

Illinois Environmental Protection Agency

Bureau of Water • 1021 N. Grand Avenue E. • P.O. Box 19276 • Springfield • Illinois • 62794-9276

Division of Water Pollution Control ANNUAL FACILITY INSPECTION REPORT

for NPDES Permit for Storm Water Discharges from Separate Storm Sewer Systems (MS4)

This fillable form may be completed online, a copy saved locally, printed and signed before it is submitted to the Compliance Assurance Section at the above address. Complete each section of this report,

Report Period: From March, 2015 To March, 20)16		Permit No. ILR40 0245	
MS4 OPERATOR INFORMATION: (As it ap	pears on the	current permit)			
Name: City of South Beloit	Mailing Address 1: 519 Blackhawk Boulevard				
Mailing Address 2:				County: W	innebago
City: South Beloit	State:	IL Zip: 610	080	Telephone:	815-389-3023
Contact Person: Tracy L. Patrick, City Clerk (Person responsible for Annual Report)		Email Address	t.patrick@so	uthbeloit.org	
Name(s) of governmental entity(ies) in which	n MS4 is loc	ated: (As it app	ears on the cu	rrent permi	t)
City of South Beloit					
THE FOLLOWING ITEMS MUST BE ADDRES	SED.				
 A. Changes to best management practices (che regarding change(s) to BMP and measurabl 		te BMP change	(s) and attach in	nformation	
1. Public Education and Outreach	☐ 4.	Construction S	Site Runoff Cont	rol	
2. Public Participation/Involvement	☐ 5.	Post-Construc	tion Runoff Con	itrol	
3. Illicit Discharge Detection & Elimination	☐ 6.	Pollution Preven	ention/Good Ho	usekeeping	
B. Attach the status of compliance with permit of management practices and progress towards MEP, and your identified measurable goals for the complex of the comp	s achieving the or each of the	ne statutory goa e minimum cont	l of reducing the rol measures.	e discharge o	f pollutants to the
C. Attach results of information collected and a	100	10000			
 D. Attach a summary of the storm water activities implementation schedule.) 	es you plan t	o undertake dur	ing the next rep	orting cycle (including an
E. Attach notice that you are relying on another	government	entity to satisfy	some of your p	ermit obligati	ons (if applicable).
F. Attach a list of construction projects that you	r entity has p	aid for during th	e reporting perio	od.	
Any person who knowingly makes a false, fictition commits a Class 4 felony. A second or subsequent	ous, or fraudu ent offense at	lent material sta ter conviction is	tement, orally or a Class 3 felony	in writing, to v. (415 ILCS t	the Illinois EPA 5/44(h))
Fary L. Vatrick Owner Signature:			5-26 Date	-16 e:	
Tracy L. Patrick		Ci	ty Clerk		
Printed Name:		-	Title);	

EMAIL COMPLETED FORM TO: epa.ms4annualinsp@illinois.gov

or Mail to: ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

WATER POLLUTION CONTROL

COMPLIANCE ASSURANCE SECTION #19 1021 NORTH GRAND AVENUE EAST

POST OFFICE BOX 19276

IL 532 2585

SPRINGFIELD, ILLINOIS 62794-9276

This Agency is authorized to require this information under Section 4 and Title X of the Environmental Protection Act (415 ILCS 5/4, 5/39). Failure to disclose this information may result in: a civil penalty of not to exceed \$50,000 for the violation and an additional civil penalty of not to exceed \$10,000 for each day during which the violation continues (415 ILCS 5/42) and may also prevent this form from being processed and could result in your application being denied. This form WPC 691 Rev 6/10 has been approved by the Forms Management Center.