

**STORMWATER POLLUTION
PREVENTION PLAN
BOROUGH OF HARRINGTON PARK
BERGEN COUNTY, NEW JERSEY**

MARCH 2010

N.E.A. PROJECT NO.: HAPKMUN10.010

MAYOR PAUL. A. HOELSCHER

BOROUGH COUNCIL

MICHELLE RYAN
GREG EVANELLA
GLENN J. QUANTMEYER

THOMAS BETANCOURT
GLENN A. LUCIANO
JONATHAN ROTH

SPPP Signature Page

Municipality
Information

Municipality:Borough of Harrington Park County:Bergen

NJPDES # : NJG0141852 PI ID #: 210970

Team Member/Title:Paul A. Hoelscher / Mayor

Effective Date of Permit Authorization (EDPA):April 1, 2004

Date of Completion:April 1, 2005 Date of most recent update: March 16, 2010

"I certify that this SPPP includes all of the information and items identified in Attachment A of the Tier A Municipal Stormwater General Permit. 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 purposely, knowingly, recklessly, or negligently submitting false information."

(Signature)

(Date)

Paul A. Hoelscher
(Print Name)

Mayor
(Title)

(NOTE: A new SPPP signature page should be attached each time the SPPP is updated or modified, excluding data entries. Previous SPPP signature pages shall be retained as part of the SPPP.)

Tier A Municipal Stormwater Regulation Program

Stormwater Pollution Prevention Team Members

Number of team members may vary.

Completed by: Michael Neglia

Title: Professional Engineer

Date: March 02, 2010

Municipality: Borough of Harrington Park

County: Bergen

NJPDES #: NJG0141852

PI ID #: 210970

Stormwater Program Coordinator: Mark Kiernan

Title: DPW Superintendent

Office Phone #: 201-768-0944

Emergency Phone #: 201-768-0944

Public Notice Coordinator: Ann Bistriz

Title: Acting Borough Clerk

Office Phone #: 201-768-1700

Emergency Phone #: 201-768-1700

Post-Construction Stormwater Management Coordinator: Nicholas Lepore

Title: Construction Official

Office Phone #: 201-768-2585

Emergency Phone #: 201-768-2585

Local Public Education Coordinator: Mark Kiernan

Title: DPW Superintendent

Office Phone #: 201-768-0944

Emergency Phone #: 201-768-0944

Ordinance Coordinator: Robert Regan

Title: Borough Attorney

Office Phone #: (201) 664-3344

Emergency Phone #: (201) 664-3344

Public Works Coordinator: Mark Kiernan

Title: DPW Superintendent

Office Phone #: 201-768-0944

Emergency Phone #: 201-768-0944

Employee Training Coordinator: Mark Kiernan

Title: DPW Superintendent

Office Phone #: 201-768-0944

Emergency Phone #: 201-768-0944

Other: _____

Title: _____

Office Phone #: _____

Emergency Phone #: _____

SPPP Form 2 - Public Notice

Municipality
Information

Municipality: Borough of Harrington Park

County: Bergen

NJPDES # : NJG0141852

PI ID #: 210970

Team Member/Title: Ann Bistriz / Acting Borough Clerk

Effective Date of Permit Authorization (EDPA): April 1, 2004

Date of Completion: April 8, 2005

Date of most recent update: March 16, 2010

Briefly outline the principal ways in which you comply with applicable State and local public notice requirements when providing for public participation in the development and implementation of your stormwater program.

For meetings where public notice is required under the Open Public Meetings Act ("Sunshine Law", N.J.S.A. 10:4-6 et seq.), the Borough of Harrington Park provides public notice in a manner that complies with the requirements of the Act. Also, in regards to the passage of ordinances, the Borough of Harrington Park provides notice in a manner that complies with the requirements of N.J.S.A. 40:49-1 et seq. In addition, for municipal actions (e.g., the adoption of the municipal stormwater management plan) subject to public notice requirements in the Municipal Land Use Law (N.J.S.A. 40:55D-1 et seq.), the Borough of Harrington Park complies with those requirements.

The Borough of Harrington Park will publish the public notice in "Press Journal", "Bergen Record", and / or "Suburbanite".

SPPP Form 3 – New Development and Redevelopment Program

Municipality Information

Municipality: Borough of Harrington Park County: Bergen
 NJPDES # : NJG0141852 PI ID #: 210970
 Team Member/Title: Nicholas Lepore / Construction Official
 Effective Date of Permit Authorization (EDPA): April 1, 2004
 Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Describe in general terms your post-construction stormwater management in new development and redevelopment program (post-construction program), and how it complies with the Tier A Permit minimum standard. This description must address compliance with the Residential Site Improvement Standards for stormwater management; ensuring adequate long-term operation and maintenance of BMPs (including BMPs on property that you own or operate); design of storm drain inlets (including inlets that you install); and preparation, adoption, approval, and implementation of a municipal stormwater management plan and municipal stormwater control ordinance(s). Attach additional pages as necessary. Some additional specific information (mainly about that plan and ordinance(s)) will be provided in your annual reports.

The Borough of Harrington Park is ensuring that all new residential development and redevelopment projects that are subject to the Residential Site Improvement Standards for stormwater management (including the NJDEP Stormwater Management Rules N.J.A.C. 7:8, referenced in those standards) are in compliance with those standards. The Borough's Planning and Zoning Boards ensure such compliance before issuing preliminary subdivision, final subdivision, and / or site plan approvals under the Municipal Land Use Law.

Since the EDPA, the Borough of Harrington Park constructed improvements to the Highlands Field and Pondside Park recreation field complexes on Borough property. The Borough maintains and operates all BMPs on these subject properties.

