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State of Wisconsin
Department of Natural Resources-WT/3
101 S. Webster St.
Madison, WI 53707

dnr.wi.gov

# Final Report

**Targeted Runoff Management Grant Program and Urban Nonpoint Source and Storm Water Management Grant Program**

Form 3400-189 (R 11/08)



Notice: This final report is authorized by ss. 281.65 and 281.66, Wis. Stats., and chs. NR 153 and NR 155, Wis. Adm. Code. Personally identifiable information collected will be used for program administration and may be made available to requesters as required under Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

**Instructions: Your grant agreement requires you to submit a Final Report 60 days after the end date listed in the grant agreement. This Final Report form must be used in conjunction with the "FINAL REPORT INSTRUCTIONS." The instructions detail how to complete and submit the report to DNR. The DNR prefers that Final Reports be submitted in electronic format. If, however, printed copies of Final Reports are submitted, please submit three (3) complete originals to your regional Nonpoint Coordinator.**

## 1. Grant Type -- Please check one.

☐ Targeted Runoff Management Grant – Agricultural

☐ Targeted Runoff Management Grant – Urban

☐ Urban Nonpoint Source & Storm Water Management Grant – Construction

☒ Urban Nonpoint Source & Storm Water Management Grant -- Planning

## 2. Grantee & Project Information

| Project Name | Grant Number |
|---|---|
| **City of Oshkosh Stormwater Management Plan and Ordinance Development** | **USP-UF01-70266-05** |
| Governmental Unit Name | Primary Watershed Name and Watershed Code |
| **Oshkosh, City of** | **Lake Winnebago-West (UR01-111), Lake Butte des Morts (US04-111) * Fond du Lac River (UF03-111)** |
| Nearest Water Body Name | Nearest Water Body Identification Code (WBIC) (if applicable) |
| Lake Winnebago, Upper Fox River, Lake Butte des Morts; Sawyer Creek; Campbell Creek | L. Winnebago (131100); Upper Fox R: (117900); L Butte des Morts: (139900); Sawyer Cr. (139800); Campbell Cr.: (139700) |
| DNR Water Management Unit (River System) Name | s. 303 (d) Listed Waterbody? ☒ Yes ☐ No. |
| **Upper Fox** | **Lake Winnebago, Fox River, Campbell Creek** |

What pollutant(s) were addressed by the project (e.g., nitrogen, phosphorus, sediment, thermal control, *etc.*)?

**Sediment, phosphorus, nitrogen, heavy metals**

For each project site location provide the following: (attach additional sheets if necessary)

| Location: | | A | B | C | D | E |
|---|---|---|---|---|---|---|
| Minor Civil Division Name (City, Township, Village, etc.) | | **City of Oshkosh (entire)** | | | | |
| PLSS | Town | **17N, 18N, 19N** | | | | |
| | Range | **16E, 17E, 18E** | | | | |
| | Section | **17N 16E: 1-4, 9**<br>**18N 16E: 1-3, 10-16, 20-29, 32-36**<br>**19N 16E: 25, 26, 35, 36**<br>**19N 17E: 30, 31** | | | | |
| | Quarter | | | | | |
| | Quarter-Quarter | | | | | |
| Latitude (degrees, minutes, seconds North of Equator; use the DNR's Surface Water Data Viewer, SWDV) | | **44 1' 9" N** | | | | |
| Longitude (degrees, minutes, seconds W of Prime Meridian, | | **88 32' 28" W** | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| use the SWDV) | | | | | | |
| Property Owner(s) | Name | James Rabe | | | | |
| | Mailing address | 215 Church Ave.<br>P.O. Box 1130<br>Oshkosh, WI 54903-1130 | | | | |
| Site address *(Not mailing address)* | | same | | | | |

## 3. Summary of Results

A. Performance Standards and Prohibitions and Other Water Resources Management Priorities
For grants issued in calendar year 2006 or later, complete Tables A and B (following) consistent with the entries on your grant application.

TABLE A. PERFORMANCE STANDARDS AND PROHIBITIONS (per ch. NR 151, Wis. Adm. Code, effective October 1, 2002)

| Performance Standard or Prohibition | Units of Measure | Quantity | Measurement Method Used |
|---|---|---|---|
| Sheet, rill and wind erosion | Acres meeting T | | |
| Manure Storage Facilities: New Construction/Alterations | Number of facilities | | |
| | Number of animal units | | |
| Manure Storage Facilities: Closure | Number of facilities | | |
| Manure Storage Facilities: Failing/Leaking Facilities | Number of facilities | | |
| | Number of animal units | | |
| Clean Water Diversions in WQMA | Pollutant load reduction | | |
| | Number of farms with diversions | | |
| | Number animal units | | |
| Nutrient Management on Agricultural Land | Acres planned | | |
| Prohibition: Manure Storage Overflow | Number of facilities | | |
| | Number of animal units | | |
| Prohibition: Unconfined Manure Pile in WQMA | Number of farms | | |
| Prohibition: Direct Runoff From Feedlot/Stored Manure | Pollutant load reduction | | |
| | Number of facilities | | |
| | Number of animal units | | |
| Prohibition: Unlimited Livestock Access | Feet of bank protected | | |
| | Number of farms | | |
| Urban: 20-40% Reduction in Total Suspended Solids (TSS) | Pounds TSS reduced | 1,354,000 | WinSLAMM 9.2.5 |
| | % TSS reduction | 40% | WinSLAM 9.2.5 |

