known HRFs do not exist within the Town or discharge stormwater To the Town's
		Weaknesses:
		SWMP Revisions to address deficiencies: Town is increasing its funding of NPDES activities and progress is being made with updated training for this reporting period and has after this reporting period obtained training for better awareness, review and inspection capacity.
	<b>Part II.A.9 Construction Site Runoff</b>	Strengths: Control of sediments and erosion is required as a part of project improvements. The Town has very permeable soils which reduce the potential of runoff and pollutant entrainment in runoff.
		Weaknesses: The Town needs to perform its own reviews in lieu of the City of Haines City.
		SWMP Revisions to address deficiencies: Town is increasing its funding of NPDES activities and progress is being made with updated training for this reporting period and has after this reporting period obtained training for better awareness, review and inspection capacity.

## SECTION IX. CHANGES TO THE STORMWATER MANAGEMENT PROGRAM (SWMP) ACTIVITIES (Not Applicable In Year 4)

<b>A.</b>	<b>Permit Citation/ SWMP Element</b>	<b>Proposed Changes to the Stormwater Management Program Activities Established as Specific Requirements Under Part III.A of the Permit (Including the Rationale for the Change) — REQUIRES DEP APPROVAL PRIOR TO CHANGE IF PROPOSING TO REPLACE OR DELETE AN ACTIVITY.</b> <i>DEP Note: There may be changes deemed necessary after developing / reviewing your plans and SOPs as per Part III.A of the permit, after completing your SWMP evaluation as per Part VI.B.2 of the permit, or due to a TMDL / BMAP as per Part VIII.B of the permit.</i>
		As noted above the Town is improving its activities and increasing its funding for this program.
<b>B.</b>	<b>Permit Citation/ SWMP Element</b>	<b>Changes to the Stormwater Management Program Activities NOT Established as Specific Requirements Under Part III.A of the Permit (Including the Rationale for the Change)</b> <i>DEP Note: There may be changes deemed necessary after developing / reviewing your plans and SOPs as per Part III.A of the permit, after completing your SWMP evaluation as per Part VI.B.2 of the permit, or due to a TMDL / BMAP as per Part VIII.B of the permit.</i>
		N/A

## CHECKLIST A: ATTACHMENTS TO BE SUBMITTED WITH THE ANNUAL REPORTS

Below is a list of items required by the permit that may need to be attached to the annual report. Please check the appropriate box to indicate whether the item is attached or is not applicable for the current reporting period. Please provide the number and the title of the attachments in the blanks provided.

Attached	N/A	Rule / Permit Citation	Required Attachment	Attachment Number	Attachment Title
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part II.F	<b>EACH ANNUAL REPORT:</b> If program resources have decreased from the previous year, a discussion of the impacts on the implementation of the SWMP.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part III.A.1	<b>EACH ANNUAL REPORT:</b> An explanation of why the minimum inspection frequency in Table II.A.1.a was not met, if applicable.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part III.A.4	<b>EACH ANNUAL REPORT:</b> A list of the flood control projects that did <u>not</u> include stormwater treatment and an explanation for each of why it did not, if applicable.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part III.A.7.a	<b>EACH ANNUAL REPORT:</b> A report on amendments / changes to the legal authority to control illicit discharges, connections, dumping, and spills, if applicable.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part V.B.9	<b>EACH ANNUAL REPORT:</b> Reporting and assessment of monitoring results. <b>[Also addressed in Section III of the Annual Report Form]</b>		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part VI.B.2	<b>EACH ANNUAL REPORT:</b> An evaluation of the effectiveness of the SWMP in reducing pollutant loads discharged from the MS4 that, <u>at a minimum</u> , must include responses to the questions listed in the permit.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part VIII.B.3.e	<b>EACH ANNUAL REPORT:</b> A status report on the implementation of the requirements in this section of the permit and on the estimated load reductions that have occurred for the pollutant(s) of concern.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part VIII.B.4.f	<b>EACH ANNUAL REPORT after approval of the BPCP:</b> The status of the implementation of the Bacterial Pollution Control Plan (BPCP).		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part III.A.1	<b>YEAR 1:</b> An inventory of all known major outfalls and a map depicting the location of the major outfalls (hard copy or CD-ROM).		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part III.A.3	<b>YEAR 1:</b> If have curbs and gutters but no street sweeping program, an explanation of why no street sweeping program and the alternate BMPs used or planned.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part III.A.6	<b>YEAR 1 or YEAR 2:</b> A copy of the adopted Florida-friendly Ordinance, if applicable.		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.7.c	<b>YEAR 1:</b> A proactive illicit discharge / connection / dumping inspection program plan.	1	Attachment A
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part III.A.9.b	<b>YEAR 1:</b> A construction site inspection program plan. <b>[For approval by DEP]</b>		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.2	<b>YEAR 2:</b> A summary report of a review of codes and regulations to reduce the stormwater impact from new development / redevelopment.	1	Attachment A with ILA
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part V.A.2	<b>YEAR 3:</b> Estimates of annual pollutant loadings and EMCs, and a table comparing the current calculated loadings with those from the previous two Year 3 ARs.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part III.A.2	<b>YEAR 4:</b> A follow-up report on plan implementation of changes to codes and regulations to reduce the stormwater impact from new development / redevelopment.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part V.A.3	<b>YEAR 4:</b> If the total annual pollutant loadings have not decreased over the past two permit cycles, revisions to the SWMP, as appropriate.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part V.B.3	<b>YEAR 4:</b> The monitoring plan (with revisions, if applicable).		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part VII.C	<b>YEAR 4:</b> An application to renew the permit.		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part VIII.B.3.d	<b>YEAR 4:</b> A TMDL Implementation Plan / Supplemental SWMP.		