All new storm drain inlets installed are required to comply with the design standards in Attachment C of the Borough's General Stormwater Permit. Since the stormwater control ordinance has been enacted, the Borough of Harrington Park ensures such operation and maintenance by complying with the maintenance requirements in the said ordinance. In addition, any storm drain inlets installed for such projects are to comply with that ordinance's standard for such inlets.

The Borough has adopted both a Municipal Stormwater Management Plan and Stormwater Control Ordinance in accordance with the requirements set forth by the Municipal Stormwater Management Program. Both the Plan and Ordinance have been reviewed and approved by Bergen County.

SPPP Form 3 – New Development and Redevelopment Program

Municipality
Information

Municipality: Borough of Harrington Park

County: Bergen

NJPDES # : NJG0141852

PI ID #: 210970

Team Member/Title: Nicholas Lepore / Construction Official

Effective Date of Permit Authorization (EDPA): April 1, 2004

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Describe in general terms your post-construction stormwater management in new development and redevelopment program (post-construction program), and how it complies with the Tier A Permit minimum standard. This description must address compliance with the Residential Site Improvement Standards for stormwater management; ensuring adequate long-term operation and maintenance of BMPs (including BMPs on property that you own or operate); design of storm drain inlets (including inlets that you install); and preparation, adoption, approval, and implementation of a municipal stormwater management plan and municipal stormwater control ordinance(s). Attach additional pages as necessary. Some additional specific information (mainly about that plan and ordinance(s)) will be provided in your annual reports.

cont.

The ordinance that is administered by the Borough of Harrington Park's Construction Official, controls stormwater from non-residential development and redevelopment projects. Where it is necessary to implement the stormwater management plan, the approved ordinance also controls aspects of residential development projects that are not subject to the Residential Site Improvement Standards.

The Borough of Harrington Park enforces, through the municipal stormwater control ordinance, compliance with the design standard in Attachment C of the permit to control passage of solid and floatable materials through storm drain inlets. The Borough of Harrington Park expects that for most projects such compliance is to be achieved by the installation of the NJDOT bicycle safe grate (if needed) with a curb opening with a clear space no bigger than two (2) inches across the smallest diameter.

SPPP Form 4- Local Public Education Program

Municipality
Information

Municipality: Borough of Harrington Park County Bergen County

NJPDES # : 0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Local Public Education Program

Describe your Local Public Education Program. Be specific on how you will distribute your educational information, and how you will conduct your annual event. Attach additional pages with the date(s) of your annual mailing and the date and location of your annual event.

To fulfill the annual distribution requirement of the local public education program, the Borough of Harrington Park provides the educational brochure provided by the NJDEP within its newsletter which is mailed and placed on the Borough website. Upon request, extra copies are made available at the Borough's municipal building and / or are mailed to a requested Borough address.

Educational materials are also available at Borough Family Day, an annual event usually held at Highland Field in May.

A log for mailing dates / website posting dates and annual event information is attached.

Local Public Education Program

_____, New Jersey
Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
|------|--|---|
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
|------|-------|----------|
| | | |

Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
|------|--|---|
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
|------|-------|----------|
| | | |

Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
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| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
|------|-------|----------|
| | | |

Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
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| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
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| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |
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Annual Event

| Date | Event | Location |
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Local Public Education Program

_____, New Jersey
Year: _____

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Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

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If NO, list locations:

Date: _____ Mailed to: _____
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Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

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|------|--|---|
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Annual Event

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Year: _____

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Annual Event

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Year: _____

Annual Mailing

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Date: _____ Mailed to: _____
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Annual Event

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Local Public Education Program

_____, New Jersey
Year: _____

Annual Mailing

| Date | To All Residents and Businesses | | | | Mailed: | | | |
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| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

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Year: _____

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Annual Event

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| | | |

Year: _____

Annual Mailing

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| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

If NO, list locations:

Date: _____

Mailed to: _____

Date: _____

Mailed to: _____

Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

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| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

If NO, list locations:

Date: _____

Mailed to: _____

Date: _____

Mailed to: _____

Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

| Date | To All Residents and Businesses | | | | Mailed: | | | |
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If NO, list locations:

Date: _____

Mailed to: _____

Date: _____

Mailed to: _____

Annual Event

| Date | Event | Location |
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| | | |

Local Public Education Program

_____, New Jersey
Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
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If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
|------|-------|----------|
| | | |

Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
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Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
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| | | |

Year: _____

Annual Mailing

| Date | To All Residents and Businesses | | | | Mailed: | | | |
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| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

| Date | To All Residents and Businesses | | | | Mailed: | | | |
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| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

| Date | To All Residents and Businesses | | | | Mailed: | | | |
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| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
|------|-------|----------|
| | | |

Local Public Education Program

_____, New Jersey
Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
|------|--|---|
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

| Date | To All Residents and Businesses | Mailed: |
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| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | <input type="checkbox"/> ALONE <input type="checkbox"/> WITH: _____ |

If NO, list locations:

Date: _____ Mailed to: _____
Date: _____ Mailed to: _____

Annual Event

| Date | Event | Location |
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Year: _____

Annual Mailing

| Date | To All Residents and Businesses | | | | Mailed: | | | |
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| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

If NO, list locations:

Date: _____

Mailed to: _____

Date: _____

Mailed to: _____

Annual Event

| Date | Event | Location |
|------|-------|----------|
| | | |

Year: _____

Annual Mailing

| Date | To All Residents and Businesses | | | | Mailed: | | | |
|------|---------------------------------|-----|--------------------------|----|--------------------------|-------|--------------------------|-------------|
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

If NO, list locations:

Date: _____

Mailed to: _____

Date: _____

Mailed to: _____

Annual Event

| Date | Event | Location |
|------|-------|----------|
| | | |

Year: _____

Annual Mailing

| Date | To All Residents and Businesses | | | | Mailed: | | | |
|------|---------------------------------|-----|--------------------------|----|--------------------------|-------|--------------------------|-------------|
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |
| | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | ALONE | <input type="checkbox"/> | WITH: _____ |

If NO, list locations:

Date: _____

Mailed to: _____

Date: _____

Mailed to: _____

Annual Event

| Date | Event | Location |
|------|-------|----------|
| | | |

SPPP Form 5 – Storm Drain Inlet Labeling

Municipality
Information

Municipality: Borough of Harrington Park County Bergen

NJPDES # : 0141852 PI ID #: 210970

Team Member/Title: Nicholas Lepore / Construction Official

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Storm Drain Inlet Labeling

Describe your storm drain inlet labeling program, including your labeling schedule, the details of your long-term maintenance plan, and plans on coordinating with watershed groups or other volunteer organizations.

