

**Virginia Pollutant Discharge Elimination System (VPDES)
 General Permit for Stormwater Discharges Associated with Industrial Activity (VAR05)
 CHESAPEAKE BAY TMDL ACTION PLAN – ANNUAL REPORT**

(Please Type or Print All Information)

This Annual Update Report form is only to be used by facilities that submitted a Chesapeake TMDL Action Plan to DEQ.

1. Facility Information:

| | | | | |
|--|-----------------|---------|---------|---------|
| Facility Name: | | | | |
| Date Annual Report Submitted: | | | | |
| Facility General Permit Registration Number: | (ex. VAR05****) | | | |
| Facility Mailing Address: | (street) | | | |
| | (city) | (state) | (zip) | (phone) |
| Facility Action Plan Contact: | (name) | | (title) | |
| | (phone) | | (email) | |

Has the permitted facility made any modifications to the facility's industrial acreage or impervious industrial acreage since completing the required Chesapeake Bay TMDL Action Plan? Yes No

If Yes, complete a revised Chesapeake Bay TMDL Calculation Spreadsheet and revised Chesapeake Bay TMDL Action Plan (if required). Revised documents shall be submitted to the DEQ Regional Office servicing the facility within 90 days of the facility modification and maintained with the facility's SWPPP.

2. Necessary Total Pollutant Load Reductions:

Please note that you are to enter values in the unshaded cells only- Columns A & D. Only enter data for the pollutant(s) indicated on the spreadsheet as requiring a Chesapeake Bay Action Plan.

| Pollutant | A.) Facility Loading Rate (insert values from Chesapeake Bay TMDL Calculation Spreadsheet) (lbs/ac/yr) | B.) Permit Loading Values (lbs/ac/yr) | C.) Necessary Reduction – amount greater than permit loading value (lbs/ac/yr) =A-B | D.) Total Area of Industrial Activity (acres) | E.) Total Load Reduction (lbs/yr) =C*D |
|------------------------------|--|---------------------------------------|---|---|--|
| | Fill In Data Below | Default Value <i>Do Not Alter</i> | Calculated Field <i>Do Not Alter</i> | Fill In Data Below | Calculated Field <i>Do Not Alter</i> |
| Total Nitrogen (TN) | | | | | |
| Total Phosphorus (TP) | | | | | |
| Total Suspended Solids (TSS) | | | | | |

3.

| Summary of Actions Taken to Meet Necessary Reductions | Implementation Date |
|---|---------------------|
| | |
| | |
| | |
| | |

(If necessary please attach more pages to complete item #3)

4.:

Progress Made Towards Meeting Necessary Reductions (Quantitative Results and/or Narrative)

(If necessary please attach more pages to complete item #4)

5. Modification to Facility's Chesapeake Bay TMDL Action Plan:

Has the facility modified their submitted Chesapeake Bay TMDL Action Plan?

Yes No

If Yes, submit the revised Chesapeake Bay TMDL Action Plan with this Annual Report, to the DEQ Regional Office servicing the facility.

6. Trading and Offset Programs:

"The permittee may consider utilization of any pollutant trading or offset program in accordance with §§ 62.1-44.19:20 through 62.1-44.19:23 of the Code of Virginia, governing trading and offsetting, to meet the required reductions."

In lieu of meeting the necessary Chesapeake Bay TMDL reductions via best management practices (BMPs), retrofit programs, or other means and measures, is the permittee considering the use of pollutant trading or offset programs as authorized in the VPDES Industrial Stormwater General Permit?

Yes No

7. 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 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."

| | | | |
|------------|----------------------|--------|----------------------|
| Print Name | <input type="text"/> | Title: | <input type="text"/> |
| Signature: | <input type="text"/> | Date: | <input type="text"/> |