## CHECKLIST B: THE REQUIRED ANNUAL REVIEWS OF WRITTEN STANDARD OPERATING PROCEDURES (SOPs) & PLANS

The permit requires annual review, and revision if needed, of written Standard Operating Procedures (SOPs) and plans (e.g., public education and outreach, training, inspections). Please indicate your review status below. **If you have made revisions that need DEP approval, you must complete Section VIII.A of the annual report.**

Did not complete review of existing SOP / Plan	Developed new written SOP / Plan	Reviewed & <u>no revision needed</u> to existing SOP / Plan	Reviewed & <u>revised</u> existing SOP / Plan	Permit Citation	Description of Required SOPs / Plans
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.1	SOP and/or schedule of inspections and maintenance activities of the structural controls and roadway stormwater collection system.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.2	SOP for development project review and permitting procedures and/or local codes and regulations for new development / areas of significant development.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.3	SOP for the litter control program.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.3	SOP for the street sweeping program.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.3	SOP for inspections of equipment yards and maintenance shops that support road maintenance activities.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.5	SOP for inspections of waste treatment, storage, and disposal facilities not covered by an NPDES stormwater permit.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.6	Plan for public education and outreach on reducing the use of pesticides, herbicides and fertilizer.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.6	SOP for reducing the use of pesticides, herbicides and fertilizer, and for the proper application, storage and mixing of these products.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Part III.A.7.c</b>	<b>Plan for proactive illicit discharge/connections/dumping inspections.*</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.7.c	SOP for reactive illicit discharge / connections / dumping investigations.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.7.c	Plan for illicit discharge training.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.7.d	SOP for spill prevention and response efforts.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.7.d	Plan for spill prevention and response training.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.7.e	Plan for public education and outreach on how to identify and report the illicit discharges and improper disposal to the MS4.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.7.f	Plan for public education and outreach on the proper use and disposal of oils, toxics and household hazardous waste.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.7.g	SOP to reduce / eliminate sanitary wastewater contamination of the MS4.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.8	SOP for inspections of high risk industrial facilities.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.9.a	SOP for construction site plan review for stormwater, erosion and sedimentation controls, and ERP and CGP coverage.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Part III.A.9.b</b>	<b>Plan for inspections of construction sites.*</b>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part III.A.9.c	Plan for stormwater, erosion and sedimentation BMPs training.

\* Revisions to these plans require DEP approval – please complete Section VIII.A of the annual report.

**REMINDER LIST OF THE TMDL / BMAP REPORTS TO BE SUBMITTED SEPARATELY FROM AN ANNUAL REPORT**

<b>Rule / Permit Citation</b>	<b>Report Title</b>	<b>Due Date</b>
Part VIII.B.3.a	<b>6 MONTHS from effective date of permit:</b> TMDL Prioritization Report.	3/12/12
Part VIII.B.3.b	<b>12 MONTHS from effective date of permit:</b> TMDL Monitoring and Assessment Plan.	
Part VIII.B.3.c	<b>6 MONTHS from receiving analyses from the lab:</b> TMDL Monitoring Report.	TBD
Part VIII.B.4	<b>30 MONTHS from start date per TMDL Prioritization Report:</b> A Bacterial Pollution Control Plan (BPCP).	TBD

## BMAP Reporting

MS4 permittees are NOT required to submit the annual report required by any BMAP that applies to them since the NPDES Stormwater Staff can obtain them from the department's Watershed Planning and Coordination staff. However, to assure that the stormwater staff are aware of which BMAPs apply to the MS4 permittees and when the latest BMAP annual report was submitted, please complete the information below, if applicable:

<b>Rule/Permit Citation</b>	<b>BMAP Title</b>	<b>Date BMAP Annual Report Submitted to DEP</b>
Part VIII.B.2		
Part VIII.B.2		
Part VIII.B.2		
Part VIII.B.2		

**END OF REVISED TAILORED MS4 AR FORM  
CYCLE 3 PERMIT**

### SECTION III. MONITORING PROGRAM

A.	Provide a brief statement as to the status of monitoring plan implementation: <i>There are no known major outfalls within the Town's MS4. As noted in the December 5, 2014 letter to the FDEP, the Town of Lake Hamilton is preparing an update to its inventory and will provide a list of any major outfalls within 9 months.</i>
B.	Provide a brief discussion of the monitoring results to date: <i>There are no known major outfalls within the Town's MS4. As noted in the December 5, 2014 letter to the FDEP, the Town of Lake Hamilton is preparing an update to its inventory and will provide a list of any major outfalls within 9 months.</i>
C.	Attach a monitoring data summary, as required by the permit. <i>Currently there is no water quality testing being performed by the Town.</i>

### SECTION IV. FISCAL ANALYSIS

A.	Total expenditures for the NPDES stormwater management program for the current reporting year: \$55,502 <i>DEP Note: If program resources have decreased from the previous year, attach a discussion of the impacts on the implementation of the SWMP as per Part II.F of the permit.</i>
B.	Total budget for the NPDES stormwater management program for the subsequent reporting year: \$78,500

### SECTION V. MATERIALS TO BE SUBMITTED WITH THIS ANNUAL REPORT FORM

Only the following materials are to be submitted to the Department along with this fully completed and signed Annual Report Form (check the appropriate box to indicate whether the item is attached or is not applicable):

Attached	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>***DEP Note: Please complete Checklists A &amp; B at the end of the tailored form.***</i> Any additional information required to be submitted in this current annual reporting year in accordance with Part III.A of your permit that is not otherwise included in Section VII below.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	A monitoring data summary as directed in Section III.C above and in accordance with Rule 62-624.600(2)(c), F.A.C.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Year 1 ONLY: An inventory of all known major outfalls and a map depicting the location of the major outfalls (hard copy or CD-ROM) in accordance with Rule 62-624.600(2)(a), F.A.C.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Year 3 ONLY: The estimates of pollutant loadings and event mean concentrations for each major outfall or each major watershed in accordance with Rule 62-624.600(2)(b), F.A.C.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Year 4 ONLY: Permit re-application information in accordance with Rule 62-624.420(2), F.A.C.

**DO NOT SUBMIT ANY OTHER MATERIALS**  
(such as records and logs of activities, monitoring raw data, public outreach materials, etc.)