The Borough of Harrington Park DPW has completed its storm drain labeling program. All storm drains that are along municipal streets with sidewalks, and all storm drain inlets within plazas, parking areas or maintenance yards that are operated by the Borough of Harrington Park have been labeled using either stencils, tags, or plastic labels.

During the annual catch basin cleaning program, the Borough checks these labels to ensure that they are still visible. Labels that are not visible are replaced immediately.

A map of the two sectors for which labeling has been prepared is available at Borough Hall and/or the Borough DPW building.

SPPP Form 6 – MS4 Outfall Pipe Mapping

Municipality
Information

Municipality: Borough of Harrington Park County Bergen

NJPDES # : 0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Explain how you will prepare your map (include its type and scale, and the schedule for the mapping process). Who will prepare your map (e.g., municipal employees, a consultant, etc.)?

Outfall mapping on maps with a scale of 1 inch = 1,000 ft or larger has been completed by the Borough Department of Public Works and is located at the Borough of Harrington Park offices.

Alphanumeric identifiers have been assigned to each outfall. All water bodies receiving outfall pipe discharges have been identified on the map.

SPPP Form 7 – Illicit Connection Elimination Program

Municipality
Information

Municipality: Borough of Harrington Park County Bergen

NJPDES # : 0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Describe your Illicit Connection Elimination Program, and explain how you plan on responding to complaints and/or reports of illicit connections (e.g., hotlines, etc.). Attach additional pages as necessary.

The Borough of Harrington Park has conducted an initial physical inspection of all municipal outfall pipes. All future inspections are to be conducted using the DEP Illicit Connection Inspection Report Form. Each of these forms are kept with the Borough of Harrington Park's SPPP records. Outfall pipes that are found to have dry weather flow or evidence of intermittent non-stormwater flow are investigated to locate the illicit connection. If the Borough of Harrington Park is able to locate the connection (and the connection is within the Borough of Harrington Park), the responsible party is to be notified immediately, and a citation is issued if the connection is not corrected or removed.

If, after the appropriate amount of investigation, the Borough of Harrington Park is unable to locate the source of the illicit connection, the Closeout Investigation Form is to be submitted with the Annual Inspection and Recertification. If an illicit connection is found to originate from another public entity, the Borough of Harrington Park is to report the illicit connection to the Department.

Residents can report illicit connections to the Borough of Harrington Park by calling or writing the Borough of Harrington Park DPW Superintendent (Mark Kiernan).

Illicit Connection Inspection Report Form

| | | |
|-------------------------------------|---------------------|--|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ | Effective Date of Permit Authorization (EDPA): _____ |

Outfall #: _____ Location: _____
Receiving Waterbody: _____

1. Is there a dry weather flow? Y () N ()

 2. If "YES", what is the outfall flow estimate? _____ gpm
(flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)

 3. Are there any indications of an intermittent flow? Y () N ()

 4. If you answered "NO" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
(NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).
- If you answered "YES" to either question, please continue on to question # 5.
(NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

(a) ODOR: _____
(b) COLOR: _____
(c) TURBIDITY: _____
(d) FLOATABLES: _____
(e) DEPOSITS/STAINS: _____
(f) VEGETATION CONDITIONS: _____
(g) DAMAGE TO OUTFALL STRUCTURES: _____
 IDENTIFY STRUCTURE: _____
 DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**
* field calibrate instruments in accordance with manufacturer's instructions prior to testing.

(a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____ mg/L

(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? **Y** () **N** ()

If "**YES**", what is the suspected source? _____

If "**NO**", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () **N** ()

If "**YES**", proceed to question # 9.

If "**NO**", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? **Y** () **N** ()

If "**YES**", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "**NO**" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Closeout Investigation Form

Municipality
Information

Municipality: _____
NJPDES #: _____
Team Member / Title: _____

County: _____
PI ID #: _____

Outfall #: _____ Location: _____

Receiving Waterbody: _____

Basis for Submittal:

- () A non-stormwater discharge was found, but no source was located within six months.

- () An intermittent non-stormwater discharge was observed, and three unsuccessful investigations were conducted to investigate the discharge while it was flowing.

Describe each phase of your investigation, including dates. Attach additional pages as necessary:

Inspector's Name: _____
Title: _____
Signature: _____
Date: _____

Complete and attach this form to the appropriate Illicit Connection Inspection Report Form and submit with the Annual Report and Certification.

Illicit Connection Inspection Report Form

| | | |
|---------------------------------|---------------------|--|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ | Effective Date of Permit Authorization (EDPA): _____ |

Outfall #: _____ Location: _____
 Receiving Waterbody: _____

1. Is there a dry weather flow? **Y** () **N** ()

2. If "YES", what is the outfall flow estimate? _____ gpm
 (flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)

3. Are there any indications of an intermittent flow? **Y** () **N** ()

4. If you answered "NO" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
 (NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).

- If you answered "YES" to either question, please continue on to question # 5.
 (NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

(a) ODOR: _____

(b) COLOR: _____

(c) TURBIDITY: _____

(d) FLOATABLES: _____

(e) DEPOSITS/STAINS: _____

(f) VEGETATION CONDITIONS: _____

(g) DAMAGE TO OUTFALL STRUCTURES: _____
 IDENTIFY STRUCTURE: _____
 DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**
 * field calibrate instruments in accordance with manufacturer's instructions prior to testing.