TABLE B. OTHER WATER RESOURCES MANAGEMENT PRIORITIES

| I. Agricultural Areas | Units of Measure | Quantity | Measurement Method Used |
|---|---|---|---|
| Buffers | Feet of bank protected | | |
| | Number of farms | | |
| Streambank | Tons of bank erosion reduced | | |
| | Feet of bank protected | | |
| Other (specify) | | | |
| **II. Developed Urban Areas** | **Units of Measure** | **Quantity** | **Measurement Method Used** |
| Urban: 20-40% Reduction in TSS | Pounds TSS reduced | | |
| | % TSS reduction | | |
| Infiltration | % Pre-development stay-on volume | | |
| | Cubic feet stay-on volume | | |
| Peak flow discharge | Change in cubic feet per second | | |
| Protective areas | Feet of bank protected | | |
| Fueling & maintenance areas | Oily sheen presence | | |
| Streambank | Tons of bank erosion reduced | | |
| | Feet of bank protected | | |

| | | | |
|---|---|---|---|
| Other (specify) | | | |
| III. Planning | Units of Measure | Quantity | Measurement Method Used |
| Quantify how implementation of the planning project decreased storm water impacts on state waters (*i.e.*, storm water plan, I & E plan, *etc.*) | Municipalities planned for | 1 | count |
| | Acres planned for | 11,085 | count |
| Document/track progress made in implementing the planning product (*i.e.*, ordinance, utility district evaluation/formation, storm water management plan information & education, *etc.*) | Municipalities planned for | 1 | count |
| | Acres planned for | 11,085 | count |
| Other (specify) | | | |

B. Project Results Narrative

**Analyzed with WinSLAMM city's base and existing pollution (TSS and TP) loads in compliance with WDNR regulations and policies (existing level of TSS control = 14.9%)**

- **Evaluated potential BMPs (structural and non-structural) to achieve ultimate 40% TSS control on a city-wide basis**
- **Selected most feasible BMPs to achieve 40% TSS reduction based on criteria: cost, pollution control, maintenance, safety, aesthetics, and public acceptability**
- **Developed cost estimates and schedule for meeting TSS reduction goal (capital cost = $14,380,000)**
- **Developed ordinances for Illicit Discharge Elimination, Construction Erosion Control, and Post-Construction Stormwater Management in compliance with WDNR guidance and/or model ordinances**
- **Created storm sewer outfall map**
- **Developed Information and Education Plan**
- **Results presented to City Stormwater Utility Committee and accepted by committee**

## 4. Satisfaction of Notice Requirements (if applicable)

If cost sharing for this project was offered under a formal notice to achieve compliance with performance standards or prohibitions, provide information for each notice in the table below.

| Notice Information | | | | Notice Satisfaction Information | | |
|---|---|---|---|---|---|---|
| | | | | Satisfied? | | |
| Notice Type | Issue Date | From (Name) | To (Name) | Yes | No | Date Letter Sent |
| | | | | ☐ | ☐ | |
| | | | | ☐ | ☐ | |
| | | | | ☐ | ☐ | |
| | | | | ☐ | ☐ | |

## 5. Summary of Project Challenges

**Changes in WDNR policies and modeling guidelines during project period and changes in street cleaning efficiency during project period resulted in considerable extra time and effort to conduct project and meet MS4 permit requirements. Better coordination and communication between regional and central office WDNR stormwater staff would help provide clearer requirements for MS4 permit compliance.**

## 6. Additional Information about the Project (optional)

## 7. Final Product(s) -- All Projects

A. Construction Projects

☐ A.1. Checking here indicates that a printed copy of project plans and specifications was sent to your DNR Regional Nonpoint Source Coordinator.

☐ A.2. Checking here indicates that photo-documentation of the project's construction is attached.

B. Planning Projects

☐ B.1. Checking here indicates that a printed copy of the planning product (*e.g.*, plans, ordinances, analyses) was sent to your DNR Regional Nonpoint Source Coordinator.

☐ B.2. Checking here indicates that the Regional Nonpoint Source Coordinator has approved the final Planning Product(s).

☒ B.3. Checking here indicates that your governmental unit has adopted the final Planning Product(s).

| Name of Planning Document(s) | Date(s) effective | Date Submitted to NPS Coordinator |
|---|---|---|
| **City of Oshkosh Stormwater Management Plan and Ordinance Development** | **September 2008** | **February 2009** |

8. Grantee Certification:

☒ Checking here certifies that, to the best of your knowledge, the information contained in this report is correct and true.

Type or print Name and Title of Authorized Representative certifying here.

**Mark Rohloff, City Manager**

| Signature of Authorized Representative | Date |
|---|---|
| Mark L. Rohloff | 9/15/2010 |

9. **FOR DEPARTMENTAL USE ONLY**

REGIONAL NONPOINT COORDINATOR -- Please complete the following:

☒ Checking here indicates that you received either planning or construction plans and specifications from the project sponsor, as appropriate. Attach a copy of the approval.

☐ Checking here indicates that you approved the final construction. Attach a copy of the final construction approval.

☐ Checking here indicates that you have approved the final Planning Product(s).

☐ Check here if two (2) signed, original copies of the Final Report and attachments have been sent to Runoff Management Section Grants Coordinator. Note: Regional Nonpoint Source Coordinator may retain one (1) copy of the signed, original Final Report.

Type or print Name of Regional Nonpoint Coordinator

| Signature of Regional Nonpoint Coordinator | Date |
|---|---|
| | |