### SECTION VI. CERTIFICATION STATEMENT AND SIGNATURE

The Responsible Authority listed in Section I.F above must sign the following certification statement, as per Rule 62-620.305, F.A.C:

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 gathered and evaluated the information submitted. Based upon my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, 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 providing

Name of Responsible Authority (type or print): Marlene Wagner

Title: Mayor

Signature: Marlene M Wagner Date: 03 / 30 / 15



Lake Hamilton NPDES PERMIT CY3 YR3 Annual Report

ATTACHMENT A

*Town of Lake Hamilton*  
*MS4 NPDES Permit*

## MEMORANDUM

Date: March 30, 2015

By: Mr. Kriss Y. Kaye, P.E., Envisors, a Pennoni Company

For: Mr. Doug Leonard, Town of Lake Hamilton

Subject: NPDES Attachment - MS4 NPDES Permit Request: Provide a brief Summary of the Town's Code of Ordinances and a suggested modification of the Code

Summary: In brief, a summary of the review of the Code of Ordinances (Codes), including Article III STORM SEWER AND ILLICIT DISCHARGES was conducted. It was found that the Code of Ordinances, particularly Sec. 12-88 thru 93, Stormwater Discharges, informs the public about the purpose of the NPDES program, the prohibitions of illicit discharges the Town's municipal separate storm sewer system, MS4 and the rights of the Town to monitor the discharges in to the MS4.

Because stormwater management is advancing, improvements to the Codes to assist the Town in meeting the goals of the NPDES program may be necessary from time to time. For example, Sec. 16-45, Stormwater management plans has been reviewed for opportunities to incorporate language into the Code which adds additional low impact development considerations. The following language is being considered by the Town to be added to the bottom of Sec. 16-45:

*Low impact development design is encouraged by the Town. Proposed low impact development (LID) or redevelopment (LIR) activities, which deviate from other areas of the code, may be considered for approval by the Town if it can be demonstrated to the Town that the proposed improvements at a minimum meet the following criteria: (1) deviation must be consistent with the purpose of the Town's ordinance and meets the SWFWMD's regulations; (2) deviations do not threaten public health or safety; (3) deviations are consistent with generally accepted engineering design; (4) deviations must promote and reasonably demonstrate, as deemed sufficient by the Town's reviewers, one or more, of the following: (a) innovative site design furthering compliance with the NPDES program, (b) zero net discharge, (c) enhancement biological conditions of receiving waters of the State, (d) a zero effective impervious surface is achieved by dispersing all stormwater runoff on site; and (5) deviations do not allow for density greater or lesser than what is already allowed under city regulations.*

The Town will provide as part of the Year 4 Annual Report a status report on the inclusion of any code adjustments.

*Town of Lake Hamilton*  
*MS4 NPDES Permit*

## MEMORANDUM

Date: March 30, 2015

By: Mr. Kriss Y. Kaye, P.E., Envisors, a Pennoni Company

For: Mr. Doug Leonard, Town of Lake Hamilton

Subject: NPDES Attachment - MS4 NPDES Permit Request: Evaluation of Street sweeping

Summary: In response to Part III.A.4 of the NPDES Annual Report Form, although the Town of Lake Hamilton does not have mechanical or vacuum based street sweeping program to remove sediment and debris from its publicly owned roads and parking lots, the Town is monitoring and removing accumulated debris and sediment via the use of blowers, shovels and brooms. The town does not believe the use of a mechanical or vacuum based street sweeping is cost effective as it only has approximately 0.5 miles of curb which is being maintained with the more cost effective alternate BMPs noted above. The Town is considering an outreach program to lawn-care business and residents regarding the discharge of grass clippings for streets.

*Checklists for the Routine Proactive Inspections for Illicit Discharges*

*Town of Lake Hamilton*

*Dry Detention/Retention Stormwater Treatment Pond Inspection and Maintenance  
Report Checklist*

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*Inspections shall be conducted a minimum of annually for the first 2 year of operation, then once every three years. Ponds with chronic problems shall be inspected annually*

**Stormwater Pond Name** or Number: \_\_\_\_\_

**Location:** \_\_\_\_\_

**Inspections (Note Conditions):**

- ☐ **Damage Inspection:** Inspect facility for signs of damage. Close attention should be given to the control structure and the Point of Discharge.
- ☐ **Sediment Inspection:** Visually monitor sediment accumulation in pond bottom and in sediment sumps. Remove sediment when 3-inches of pond bottom filled or if pond functionality or storage impacted.
- ☐ **Water Quality Inspection:** Turbidity in water or impacted water quality. Note any standing water. If standing water exists review after 36 hours and again after 72 hours.
- ☐ **Liter and Trash:** Note any excess trash.
- ☐ **Erosion Inspection:** Note any undercutting, piping, or signs of erosion near inflow/outfall pipes, outlet control structure, flumes. Schedule stabilization or erosion repairs. Identify if any stabilization or geotextile overlays are needed.
- ☐ **Conveyance Inspection:** Maintain orifices, weirs, grates, screens, baffles, or bleed down devices and clear debris. Is facility working with sufficient capacity/no overflows?
- ☐ **Illicit Discharge Inspection:** Proactive inspections are to be performed to identify and eliminate sources of illicit discharges, illicit connections, and dumping into the MS4. Note any other discharge to system other than stormwater is an illicit discharge.
- ☐ **Vegetation Control Inspection:** Excessive invasive or aquatic plant growth. Identify needed controls. Identify needed controls. Identify if mowing is adequate or if dying grass needs replaced.
- ☐ **General Inspection:** Visually inspect appearance of water and any odors. Record problems: discoloration, fish kill, oil/grease sheen, algal bloom, etc.
- ☐ **Other (describe inspection):**

Required: Attach Photos of Existing Conditions and Required Issues or Concerns

Work order: \_\_\_\_\_ Date work order completed: \_\_\_\_\_

**INSPECTION INFORMATION ACTION ITEMS AND REQUIRED MAINTENANCE COMMENTS:**

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**Inspector:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Town of Lake Hamilton*  
*Controls/Conveyances, Catch Basins, Grates, Inlets, Weirs, Flumes – Inspection*  
*and Maintenance Report Checklist*

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Inspections are required at a minimum annually unless historic records indicate otherwise.