(a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____ mg/L

(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? Y () N ()

If "YES", what is the suspected source? _____

If "NO", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () N ()

If "YES", proceed to question # 9.

If "NO", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? Y () N ()

If "YES", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "NO" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Illicit Connection Inspection Report Form

| | | |
|-------------------------------------|---------------------|--|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ | Effective Date of Permit Authorization (EDPA): _____ |

Outfall #: _____ Location: _____
 Receiving Waterbody: _____

1. Is there a dry weather flow? **Y** () **N** ()

2. If "YES", what is the outfall flow estimate? _____ gpm
 (flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)

3. Are there any indications of an intermittent flow? **Y** () **N** ()

4. If you answered "**NO**" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
 (NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).

- If you answered "**YES**" to either question, please continue on to question # 5.
 (NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

(a) ODOR: _____

(b) COLOR: _____

(c) TURBIDITY: _____

(d) FLOATABLES: _____

(e) DEPOSITS/STAINS: _____

(f) VEGETATION CONDITIONS: _____

(g) DAMAGE TO OUTFALL STRUCTURES: _____
 IDENTIFY STRUCTURE: _____
 DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**
 * field calibrate instruments in accordance with manufacturer's instructions prior to testing.

(a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____ mg/L

(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? Y () N ()

If "YES", what is the suspected source? _____

If "NO", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () N ()

If "YES", proceed to question # 9.

If "NO", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? Y () N ()

If "YES", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "NO" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Closeout Investigation Form

| | | |
|-----------------------------|----------------------------|----------------|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member / Title: _____ | |

Outfall #: _____ Location: _____

Receiving Waterbody: _____

Basis for Submittal:

- () A non-stormwater discharge was found, but no source was located within six months.
- () An intermittent non-stormwater discharge was observed, and three unsuccessful investigations were conducted to investigate the discharge while it was flowing.

Describe each phase of your investigation, including dates. Attach additional pages as necessary:

Inspector's Name: _____
Title: _____
Signature: _____
Date: _____

Complete and attach this form to the appropriate Illicit Connection Inspection Report Form and submit with the Annual Report and Certification.

Illicit Connection Inspection Report Form

| | | |
|---------------------------------|---------------------|--|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ | Effective Date of Permit Authorization (EDPA): _____ |

Outfall #: _____ Location: _____
 Receiving Waterbody: _____

1. Is there a dry weather flow? Y () N ()

2. If "YES", what is the outfall flow estimate? _____ gpm
 (flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)

3. Are there any indications of an intermittent flow? Y () N ()

4. If you answered "NO" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
 (NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).

 If you answered "YES" to either question, please continue on to question # 5.
 (NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

(a) ODOR: _____

(b) COLOR: _____

(c) TURBIDITY: _____

(d) FLOATABLES: _____

(e) DEPOSITS/STAINS: _____

(f) VEGETATION CONDITIONS: _____

(g) DAMAGE TO OUTFALL STRUCTURES: _____
 IDENTIFY STRUCTURE: _____
 DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**
 * field calibrate instruments in accordance with manufacturer's instructions prior to testing.

(a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____mg/L

(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? **Y** () **N** ()

If "**YES**", what is the suspected source? _____

If "**NO**", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () **N** ()

If "**YES**", proceed to question # 9.

If "**NO**", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? **Y** () **N** ()

If "**YES**", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "**NO**" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Closeout Investigation Form

Municipality
Information

Municipality: _____

County: _____

NJPDES #: _____

PI ID #: _____

Team Member / Title: _____

Outfall #: _____ Location: _____

Receiving Waterbody: _____

Basis for Submittal:

- A non-stormwater discharge was found, but no source was located within six months.
- An intermittent non-stormwater discharge was observed, and three unsuccessful investigations were conducted to investigate the discharge while it was flowing.

Describe each phase of your investigation, including dates. Attach additional pages as necessary:

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

Complete and attach this form to the appropriate Illicit Connection Inspection Report Form and submit with the Annual Report and Certification.

Illicit Connection Inspection Report Form

| | | |
|-----------------------------|---------------------|--|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ | Effective Date of Permit Authorization (EDPA): _____ |

Outfall #: _____ Location: _____
Receiving Waterbody: _____

1. Is there a dry weather flow? Y () N ()
2. If "YES", what is the outfall flow estimate? _____ gpm
(flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)
3. Are there any indications of an intermittent flow? Y () N ()
4. If you answered "NO" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
(NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).

If you answered "YES" to either question, please continue on to question # 5.
(NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

- (a) ODOR: _____
- (b) COLOR: _____
- (c) TURBIDITY: _____
- (d) FLOATABLES: _____
- (e) DEPOSITS/STAINS: _____
- (f) VEGETATION CONDITIONS: _____
- (g) DAMAGE TO OUTFALL STRUCTURES: _____
IDENTIFY STRUCTURE: _____
DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**

* field calibrate instruments in accordance with manufacturer's instructions prior to testing.

- (a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____ mg/L

(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? Y () N ()

If "YES", what is the suspected source? _____

If "NO", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () N ()

If "YES", proceed to question # 9.

If "NO", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? Y () N ()

If "YES", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "NO" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Closeout Investigation Form

Municipality
Information

Municipality: _____

County: _____

NJPDES #: _____

PI ID #: _____

Team Member / Title: _____

Outfall #: _____ Location: _____

Receiving Waterbody: _____

Basis for Submittal:

- A non-stormwater discharge was found, but no source was located within six months.

- An intermittent non-stormwater discharge was observed, and three unsuccessful investigations were conducted to investigate the discharge while it was flowing.

