



**RULE 13 STORM WATER QUALITY  
MANAGEMENT PLAN (SWQMP) -  
PART A: INITIAL APPLICATION CERTIFICATION  
SUBMITTAL AND CHECKLIST**

State Form 51277 (R3 / 4-08)  
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

**For questions regarding this form, contact:**  
IDEM – Rule 13 Coordinator  
100 North Senate Avenue, Rm 1255  
MC 65-42  
Indianapolis, IN 46204-2251  
Phone: (317) 234-1601 or  
(800) 451-6027, ext. 41601 (within Indiana)  
Web Access:  
<http://www.in.gov/idem> (Search for Stormwater)

- NOTE:**
- This form must be used for compliance with a general NPDES permit pursuant to 327 IAC 15-13.
  - This completed form must be submitted with a complete NOI letter.
  - Return this form, and any required addenda by mail to the IDEM Rule 13 Coordinator at the address listed in the box on the upper-right.

**PART A: STORM WATER QUALITY MANAGEMENT PLAN CHECKLIST**

► Please check the appropriate box when the requirements for each numbered item have been met.

X	NA	ITEM
<input checked="" type="checkbox"/>		1. On page 2 of this form (TABLE 1: RESPONSIBLE ENTITY), provide a listing of entities that are covered under the attached NOI letter submittal. Duplicate the table if more entries are necessary and attach to this form.
<input checked="" type="checkbox"/>		2. On page 3 of this form (TABLE 2: SCHEDULE OF ACTIVITIES), provide an itemized schedule of activities related to SWQMP implementation, with a corresponding milestone date. Duplicate the table if more entries are necessary and attach to this form.
<input checked="" type="checkbox"/>		3. At a minimum, the schedule complies with the compliance schedule found in 327 IAC 15-13-11.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. On page 4 of this form (TABLE 3: PROPOSED BUDGET), provide an actual or estimated, proposed, itemized budget for the storm water program. Duplicate the table if more entity entries are necessary and attach to this form.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	5. For NOI letter submittals covering multiple entities, the budget allocation is separated by each entity covered under this NOI letter submittal.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6. The budget identifies funding sources.
<input checked="" type="checkbox"/>		7. The "SWQMP – Part A: Initial Application" was submitted within 90 days of Rule 13's effective date or within 180 days of becoming aware of changed entity designation conditions.
<input checked="" type="checkbox"/>		8. The "SWQMP – Part A: Initial Application" has been certified by a Qualified Professional and the MS4 Operator.

**PART B: CERTIFICATION AND SIGNATURE**

► The Qualified Professional and MS4 Operator (referenced in PART A, Item #8 of this form) must sign the following certification statement and provide the pertinent NPDES permit number:

*"By signing this form, I hereby certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate 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."*

Name of Qualified Professional: Shareen Wagley, MS4 Coordinator NPDES Permit #: INR040 0056  
(typed or printed)

Signature of Qualified Professional: \_\_\_\_\_ Date: September 1, 2008  
(mm/dd/year)

Name of MS4 Operator: Tom Bennington, Delaware County Commissioner  
(typed or printed)

Signature of MS4 Operator: \_\_\_\_\_ Date: September 1, 2008  
(mm/dd/year)

**TABLE 1: RESPONSIBLE ENTITY**

	Represented Entity Name	Entity Representative Name	Entity Representative Title	Mailing Address	Phone Number:	Facsimile Number (if applicable)	E-mail Address (if applicable)
1.	Delaware County	Tom Bennington	County Commissioner	Street address: <b>100 W. Main Street</b> <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village <b>Of: Muncie</b> Zip: <b>47305</b> County: <b>Delaware</b>	765-747-7730	765-747-7899	tbennington@co.delaware.in.us
2.	City of Muncie	Barbara Smith	Muncie Sanitary District Administrator	Street address: <b>300 N High Street</b> <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village <b>Of: Muncie</b> Zip: <b>47305</b> County: <b>Delaware</b>	765-808-1511	765-747-4719	basmith@msdeng.com
3.	Town of Yorktown	Tim Kelty	Town Manager	Street address: <input type="checkbox"/> City <input checked="" type="checkbox"/> Town <input type="checkbox"/> Village <b>Of: Yorktown</b> Zip: _____ County: _____	765-759-4003	765-759-4016	tkelty@yorktownindiana.org
4.	Ivy Tech-Muncie	Harry Muller	_____	Street address: <b>4301 S Cowan Rd.</b> <input checked="" type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village <b>Of: Muncie</b> Zip: <b>47302</b> County: <b>Delaware</b>	765-289-2291	_____	hmuller@ivytech.edu
5.	_____	_____	_____	Street address: _____ <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village <b>Of: _____</b> Zip: _____ County: _____	_____	_____	_____
6.	_____	_____	_____	Street address: _____ <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village <b>Of: _____</b> Zip: _____ County: _____	_____	_____	_____
7.	_____	_____	_____	Street address: _____ <input type="checkbox"/> City <input type="checkbox"/> Town <input type="checkbox"/> Village <b>Of: _____</b> Zip: _____ County: _____	_____	_____	_____