**System Identification Name or Number:**

\_\_\_\_\_

**Location:** \_\_\_\_\_

**Inspections (Note Conditions):**

- ☐ **Damage Inspection:** Inspect facility for signs of damage. Close attention should be given to any control structure and the point of discharge.
- ☐ **Sediment Inspection:** Visually monitor sediment accumulation or obstructions in system bottom. Remove sediment when flow, storage or capacity is negatively affected.
- ☐ **Water Quality Inspection:** Note any turbidity in water or impacted water quality. Identify any Odors.
- ☐ **Liter and Trash:** Note any excess trash.
- ☐ **Erosion Inspection:** Note any undercutting, 'piping', or signs of erosion. Schedule stabilization or erosion repairs. Identify if any stabilization or geotextile overlays are needed.
- ☐ **Conveyance Inspection:** Maintain system clear debris.
- ☐ **Illicit Discharge Inspection:** Proactive inspections are to be performed to identify and eliminate sources of illicit discharges, illicit connections, and dumping into the MS4. Note any other discharge to system other than stormwater is an illicit discharge.
- ☐ **Vegetation Control Inspection:** Invasive or exotic aquatic plant growth. Identify needed controls. Identify if mowing is adequate or if dying grass needs replaced. Schedule for scraping, discing or other vegetative removal.
- ☐ **General Inspection:** Visually inspect appearance of water. Record problems: discoloration, fish kill, oil/grease sheen, algal bloom, etc.
- ☐ **Other (describe inspection):**

Required: Attach Photos of Existing Conditions and Required Issues or Concerns

Work order: \_\_\_\_\_ Date work order completed: \_\_\_\_\_

**INSPECTION INFORMATION ACTION ITEMS AND REQUIRED MAINTENANCE COMMENTS:**

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**Inspector:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Town of Lake Hamilton*  
*Stormsewer Piping, Culverts, Mitered Ends, End Treatment, Drains – Inspection*  
*and Maintenance Checklist*

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*Inspections are required at a minimum of 10% of municipal system elements shall be inspected yearly, so that all elements shall be inspected over 2 permit cycles.*

**System Identification Name or Number:**

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**Location:** \_\_\_\_\_

**Inspections (Note Conditions):**

- ☐ **Damage Inspection:** Inspect facility for signs of damage. Close attention should be given to any control structure and the point of discharge. Review pipe joints and possible inflow of dirt. Review surface conditions for sinks into pipe.
- ☐ **Sediment Inspection:** Visually monitor sediment and leaf accumulation or obstructions in the system. Remove sediment when flow, storage or capacity is negatively affected.
- ☐ **Water Quality Inspection:** Note any turbidity in water or impacted water quality. Identify any Odors.
- ☐ **Liter and Trash:** Note any excess trash.
- ☐ **Erosion Inspection:** Note any undercutting, 'piping', or signs of erosion. Schedule stabilization or erosion repairs. Identify if any stabilization or geotextile overlays are needed.
- ☐ **Conveyance Inspection:** Maintain system clear debris and leaves. Identify any base flow.
- ☐ **Illicit Discharge Inspection:** Proactive inspections are to be performed to identify and eliminate sources of illicit discharges, illicit connections, and dumping into the MS4. Note any other discharge to system other than stormwater is an illicit discharge.
- ☐ **Vegetation Control Inspection:** Invasive or exotic aquatic plant growth. Identify needed controls. Identify if mowing is adequate or if dying grass needs replaced. Schedule for scraping, discing or other vegetative removal.
- ☐ **General Inspection:** Visually inspect appearance of water. Record problems: discoloration, fish kill, oil/grease sheen, algal bloom, etc.
- ☐ **Other (describe inspection):**

Required: Attach Photos of Existing Conditions and Required Issues or Concerns

Work order: \_\_\_\_\_ Date work order completed: \_\_\_\_\_

**INSPECTION INFORMATION ACTION ITEMS AND REQUIRED MAINTENANCE COMMENTS:**

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**Inspector:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Town of Lake Hamilton*

*Retention/Detention with Filtration Drain Systems Inspection and Maintenance  
Report Checklist*

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*Inspections shall be conducted a minimum of annually for the first 2 year of operation, then once every eighteen month thereafter. Ponds with chronic problems shall be inspected annually*

**Stormwater Pond Name** or Number: \_\_\_\_\_

**Location:** \_\_\_\_\_

**Inspections (Note Conditions):**

- ☐ **Damage Inspection:** Inspect facility for signs of damage. Close attention should be given to the control structure and the Point of Discharge.
- ☐ **Sediment Inspection:** Visually monitor sediment accumulation in pond bottom and in sediment sumps. Remove sediment when 3-inches of pond bottom filled or if pond functionality or storage impacted.
- ☐ **Water Quality Inspection:** Turbidity in water or impacted water quality. Check for signs of hypereutrophic conditions in wet systems.
- ☐ **Liter and Trash:** Note any excess trash
- ☐ **Erosion Inspection:** Note any undercutting, piping, or signs of erosion near inflow pipes, outlet control structure, flumes. Schedule stabilization or erosion repairs. Identify if any stabilization or geotextile overlays are needed.
- ☐ **Conveyance Inspection:** Maintain orifices, weirs, grates, screens, baffles, or bleed down devices and clear debris. Is facility working with sufficient capacity/no overflows?
- ☐ **Illicit Discharge Inspection:** Proactive inspections are to be performed to identify and eliminate sources of illicit discharges, illicit connections, and dumping into the MS4. Note any other discharge to system other than stormwater is an illicit discharge.
- ☐ **Vegetation Control Inspection:** Excessive invasive or aquatic plant growth. Identify needed controls. Identify needed controls. Identify if mowing is adequate or if dying grass needs replaced.
- ☐ **General Inspection:** Visually inspect appearance of water and any odors. Record problems: discoloration, fish kill, oil/grease sheen, algal bloom, etc.
- ☐ **Other (describe inspection):**