Describe each phase of your investigation, including dates. Attach additional pages as necessary:

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

Complete and attach this form to the appropriate Illicit Connection Inspection Report Form and submit with the Annual Report and Certification.

Illicit Connection Inspection Report Form

| | | |
|---------------------------------|--|----------------|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ Effective Date of Permit Authorization (EDPA): _____ | |

Outfall #: _____ Location: _____
 Receiving Waterbody: _____

1. Is there a dry weather flow? **Y** () **N** ()

2. If "YES", what is the outfall flow estimate? _____ gpm
 (flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)

3. Are there any indications of an intermittent flow? **Y** () **N** ()

4. If you answered "**NO**" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
 (NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).

 If you answered "**YES**" to either question, please continue on to question # 5.
 (NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

(a) ODOR: _____

(b) COLOR: _____

(c) TURBIDITY: _____

(d) FLOATABLES: _____

(e) DEPOSITS/STAINS: _____

(f) VEGETATION CONDITIONS: _____

(g) DAMAGE TO OUTFALL STRUCTURES: _____
 IDENTIFY STRUCTURE: _____
 DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**
 * field calibrate instruments in accordance with manufacturer's instructions prior to testing.

(a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____ mg/L

(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? Y () N ()

If "YES", what is the suspected source? _____

If "NO", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () N ()

If "YES", proceed to question # 9.

If "NO", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? Y () N ()

If "YES", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "NO" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Closeout Investigation Form

Municipality
Information

Municipality: _____

County: _____

NJPDES #: _____

PI ID #: _____

Team Member / Title: _____

Outfall #: _____ Location: _____

Receiving Waterbody: _____

Basis for Submittal:

- () A non-stormwater discharge was found, but no source was located within six months.
- () An intermittent non-stormwater discharge was observed, and three unsuccessful investigations were conducted to investigate the discharge while it was flowing.

Describe each phase of your investigation, including dates. Attach additional pages as necessary:

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

Complete and attach this form to the appropriate Illicit Connection Inspection Report Form and submit with the Annual Report and Certification.

Illicit Connection Inspection Report Form

| | | |
|-------------------------------------|--|----------------|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ Effective Date of Permit Authorization (EDPA): _____ | |

Outfall #: _____ Location: _____
Receiving Waterbody: _____

1. Is there a dry weather flow? Y () N ()

2. If "YES", what is the outfall flow estimate? _____ gpm
(flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)

3. Are there any indications of an intermittent flow? Y () N ()

4. If you answered "NO" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
(NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).

- If you answered "YES" to either question, please continue on to question # 5.
(NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

- (a) ODOR: _____
- (b) COLOR: _____
- (c) TURBIDITY: _____
- (d) FLOATABLES: _____
- (e) DEPOSITS/STAINS: _____
- (f) VEGETATION CONDITIONS: _____
- (g) DAMAGE TO OUTFALL STRUCTURES: _____
 IDENTIFY STRUCTURE: _____
 DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**

* field calibrate instruments in accordance with manufacturer's instructions prior to testing.

- (a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____ mg/L

(if the fluoride levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To differentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? Y () N ()

If "YES", what is the suspected source? _____

If "NO", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () N ()

If "YES", proceed to question # 9.

If "NO", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? Y () N ()

If "YES", identify the source. _____

What plan of action will follow to eliminate the illicit connection?

Resolution:

If "NO" complete the Closeout Investigation Form and attach it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Illicit Connection Inspection Report Form

| | | |
|-------------------------------------|--|----------------|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ Effective Date of Permit Authorization (EDPA): _____ | |

Outfall #: _____ Location: _____
Receiving Waterbody: _____

1. Is there a dry weather flow? Y () N ()
 2. If "YES", what is the outfall flow estimate? _____ gpm
(flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)
 3. Are there any indications of an intermittent flow? Y () N ()
 4. If you answered "NO" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
(NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).
- If you answered "YES" to either question, please continue on to question # 5.
(NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

- (a) ODOR: _____
- (b) COLOR: _____
- (c) TURBIDITY: _____
- (d) FLOATABLES: _____
- (e) DEPOSITS/STAINS: _____
- (f) VEGETATION CONDITIONS: _____
- (g) DAMAGE TO OUTFALL STRUCTURES: _____
IDENTIFY STRUCTURE: _____
DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**

* field calibrate instruments in accordance with manufacturer's instructions prior to testing.

- (a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____ mg/L

(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? Y () N ()

If "**YES**", what is the suspected source? _____

If "**NO**", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () N ()

If "**YES**", proceed to question # 9.

If "**NO**", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? Y () N ()

If "**YES**", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "NO" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Illicit Connection Inspection Report Form

| | | |
|-------------------------------------|--|----------------|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ Effective Date of Permit Authorization (EDPA): _____ | |

Outfall #: _____ Location: _____
Receiving Waterbody: _____

1. Is there a dry weather flow? **Y** () **N** ()

2. If "YES", what is the outfall flow estimate? _____ gpm
(flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)

3. Are there any indications of an intermittent flow? **Y** () **N** ()

4. If you answered "NO" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
(NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).

If you answered "YES" to either question, please continue on to question # 5.
(NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. PHYSICAL OBSERVATIONS:

- (a) ODOR: _____
- (b) COLOR: _____
- (c) TURBIDITY: _____
- (d) FLOATABLES: _____
- (e) DEPOSITS/STAINS: _____
- (f) VEGETATION CONDITIONS: _____
- (g) DAMAGE TO OUTFALL STRUCTURES: _____
IDENTIFY STRUCTURE: _____
DAMAGE: _____

6. ANALYSES OF OUTFALL FLOW SAMPLE:

* field calibrate instruments in accordance with manufacturer's instructions prior to testing.

- (a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

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(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? Y () N ()

If "YES", what is the suspected source? _____

If "NO", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () N ()

If "YES", proceed to question # 9.

