



SMALL MS4 DISCHARGE MONITORING REPORT (DMR) FORM FOR PERMIT NO. AZG2016-002

Reporting Period: July 1, 2017 to June 30, 2018

Reason(s) for Submitting DMR (Check all that apply):

- Reporting visual monitoring data (Fill in all Sections). Number of samples collected: 0
- Reporting analytical monitoring data (Fill in all Sections). Number of samples collected: _____
- Reporting no discharge at all outfalls for visual monitoring this period (Fill in Sections A, B, possibly D, and E).
- Reporting no discharge at all outfalls for analytical monitoring this period (Fill in Sections A, B, C, and E).

A. Permit LTF Number: 65737

Note: Read instructions before completing this Form.

B. Facility Information

1. MS4 Name: CITY OF COTTONWOOD

2. MS4 Location

a. Address: 1490 W MINGUS AVE

b. City: COTTONWOOD

c. State: AZ d. Zip Code: 86326

3. Additional MS4 Information

Contact Name: ROBERT L. WINIECKE, PE, CFM

E-mail: RWINIECKE@COTTONWOODAZ.GOV

Phone: 928.340.2770

4. DMR Preparer (Complete if DMR was prepared by someone other than the person signing the certification in Section E)

Prepared by: _____

Organization: _____

E-mail: _____ Phone: _____



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C. Visual Monitoring - Outfalls or Screening Points

If a visual discharge monitoring alternative was proposed in the NOI, provide a description of the proposed alternative and how the proposed alternative is as effective as, or is more effective than, visual stormwater discharge monitoring:

1.a. Outfall or Screening Point Name/ ID	1.b. Receiving Water	1.c Sample Collection Season*				1.d. Monitoring Type* (DW-ID, WW)	1.e. Sheen	1.f. Color	1.g. Foam	1.h. Solids (specify)	1.i. Odor (specify)	1. j. Other (specify)
		SW1	SW2	WW1	WW2							
MG-MAIN	VERDE RIVER	ND				WW	NO	N/A	NO	NONE	NO	N/A
MG-MAIN	VERDE RIVER		ND			WW	NO	N/A	NO	NONE	NO	N/A
MG-MAIN	VERDE RIVER			ND		WW	NO	N/A	NO	NONE	NO	N/A
MG-MAIN	VERDE RIVER				ND	WW	NO	N/A	NO	NONE	NO	N/A
DMW-MAIN	VERDE RIVER	IF				WW	NO	N/A	NO	NONE	NO	N/A
DMW-MAIN	VERDE RIVER		ND			WW	NO	N/A	NO	NONE	NO	N/A
DMW-MAIN	VERDE RIVER			IF		WW	NO	N/A	NO	NONE	NO	N/A
DMW-MAIN	VERDE RIVER				ND	WW	NO	N/A	NO	NONE	NO	N/A
RRW-RWRF	VERDE RIVER	M				WW	NO	TAN	NO	40	NO	N/A
RRW-RWRF	VERDE RIVER		M			WW	NO	TAN	NO	50	NO	N/A
RRW-RWRF	VERDE RIVER			ND		WW	NO	N/A	NO	NONE	NO	N/A
RRW-RWRF	VERDE RIVER				ND	WW	NO	N/A	NO	NONE	NO	N/A
SSG-6TH	VERDE RIVER	ND				WW	NO	N/A	NO	NONE	NO	N/A
SSG-6TH	VERDE RIVER		ND			WW	NO	N/A	NO	NONE	NO	N/A
SSG-6TH	VERDE RIVER			ND		WW	NO	N/A	NO	NONE	NO	N/A
SSG-6TH	VERDE RIVER				ND	WW	NO	N/A	NO	NONE	NO	N/A
OCW-FIR	VERDE RIVER	ND				WW	NO	N/A	NO	NONE	NO	N/A
OCW-FIR	VERDE RIVER		ND			WW	NO	N/A	NO	NONE	NO	N/A
OCW-FIR	VERDE RIVER			ND		WW	NO	N/A	NO	NONE	NO	N/A
OCW-FIR	VERDE RIVER				ND	WW	NO	N/A	NO	NONE	NO	N/A

1.c codes M= Monitored. ND= No Discharge from outfall or screening point. IF= Insufficient Flow for sampling. EQ= Equipment Failure. AC= Adverse Conditions. SE= Sampler Error. FC= Frozen Conditions. O= Other.
 1.d codes (DW-ID) – Dry Weather- Illicit Discharge. (WW) – Wet Weather.

2. Comments and/or Explanation of Any Violations (Reference all attachments here)



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E. Certification

ROBERT L. WINIECKE, PE, CFM, CITY ENGINEER

Typed or Printed Name/Title of Principal Executive
Officer or Authorized Agent

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 on 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 violations.

Signature of Principal Executive Officer or
Authorized Agent

09.24.18

Date

E-mail of Principal Executive Officer or Authorized Agent: RWINIECKE@COTTONWOODAZ.GOV