Required: Attach Photos of Existing Conditions and Required Issues or Concerns

Work order: \_\_\_\_\_ Date work order completed: \_\_\_\_\_

**INSPECTION INFORMATION ACTION ITEMS AND REQUIRED MAINTENANCE COMMENTS:**

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**Inspector:** \_\_\_\_\_

**Date:** \_\_\_\_\_



*Town of Lake Hamilton*

*Exfiltration Trench / French Drains – Inspection and Maintenance Report Checklist*

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*Inspections are required annually for the first two years and every eighteen months thereafter.*

**System Identification Name or Number:**

\_\_\_\_\_

**Location:** \_\_\_\_\_

**Inspections (Note Conditions):**

- ☐ **Damage Inspection:** Inspect facility for signs of damage. Close attention should be given to any control structure and the point of discharge.
- ☐ **Sediment Inspection:** Visually monitor sediment accumulation or obstructions in system bottom. Remove sediment when flow, storage or capacity is negatively affected.
- ☐ **Water Quality Inspection:** Note any turbidity in water or impacted water quality. Identify any Odors. Note any standing water. If standing water exists in piping, check again after 36 hours and identify any change in the amount of water in the system piping.
- ☐ **Liter and Trash:** Note any excess trash.
- ☐ **Erosion Inspection:** Note any undercutting, 'piping', or signs of erosion. Schedule stabilization or erosion repairs. Identify if any stabilization or geotextile overlays are needed.
- ☐ **Conveyance Inspection:** Maintain system clear debris.
- ☐ **Illicit Discharge Inspection:** Proactive inspections are to be performed to identify and eliminate sources of illicit discharges, illicit connections, and dumping into the MS4. Note any other discharge to system other than stormwater is an illicit discharge.
- ☐ **Vegetation Control Inspection:** Invasive or exotic aquatic plant growth. Identify needed controls.
- ☐ **General Inspection:** Visually inspect appearance of water. Record problems: discoloration, fish kill, oil/grease sheen, algal bloom, etc.
- ☐ **Other** (describe inspection):

Required: Attach Photos of Existing Conditions and Required Issues or Concerns

Work order: \_\_\_\_\_ Date work order completed: \_\_\_\_\_

**INSPECTION INFORMATION ACTION ITEMS AND REQUIRED MAINTENANCE COMMENTS:**

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**Inspector:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Town of Lake Hamilton*

*Major Outfalls – Inspection and Maintenance Report Checklist*

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*Inspections are required* Inspections shall occur annually unless historic records indicate otherwise.

**System Identification Name or Number:**

\_\_\_\_\_

**Location:** \_\_\_\_\_

**Inspections (Note Conditions):**

- ☐ **Damage Inspection:** Inspect facility for signs of damage. Close attention should be given to any control structure and the point of discharge.
- ☐ **Sediment Inspection:** Visually monitor sediment accumulation or obstructions in system bottom. Remove sediment when flow, storage or capacity is negatively affected.
- ☐ **Water Quality Inspection:** Note any turbidity in water or impacted water quality. Check for signs of hypereutrophic conditions. Identify any Odors.
- ☐ **Liter and Trash:** Note any excess trash.
- ☐ **Erosion Inspection:** Note any undercutting, 'piping', or signs of erosion. Schedule stabilization or erosion repairs. Identify if any stabilization or geotextile overlays are needed.
- ☐ **Conveyance Inspection:** Maintain system clear debris.
- ☐ **Illicit Discharge Inspection:** Proactive inspections are to be performed to identify and eliminate sources of illicit discharges, illicit connections, and dumping into the MS4. Note any other discharge to system other than stormwater is an illicit discharge.
- ☐ **Vegetation Control Inspection:** Invasive or exotic aquatic plant growth. Identify needed controls. Identify if mowing is adequate or if dying grass needs replaced. Schedule for scraping, discing or other vegetative removal.
- ☐ **General Inspection:** Visually inspect appearance of water. Record problems: discoloration, fish kill, oil/grease sheen, algal bloom, etc.
- ☐ **Other (describe inspection):**

Required: Attach Photos of Existing Conditions and Required Issues or Concerns

Work order: \_\_\_\_\_ Date work order completed: \_\_\_\_\_

**INSPECTION INFORMATION ACTION ITEMS AND REQUIRED MAINTENANCE COMMENTS:**

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**Inspector:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Town of Lake Hamilton*

*Pollution Control Boxes (e.g., baffle boxes, CDS units, hydrodynamic separators, catch basin inserts, etc.)– Inspection and Maintenance Report Checklist*

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*Inspections are required at a minimum quarterly, unless historic clean out operation records demonstrate that a more or less frequent schedule is appropriate.*

**System Identification Name or Number:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Inspections (Note Conditions):**

- ☐ **Damage Inspection:** Inspect facility for signs of damage. Close attention should be given to any control structure and the point of discharge.
- ☐ **Sediment Inspection:** Visually monitor sediment accumulation or obstructions in system bottom. Remove sediment when flow, storage or capacity is negatively affected.
- ☐ **Water Quality Inspection:** Note any turbidity in water or impacted water quality. Identify any Odors.
- ☐ **Liter and Trash:** Note any excess trash.
- ☐ **Erosion Inspection:** Note any undercutting, 'piping', or signs of erosion. Schedule stabilization or erosion repairs. Identify if any stabilization or geotextile overlays are needed.
- ☐ **Conveyance Inspection:** Maintain system clear debris.
- ☐ **Illicit Discharge Inspection:** Proactive inspections are to be performed to identify and eliminate sources of illicit discharges, illicit connections, and dumping into the MS4. Note any other discharge to system other than stormwater is an illicit discharge.
- ☐ **Vegetation Control Inspection:** Invasive or exotic aquatic plant growth.
- ☐ **General Inspection:** Visually inspect appearance of water. Record problems: discoloration, fish kill, oil/grease sheen, algal bloom, etc.
- ☐ **Other** (describe inspection):