If "NO", ship to signature block on the bottom of this form.

9. Was the source of the illicit connection found? Y () N ()

If "YES", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "NO" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

Illicit Connection Inspection Report Form

| | | |
|---------------------------------|---------------------|--|
| Municipality Information | Municipality: _____ | County: _____ |
| | NJPDES #: _____ | PI ID #: _____ |
| | Team Member: _____ | |
| | Date: _____ | Effective Date of Permit Authorization (EDPA): _____ |

Outfall #: _____ Location: _____
 Receiving Waterbody: _____

1. Is there a dry weather flow? Y () N ()

2. If "YES", what is the outfall flow estimate? _____ gpm
 (flow sample should be kept for further testing, and this form will need to be submitted with the Annual Report and Certification)

3. Are there any indications of an intermittent flow? Y () N ()

4. If you answered "NO" to BOTH questions # 1 and # 3, there is probably not an illicit connection and you can skip to question # 7.
 (NOTE: This form **does not** need to be submitted to the Department, but should be kept with your SPPP).

If you answered "YES" to either question, please continue on to question # 5.
 (NOTE: This form will need to be submitted to the Department with the Annual Report and Certification).

5. **PHYSICAL OBSERVATIONS:**

(a) ODOR: _____

(b) COLOR: _____

(c) TURBIDITY: _____

(d) FLOATABLES: _____

(e) DEPOSITS/STAINS: _____

(f) VEGETATION CONDITIONS: _____

(g) DAMAGE TO OUTFALL STRUCTURES: _____
 IDENTIFY STRUCTURE: _____
 DAMAGE: _____

6. **ANALYSES OF OUTFALL FLOW SAMPLE:**
 * field calibrate instruments in accordance with manufacturer's instructions prior to testing.

(a) **DETERGENTS:** _____ mg/L

(if sample is greater than 0.06mg/L, the sample is contaminated with detergents (which may be from sanitary wastewater or other sources). Further testing is required and this outfall should be given the highest priority).

(if the sample is not greater than 0.06m/L and it does not show physical characteristics of sanitary wastewater (e.g., odor, floatables, and/or color) it is unlikely that it is from sanitary wastewater sources, yet there may still be an illicit connection of industrial wastewater, rinse water, backwash or cooling water. Skip to question # 6c).

(b) **AMONIA (as N) TO POTASSIUM RATIO:** _____

(if the Ammonia to Potassium Ration is greater than 0.6:1, then it is likely that the pollutant is sanitary sewerage)

(if the Ammonia to Potassium Ratio is less than or equal to 0.6:1, then the pollutant is from another washwater source).

(c) **FLUORIDE:** _____ mg/L

(if the fluoroide levels are between 1.0 and 2.5 mg/L, then the flow is most likely from fluoride treated potable water).

(if the sample tests below a detection limit of 0.1 mg/L for fluoride, it is likely to be from ground water infiltration, springs, or streams. In some cases, however, it is possible that the discharge could originate from an onsite well used for industrial cooling water, which will test non-detect for both detergents and fluoride. To ddifferentiate between these cooling water discharges and fluoride. To differentiate between these cooling water discharges and groundwater infiltration, you will have to rely on temperature).

(d) **TEMPERATURE:** _____ °F

(if the temperature of the sample is over 70°F, it is most likely cooling water)

(if the temperature of the sample is under 70°F, it is most likely from ground water infiltration)

7. Is there a suspected illicit connection? Y () N ()

If "YES", what is the suspected source? _____

If "NO", ship to signature block on the bottom of this form.

8. Has the investigation of the suspected illicit connection been completed?

Y () N ()

If "YES", proceed to question # 9.

If "NO", skip to signature block on the bottom of this form.

9. Was the source of the illicit connection found? Y () N ()

If "YES", identify the source. _____

What plan of action will follow to elimiate the illicit connection?

Resolution:

If "NO" complete the Closeout Investigation Form and attache it to this Illicit Connection Inspection Report Form.

Inspector's Name: _____

Title: _____

Signature: _____

Date: _____

If there is a dry weather flow or evidence of an intermittent flow, be sure to include this form with your Annual Report and Certification.

If there is not a dry weather flow or evidence of an intermittent flow, this form should be retained with your SPPP.

SPPP Form 8 – Illicit Connection Records

Municipality Information

Municipality: Borough of Harrington Park County Bergen
 NJPDES # : 0141852 PI ID #: 210970
 Team Member/Title: Mark Kiernan / DPW Superintendent
 Effective Date of Permit Authorization (EDPA): 04/01/04
 Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Prior to May 2, 2006

Note: Attach a copy of each illicit connection report form for outfalls found to have a dry weather flow.

Total number of inspections performed this year? Began April 2005

Number of outfalls found to have a dry weather flow? _____

Number of outfalls found to have an illicit connection? _____

How many illicit connections were eliminated? _____

Of the illicit connections found, how many remain? _____

May 2, 2006 – May 1, 2007

Note: Attach a copy of each illicit connection report form for outfalls found to have a dry weather flow.

Total number of inspections performed this year? _____

Number of outfalls found to have a dry weather flow? _____

Number of outfalls found to have an illicit connection? _____

How many illicit connections were eliminated? _____

Of the illicit connections found, how many remain? _____

May 2, 2007 – May 1, 2008

Note: Attach a copy of each illicit connection report form for outfalls found to have a dry weather flow.

Total number of inspections performed this year? _____

Number of outfalls found to have a dry weather flow? _____

Number of outfalls found to have an illicit connection? _____

How many illicit connections were eliminated? _____

Of the illicit connections found, how many remain? _____

May 2, 2008 – May 1, 2009

Note: Attach a copy of each illicit connection report form for outfalls found to have a dry weather flow.