**TABLE 2: SCHEDULE OF ACTIVITIES**

	<b>Milestone Date</b>	<b>Activity Name</b>
<b>1.</b>	<b>September 2008</b>	<b>Merge individual local permits into one co-permit</b>
<b>2.</b>	<b>September 2008</b>	<b>Submit renewal NOI and SWQMP Part A</b>
<b>3.</b>	<b>January 2009</b>	<b>Consolidate individual SWQMP's into one under new permit</b>
<b>4.</b>	<b>November 2010 November 2012</b>	<b>Submit Annual Reports</b>
<b>5.</b>	<b>Throughout the term of the permit</b>	<b>Implementation of MCM1, Public Education and Outreach</b>
<b>6.</b>	<b>Throughout the term of the permit</b>	<b>Implementation of MCM2, Public Participation and Involvement</b>
<b>7.</b>	<b>Throughout the term of the permit</b>	<b>Implementation of MCM3, Illicit Discharge Detection and Elimination</b>
<b>8.</b>	<b>Throughout the term of the permit_</b>	<b>Implementation of MCM4, Construction Site Erosion Control</b>
<b>9.</b>	<b>Throughout the term of the permit_</b>	<b>Implementation of MCM5, Post-Construction Erosion Control</b>
<b>10.</b>	<b>Throughout the term of the permit</b>	<b>Implementation of MCM6, Good Housekeeping and Pollution Prevention</b>

**TABLE 3: PROPOSED BUDGET**

**↑ ENTITY:** Delaware County

<b>Control Measure/Item</b>		<b>Proposed Budget</b>
<b>1.</b>	Public Education and Outreach	<b>\$52,640.00 (MSD 66%, Delaware County 22%, Yorktown 12%) Ivy Tech in-kind</b>
<b>2.</b>	Public Participation/Involvement	<b>\$28,000.00 (MSD 66%, Delaware County 22%, Yorktown 12%), Ivy Tech in-kind</b>
<b>3.</b>	Illicit Discharge Detection and Elimination	<b>\$12,768.00 (MSD 66%, Delaware County 22%, Yorktown 12%)</b>
<b>4.</b>	Construction Site Run-Off Control	<b>\$6,720.00 (MSD 66%, Delaware County 22%, Yorktown 12%) Ivy Tech in-kind</b>
<b>5.</b>	Postconstruction Run-Off Control	<b>\$11,200.00 (MSD 66%, Delaware County 22%, Yorktown 12%)</b>
<b>6.</b>	Municipal Operations Pollution Prevention and Good Housekeeping	<b>\$57,120.00 (MSD 66%, Delaware County 22%, Yorktown 12%) Ivy Tech in-kind</b>
<b>7.</b>	On-Going Water Quality Characterization	<b>MSD Bureau of Water Quality</b>
<b>8.</b>	Other	<b>General Administration - \$133,000.00</b>
<b>9.</b>	Funding Source(s)	<b>Above budget based on yearly income of stormwater utility fees and subject to change. Street Sweeping, Storm Sewer Maintenance, Recycling, Ongoing characterization, Illicit Discharge Detection and HHW programs funded seperately through sewage fees and property taxes, not calculated in the above budget and also subject to change yearly. As of September 2008 the MSD also holds over \$300,000 in current grant funding for various programs that can all or partially be credited towards NPDES permit requirements. Amounts, duration and focus of programs subject to change throughout length of permit.</b>