Required: Attach Photos of Existing Conditions and Required Issues or Concerns

Work order: \_\_\_\_\_ Date work order completed: \_\_\_\_\_

**INSPECTION INFORMATION ACTION ITEMS AND REQUIRED MAINTENANCE COMMENTS:**

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**Inspector:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Town of Lake Hamilton*

*Ditches and Grass Swales – Inspection and Maintenance Report Checklist*

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*Inspections shall be conducted a minimum of annually for the first 2 year of operation, then once every three years. Swales with chronic problems shall be inspected annually.*

**System Identification Name or Number:**

\_\_\_\_\_

**Location:** \_\_\_\_\_

**Inspections (Note Conditions):**

- ☐ **Damage Inspection:** Inspect facility for signs of damage. Close attention should be given to any control structure and the point of discharge.
- ☐ **Sediment Inspection:** Visually monitor sediment accumulation or obstructions in system bottom. Remove sediment when flow, storage or capacity is negatively affected.
- ☐ **Water Quality Inspection:** Turbidity in water or impacted water quality. Check for signs of hypereutrophic conditions. Note any standing water. If standing water exists review after 36 hours and again after 72 hours.
- ☐ **Liter and Trash:** Note any excess trash.
- ☐ **Erosion Inspection:** Note any undercutting, 'piping', or signs of erosion. Schedule stabilization or erosion repairs. Identify if any stabilization or geotextile overlays are needed.
- ☐ **Conveyance Inspection:** Maintain system clear debris.
- ☐ **Illicit Discharge Inspection:** Proactive inspections are to be performed to identify and eliminate sources of illicit discharges, illicit connections, and dumping into the MS4. Note any other discharge to system other than stormwater is an illicit discharge.
- ☐ **Vegetation Control Inspection:** Invasive or exotic aquatic plant growth. Identify needed controls. Identify if mowing is adequate or if dying grass needs replaced. Schedule for scraping, discing or other vegetative removal.
- ☐ **General Inspection:** Visually inspect appearance of water in ditch. Record problems: discoloration, fish kill, oil/grease sheen, algal bloom, etc.
- ☐ **Other (describe inspection):**

Required: Attach Photos of Existing Conditions and Required Issues or Concerns

Work order: \_\_\_\_\_ Date work order completed: \_\_\_\_\_

**INSPECTION INFORMATION ACTION ITEMS AND REQUIRED MAINTENANCE COMMENTS:**

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**Inspector:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*Inter Local Agreements between the Town of Lake Hamilton and City of Haines City*

## INTERLOCAL AGREEMENT FOR BUILDING & CODE ENFORCEMENT SERVICES

This agreement is made and entered into this 23<sup>RD</sup> day of DECEMBER, 2010, by and between the **CITY OF HAINES CITY, a Florida municipal corporation**, (hereinafter referred to as "**HAINES CITY**") and the **TOWN OF LAKE HAMILTON, a Florida municipal corporation**, (hereinafter referred to as "**LAKE HAMILTON**").

### RECITALS

**WHEREAS, LAKE HAMILTON** desires to outsource its building permit review and code enforcement services on a contractual basis.

**WHEREAS, HAINES CITY** and **LAKE HAMILTON** desire to enter into an agreement concerning the provision of building permit and code enforcement service to **LAKE HAMILTON**.

**WHEREAS**, public agencies (including the parties hereto) are authorized by Section 163.01(14), Florida Statutes, to enter into contracts for the performance of service functions of public agencies but shall not be deemed to authorize the delegation of the constitutional or statutory duties of county or city officers. The parties expressly deny any intent, expressed or implied, in this Agreement to provide for a delegation by **HAINES CITY** of such constitutional authority or statutory duties to **LAKE HAMILTON**.

**WHEREAS**, pursuant to Section 768.28(18), Florida Statutes, neither **LAKE HAMILTON** nor **HAINES CITY** waives any defense to sovereign immunity or increases the limits of liability, upon entering into this Agreement regardless of whether any such obligations are based in tort, contract, statute, strict liability, negligence, product liability or otherwise.

**ACCORDINGLY**, in consideration of the mutual undertakings and agreements herein

contained and assumed, and other good and valuable consideration the receipt and sufficiency of which are acknowledged by the parties, **LAKE HAMILTON** and **HAINES CITY** hereby covenant and agree as follows:

**SECTION 1. RECITALS.** The above Recitals are true and correct, and form a material part of this Agreement.

**SECTION 2. BUILDING CODE AND CODE ENFORCEMENT SERVICES.** **HAINES CITY** shall provide **LAKE HAMILTON** with building code review, permitting, and enforcement and code enforcement services for the term of this Agreement and any renewals hereunder.

**SECTION 3. COMPENSATION.** Commencing on January 1, 2011, **LAKE HAMILTON** shall pay **HAINES CITY** the sum of Twenty-Five Dollars (\$25.00) per hour for each hour worked by a Haines City code enforcement employee or building department employee in delivering the services outlined in Section 2 hereof. **LAKE HAMILTON** agrees that it will take or pay for a minimum of ten (10) hours of said service each week whether or not such services are used in that week. Hours not used in a given week may be rolled over and used in subsequent weeks; provided, however, that (1) unused hours shall not roll over and be used from year to year, and (2) unused hours of service shall be delivered so long as there is no interference with the work schedule or employment conditions of **HAINES CITY's** employees. **LAKE HAMILTON** agrees to pay for said service monthly within ten (10) days from the end of each month services are provided under this Agreement. Unless this Agreement is terminated by either party or the parties mutually agree to modify said compensation as provided herein, then monthly compensation shall increase annually by two percent (2%).

**SECTION 4. TERM.** The initial term of this Agreement shall commence on January 1, 2011 and continue in effect until September 30, 2013.