Total number of inspections performed this year? _____

Number of outfalls found to have a dry weather flow? _____

Number of outfalls found to have an illicit connection? _____

How many illicit connections were eliminated? _____

Of the illicit connections found, how many remain? _____

SPPP Form 9 – Yard Waste Ordinance/Collection Program

Municipality
Information

Municipality: Borough of Harrington Park County Bergen

NJPDES # : 0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Please describe your yard waste collection program. Be sure to include the collection schedule and how you will notify the residents and businesses of this schedule. Attach additional pages as necessary.

The Borough of Harrington Park collects containized and non-containerized yard waste per the Borough Collection Schedule calendar. Residents and businesses in the Borough are notified via a the Borough website or from a written Borough newsletter.

SPPP Form 10 - Ordinances

Municipality
Information

Municipality: Borough of Harrington Park County Bergen

NJPDES # : 0141852 PI ID #: 210970

Team Member/Title: Robert Regan / Borough Attorney

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

For each ordinance, give the date of adoption. If not adopted, explain the development status:

Pet Waste April 1, 2006

Are information sheets regarding pet waste distributed with pet licenses? Y () N ()

Litter April 1, 2006

Improper Waste Disposal April 1, 2006

Wildlife Feeding April 1, 2006

Yard Waste April 1, 2006

Illicit Connections April 1, 2006

How will these ordinances be enforced?

The Borough of Harrington Park zoning officer, department of health, and police department enforce these ordinances. Warning, fines, and summons are applicable for violations of these ordinances.

SPPP Form 11 – Storm Drain Inlet Retrofitting

Municipality Information

Municipality: Borough of Harrington Park County Bergen
 NJPDES # :0141852PI ID #: 210970
 Team Member/Title: Mark Kiernan / DPW Superintendent
 Effective Date of Permit Authorization (EDPA):04/01/04
 Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

What type of storm drain inlet design will generally be used for retrofitting?

Parallel Bar Grate Type 'B' - Campbell Foundry No. 2618

| Repaving, repairing, reconstruction or alteration project name | Projected start date | Start date | Date of completion | # of storm drain inlets | # of storm drains w/ hydraulic exemptions |
|--|----------------------|------------|--------------------|-------------------------|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Are you claiming any alternative device exemptions or historic place exemptions for any of the above projects? Please explain:

SPPP Form 12 – Street Sweeping and Road Erosion Control Maintenance

Municipality
Information

Municipality: Borough of Harrington Park County: Bergen

NJPDES # :0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Street Sweeping

Please describe the street sweeping schedule that you will maintain.

(NOTE: Attach a street sweeping log containing the following information: date and area swept, # of miles swept and the total amount of materials collected.)

The Borough of Harrington Park sweeps all municipal curbed roads with inlets, with posted speed limits of 35 mph or less in all areas, with weather and street surface conditions permitting, at least once per week.

Road Erosion Control Maintenance

Describe your Road Erosion Control Maintenance Program, including inspection schedules. A list of all sites of roadside erosion and the repair technique(s) you will be using for each site should be attached to this form.

(NOTE: Attach a road erosion control maintenance log containing the following information: location, repairs, date)

The Borough of Harrington Park uses the Borough Department of Public Works (DPW) to monitor all of their roads and streets for erosion problems. All identified road erosion problems are reported to the DPW Superintendent. During SPPP Team/ DPW Meetings, identified areas of erosion are discussed and repairs are prioritized. All maintenance personnel is then assigned to the areas of concern, and the areas identified to have road erosion problems are repaired in accordance with the Standards for Soil Erosion and Sediment Control in New Jersey. All maintenance personnel maintain an inspection log, and the DPW Superintendent maintains a list of all repairs and their completion dates. The status of the Road Control Maintenance Program is to be included in the Annual Report and Recertification.

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|-------------|---|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |

Additional Information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|-------------|---|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |

Additional information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|-------------|---|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |

Additional Information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|-------------|---|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
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| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
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| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |

Additional Information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|-------------|---|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
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| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
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Additional Information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|----------------------------------|----------------------------------|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |

Additional information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|-------------|---|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
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| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |

Additional Information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|----------------------------------|----------------------------------|-------------------|---------------------------------|
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| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
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| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
| | <input type="checkbox"/> Sweeper | <input type="checkbox"/> By Hand | | |
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Additional Information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|-------------|---|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |

Additional Information regarding shared services and outside contractors:

Street Sweeping

Borough / Township of _____

| Date | Sweepings | | # of Street Swept | Approx. Amount Debris Collected |
|------|-------------|---|-------------------|---------------------------------|
| | Location(s) | Swept By: | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |
| | | <input type="checkbox"/> Sweeper <input type="checkbox"/> By Hand | | |

Additional Information regarding shared services and outside contractors:

SPPP Form 13 – Stormwater Facility Maintenance

Municipality
Information

Municipality: Borough of Harrington Park County: Bergen

NJPDES # :0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA):04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Please describe your annual catch basin cleaning program and schedule. Attach a map/diagram or additional pages as necessary.

The Borough of Harrington Park's DPW annually cleans the Borough's catch basins in order to maintain catch basin function and efficiency. All catch basins are to be inspected at least once each year. If, at any time of inspection, no sediment, trash or debris is observed in the catch basins, that catch basin will not be cleaned. All catch basins are to be inspected annually, even if they were found to be "clean" the previous year. At the time of cleaning, the catch basins are to be also inspected for proper function. Maintenance it to be scheduled for those catch basins that are in disrepair.

Please describe your stormwater facility maintenance program for cleaning and maintenance of all stormwater facilities operated by the municipality. Attach additional pages as necessary.

(NOTE: Attach a maintenance log containing information on any repairs/maintenance performed on stormwater facilities to ensure their proper function and operation.)

