



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

Reporting Period: July 1, 20 16 to June 30, 20 17

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

- Reporting visual monitoring data (Fill in all Sections). Number of samples collected: 10
- Reporting analytical monitoring data (Fill in all Sections). Number of samples collected: 0
- 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: 65776

Note: Read instructions before completing this Form.

B. Facility Information

1. MS4 Name: City of Flagstaff

2. MS4 Location

a. Address: 211 West Aspen Ave

b. City: Flagstaff

c. State: AZ d. Zip Code: 86004

3. Additional MS4 Information

Contact Name: Steve Camp E-mail: scamp@flagstaffaz.gov

Phone: (928) 213-2475

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

Prepared by: Steve Camp

Organization: City of Flagstaff - Water Services

E- mail: scamp@flagstaffaz.gov Phone: (928) 213-2475



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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							
40053	Rio de Flag			M	WW	None	Clear	None	<10%	None	N/A	
40058	Rio de Flag			M	WW	None	Clear	None	<10%	None	N/A	
40031	Rio de Flag			M	WW	None	Clear	None	<10%	None	N/A	
40119	Rio de Flag			M	WW	None	Clear	None	<10%	None	N/A	
40333	Bow and Arrow Wash			ND	WW	None	Clear	None	<10%	None	N/A	
40053	Rio de Flag	M			WW	None	Clear	None	<10%	None	N/A	
40058	Rio de Flag	M			WW	None	Clear	None	<10%	None	N/A	
40031	Rio de Flag	M			WW	None	Clear	None	<10%	None	N/A	
40119	Rio de Flag	M			WW	None	Clear	None	<10%	None	N/A	
40333	Bow and Arrow Wash	M			WW	None	Clear	None	<10%	None	N/A	
40053	Rio de Flag		ND		WW	N/A	N/A	N/A	N/A	N/A	N/A	
40058	Rio de Flag		ND		WW	N/A	N/A	N/A	N/A	N/A	N/A	
40031	Rio de Flag		ND		WW	N/A	N/A	N/A	N/A	N/A	N/A	
40119	Rio de Flag		ND		WW	N/A	N/A	N/A	N/A	N/A	N/A	
40333	Bow and Arrow Wash		ND		WW	N/A	N/A	N/A	N/A	N/A	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)
No rainfall received for second half of September and October to get second wet weather monitoring



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E. Certification

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.

Steve Camp

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

E-mail of Principal Executive Officer or Authorized Agent: scamp@flagstaffaz.gov


Signature of Principal Executive Officer or Authorized Agent

11-30-2017

Date