**SECTION 5. RENEWAL; TERMINATION.** Unless either party notifies the other by certified mail at least three (3) months prior to the expiration of this Agreement, or any

subsequent renewals, of its intention not to renew and continue this Agreement, such Agreement shall automatically be extended for a further period of one year. In such event, all the terms and provisions of the Agreement shall continue in full force and effect during the extension period unless the parties mutually agree to written modifications. Either party may terminate this Agreement for any reason or no reason by sending written notice thereof at least three (3) months prior to the expiration date of this Agreement.

**SECTION 6. NOTICE.** Any notice, request or other communication required or permitted hereunder shall be given by personal delivery or certified U.S. Postal Service Mail in all instances to the following persons at the designated addresses:

City Manager  
City of Haines City  
Post Office Box 1507  
Haines City, FL 33845

Mayor  
Town of Lake Hamilton  
Post Office Box 126  
Lake Hamilton, FL 33851

**SECTION 7. CHOICE OF LAW.** The laws of the State of Florida shall govern this Agreement.

**SECTION 8. CHOICE OF FORUM.** Any action at law or in equity instituted to enforce or interpret the terms of this Agreement shall be brought in the Circuit Court in and for Polk County, Florida.

**SECTION 9. NON-ASSIGNABILITY.** Neither party shall assign any of the obligations or benefits imposed hereby or contained herein, unless upon the written consent of the other party, which consent must be evidenced by a duly passed resolution.

**SECTION 10. THIRD PARTIES.** In no event shall any of the terms of this Agreement confer upon any third person, corporation, or entity other than the parties hereto any right or cause of action for damages claimed against any of the parties to this Agreement arising from the performance of the obligation and responsibilities of the parties herein or for any other reason.

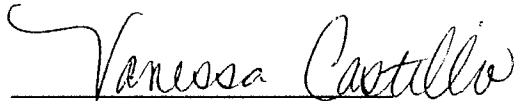


**SECTION 11. ENTIRE AGREEMENT.** The parties acknowledge, one to the other, that the terms hereof constitute the entire understanding and agreement of the parties with respect hereof. No modification hereof shall be effective unless in writing, executed with the same formalities as this Agreement is executed.

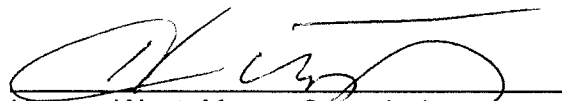
IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized officers appearing below.

ATTEST:

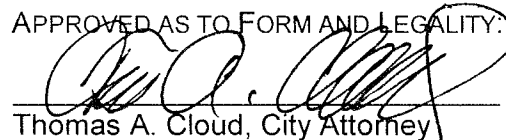
**CITY OF HAINES CITY, FLORIDA, a  
municipal corporation**

  
Vanessa Castillo, Interim City Clerk

APPROVED:

  
Horace West, Mayor-Commissioner

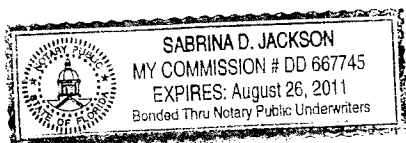
APPROVED AS TO FORM AND LEGALITY:


  
Thomas A. Cloud, City Attorney

STATE OF FLORIDA  
COUNTY OF POLK

The foregoing instrument was acknowledged before me this <sup>23<sup>rd</sup></sup>~~27<sup>th</sup>~~ day of Dec, 2010, by Horace West and Vanessa Castillo on behalf of the City of Haines City, a Florida municipal corporation. They are personally known to me or who have produced \_\_\_\_\_ as identification and who [ ] did [ ☒ ] did not take an oath.

My Commission Expires:




  
Notary Public, State of Florida


Sabrina D Jackson  
Name Typed or Printed

TOWN OF LAKE HAMILTON, FLORIDA, a  
municipal corporation

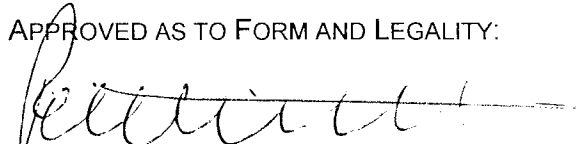
ATTEST:

APPROVED:

  
Kimberly M. Gay, Town Clerk

  
Marlene M. Wagner, Mayor


APPROVED AS TO FORM AND LEGALITY:

  
Robert Crittenden, City Attorney

STATE OF FLORIDA  
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 22nd day of December, 2010,  
by Marlene M. Wagner and Kimberly M Gay on behalf of the Town of Lake Hamilton, a Florida  
municipal corporation. They are personally known to me or who have produced  
NONE as identification and who [ ] did [X] did not take  
an oath.

My Commission Expires:

  
Margaret Freeman  
Notary Public, State of Florida



V40494\7 - T-CLOUD - # 3544785 v1  
12/21/10

**INTERLOCAL AGREEMENT**  
**FOR BUILDING CODE, CODE ENFORCEMENT AND**  
**OTHER PROFESSIONAL SERVICES**

This agreement is made and entered into this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by and between the **CITY OF HAINES CITY, a Florida municipal corporation**, (hereinafter referred to as “**Haines City**”) and the City of \_\_\_\_\_, a Florida municipal corporation, (hereinafter referred to as “\_\_\_\_\_”).

**RECITALS**

**WHEREAS**, \_\_\_\_\_ desires to outsource its building permit review and code enforcement services on a contractual basis.

**WHEREAS**, **HAINES CITY** and \_\_\_\_\_ desire to enter into an agreement concerning the provision of building permit and code enforcement service to \_\_\_\_\_.

**WHEREAS**, public agencies (including the parties hereto) are authorized by Section 163.01(14), Florida Statutes, to enter into contracts for the performance of service functions of public agencies but shall not be deemed to authorize the delegation of the constitutional or statutory duties of county or city officers. The parties expressly deny any intent, express or implied, in the Agreement to provide for a delegation by \_\_\_\_\_ of such constitutional authority or statutory duties to **HAINES CITY**.

**ACCORDINGLY**, in consideration of the mutual undertakings and agreements herein contained and assumed, and other good and valuable consideration the receipt and sufficiency of which are acknowledged by the parties, \_\_\_\_\_ and **HAINES CITY** hereby covenant and agree as follows:

**SECTION 1. RECITALS.** The above Recitals are true and correct, and form a material part of this Agreement.

**SECTION 2. BUILDING CODE, CODE ENFORCEMENT SERVICES AND OTHER PROFESSIONAL SERVICES.** **HAINES CITY** shall provide \_\_\_\_\_ with building code review, permitting, enforcement, code enforcement and other professional services for the term of this Agreement and any renewals hereunder.

**SECTION 3. COMPENSATION.** \_\_\_\_\_ shall pay **HAINES CITY** for professional services based on the rate schedule attached hereto as Exhibit A. These rates may be adjusted according to changes to each employee's pay rate and changes to personnel providing these services. These rates shall be computed by the Haines City Finance Department and will be effective immediately.

These services provided by **HAINES CITY** may include Building Inspection, Plans Review, Building Official and Code Enforcement and other Professional Services authorized by **HAINES CITY**. The fees shall include (i) the rate of pay plus benefits, plus (ii) administrative fees according to the attached schedule.

The time charges shall be calculated to include (i) actual time to perform service, plus (ii) any additional travel time. These professional services shall be delivered so long as there is no interference with the **HAINES CITY** employee's regular work schedule or employment conditions of such **HAINES CITY's** employees.

\_\_\_\_\_ agrees to pay for said service monthly within ten (10) days from the date of invoice by **HAINES CITY** for services as provided under this Agreement. Unless this Agreement is terminated by either party or the parties mutually agree to modify said compensation as provided herein, then prior to July 1st of each year and each subsequent \_\_\_\_\_ that this Agreement is extended, **HAINES CITY** shall provide \_\_\_\_\_ with written notice of the proposed modified monthly compensation for the upcoming year (which monthly compensation may exceed the automatic annual two percent (2%) increase).

**SECTION 4. TERM.** The initial term of this Agreement shall commence on \_\_\_\_\_, 20\_\_\_\_ and continue in effect until \_\_\_\_\_, 20\_\_\_\_. The term of this Agreement may be extended on October 1<sup>st</sup> of each year for an additional one (1) year term in accordance with Section 5 of this Agreement.

**SECTION 5. RENEWAL; TERMINATION.** Unless either party notifies the other by certified mail prior to July 1st of each year, of its intention not to renew and continue this Agreement, such Agreement shall automatically be extended for a further period of one (1) year. In such event, all the terms and provisions of the Agreement shall continue in full force and effect during the extension period unless the parties mutually agree to written modifications. Either party may terminate this Agreement for any reason or no reason by sending written notice prior to July 1st of each year, thereof at least three (3) months prior to the expiration date of this Agreement.

**SECTION 6. NOTICE.** Any notice, request or other communication required or permitted hereunder shall be given by personal delivery of certified U.S. Postal Service Mail in all instances to the following persons at the designated addresses:

City Manager

City Manager

City of Haines City

City of \_\_\_\_\_

Post Office Box 1507

\_\_\_\_\_

Haines City, FL 33845

\_\_\_\_\_

**SECTION 7. CHOICE OF LAW.** The laws of the State of Florida shall govern this Agreement.

**SECTION 8. CHOICE OF FORUM.** Any action at law or in equity instituted to enforce or interpret the terms of this Agreement shall be brought in the Circuit Court in and for Polk County, Florida.

**SECTION 9. NON-ASSIGNABILITY.** Neither party shall assign any of the obligations or benefits imposed hereby or contained herein, unless upon the written consent of the other party, which consent must be evidenced by a duly passed resolution.

**SECTION 10. THIRD PARTIES.** In no event shall any of the terms of this Agreement confer upon any third person, corporation, or entity other than the parties hereto any right or cause of action for damages claimed against any of the parties to this Agreement arising from the performance of the obligation and responsibilities of the parties herein or for any other reason.

**SECTION 11. ENTIRE AGREEMENT.** The parties acknowledge, one to the other, that the terms hereof constitute the entire understanding and agreement of the parties with respect hereof. No modification hereof shall be effective unless in writing, executed with the same formalities as this Agreement is executed.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized officers appearing below.

ATTEST:

**CITY OF HAINES CITY, FLORIDA**

**a municipal corporation**

APPROVED:

\_\_\_\_\_  
**Joshua Freucht, MPA City Clerk**

**APPROVED AS TO FORM AND LEGALITY**

\_\_\_\_\_  
**Fred Reilly, City Attorney**

**STATE OF FLORIDA**

**COUNTY OF POLK**

The foregoing instrument was acknowledge before me this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_\_, by \_\_\_\_\_ and \_\_\_\_\_ on behalf of the City of Haines City, a Florida municipal corporation. They are personally know to me or who have produced \_\_\_\_\_ as identification and who ( ) did ( ) did not take an oath.

My Commission Expires:

\_\_\_\_\_  
Notary Public, State of Florida

\_\_\_\_\_  
Name Typed or Printed

ATTEST:

CITY OF \_\_\_\_\_, FLORIDA

a municipal corporation

APPROVED:

\_\_\_\_\_  
\_\_\_\_\_, City Clerk

\_\_\_\_\_

APPROVED AS TO FORM AND LEGALITY

\_\_\_\_\_  
\_\_\_\_\_, City Attorney

STATE OF FLORIDA

COUNTY OF POLK

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_\_, by \_\_\_\_\_ and \_\_\_\_\_ on behalf of the City of \_\_\_\_\_, a Florida municipal corporation. They are personally known to me or who have produced \_\_\_\_\_ as identification and who ( ) did ( ) did not take an oath.

My Commission Expires:

\_\_\_\_\_  
Notary Public, State of Florida

\_\_\_\_\_  
Name Typed or Printed