The Borough of Harrington Park has implemented a stormwater facility maintenance program to ensure that all stormwater facilities operated by the Borough function properly. The Borough of Harrington Park operates the following:

Catch Basins, Storm Drains, Stormwater Basins / Seepage Pits

These stormwater facilities are to be inspected annually to ensure that they are functioning properly. In high risk areas, preventative maintenance is to be performed on all stormwater facilities to ensure that they do not begin to fail.

A maintenance log listing information on repairs is attached.

SPPP Form 14 - Outfall Pipe Stream Scouring Remediation

Municipality
Information

Municipality: Borough of Harrington Park County: Bergen

NJPDES #: 0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Describe your stormwater outfall pipe scouring detection, remediation and maintenance program to detect and control active, localized stream and stream bank scouring. Attach additional pages as necessary.

(NOTE: Attach a prioritized list of sites observed to have outfall pipe stream and stream bank scouring, date of anticipated repair, method of repair and date of completion.)

Scour holes are caused by excessive velocity of discharge through stormwater outfall pipes. Scouring leads to localized stream bank and stream bottom degradation leading to the sedimentation of waterways.

The Borough of Harrington Park checks all outfall pipes for signs of scouring when completing the illicit connection portion of this program. All sites are to be placed on a prioritized list and repairs are to be made in accordance with the Standards for Soil Erosion and Sediment Control in New Jersey. In addition, repairs that do not need NJDEP permits will be completed first.

Each repair is to be monitored annually and is to be inspected to ensure that scouring has not resumed.

The Outfall Pipe Stream Scouring Program began April 2005.

SPPP Form 15 – De-icing Material Storage

Municipality
Information

Municipality: Borough of Harrington Park County Bergen

NJPDES # : 0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

De-icing Material Storage

Describe how you currently store your municipality's de-icing materials, and describe your inspection schedule for the storage area. If your current storage practices do not meet the de-icing material storage SBR describe your construction schedule and your seasonal tarping interim measures. If you plan on sharing a storage structure, please include its location, as well as a complete list of all concerned public entities. If you store sand outdoors, describe how it meets the minimum standard.

De-icing material at the Department of Public Work's facility is currently stored in compliance with the Borough's General Stormwater Permit. The Borough of Harrington Park currently has a fully compliant salt storage shed.

SPPP Form 67 – Standard Operating Procedures

| | | |
|---|--|--|
| Municipality Information | Municipality: <u>Borough of Harrington Park County Bergen</u> NJPDES # : <u>0141852</u> PI ID #: <u>210970</u> Team Member/Title: <u>Mark Kiernan / DPW Superintendent</u> Effective Date of Permit Authorization (EDPA): <u>04/01/04</u> Date of Completion: <u>April 8, 2005</u> Date of most recent update: <u>March 16, 2010</u> | |
| BMP | Date SOP went into effect | Describe your inspection schedule |
| Fueling Operations (including the required practices listed in Attachment D of the permit) | <i>April 8, 2005</i> | <i>No fueling operations occur in Borough.</i> |
| Vehicle Maintenance (including the required practices listed in Attachment D of the permit) | <i>April 8, 2005</i> | <i>Monthly inspections are to be held to ensure that the SOP is being met.</i> |
| Good Housekeeping Practices (including the required practices listed in Attachment D of the permit) Attach inventory list required by Attachment D of the permit. | <i>April 8, 2005</i> | <i>Monthly inspections of all municipal maintenance yards and ancillary operations are to be held.</i> |

Borough of Harrington Park Standard Operating Procedure Vehicle Maintenance

Borough of Harrington Park
Maintenance Yards
BMP Objectives

Waste Management
Spill Prevention, Containment and Countermeasures
Pollution Control

Introduction and Purpose

- This SOP contains the basic practices of vehicle maintenance to be implemented at all maintenance yards including maintenance activities at ancillary operations in the Borough of Harrington Park. The purpose of this SOP is to provide a set of guidelines for the Borough of Harrington Park vehicle maintenance yards including maintenance activities at ancillary operations.

Scope

- This SOP applies to all maintenance yards including maintenance activities at ancillary operation within the Borough of Harrington Park.

Standards and Specifications

- Conduct vehicle maintenance operation only in designated areas.
- When possible, perform all vehicle and equipment maintenance at an indoor location with a paved floor.
- Always use drip pans.
- Absorbent spill clean-up materials shall be available in maintenance areas and shall be disposed of properly after use.
- Maintenance areas shall be protected from stormwater run-on and run-off, and shall be located at least 50 feet downstream drainage facilities and watercourses.
- Use portable tents or construct a roofing-device over long-term maintenance areas and for projects that must be performed outdoors.
- Do not dump or dispose oils, grease, fluids, and lubricants onto the ground.
- Do not dump or dispose batteries, used oils, antifreeze and other toxic fluids into a storm drain or watercourse.
- Do not bury tires.
- Collect waste fluids in properly labeled containers and dispose properly.

Spill Response and Reporting

- Provide spill containment dikes or secondary containment around stored oils and other fluid storage drum(s).
- Conduct cleanups of any fuel spills immediately after discovery.
- Spills are to be cleaned using dry cleaning methods only. Spills shall be cleaned up with a dry, absorbent material (e.g., kitty litter, sawdust, etc.) and the rest of the area is to be swept.
- Collected waste is to be disposed of properly.
- Contact the Borough of Harrington Park Fire Department.

Maintenance and Inspection

- Periodically check for leaks and damaged equipment and make repairs as necessary.

Borough of Harrington Park Standard Operating Procedure Good Housekeeping

Borough of Harrington Park Good
Housekeeping Goals

Proper Recycling
Proper Waste Disposal
Pollution Prevention

Introduction and Purpose

- This SOP contains the basic practices of good housekeeping to be implemented at maintenance yards including maintenance activities at ancillary operations in the Borough of Harrington Park. The purpose of this SOP is to provide a set of guidelines for the employees of the Borough of Harrington Park for Good Housekeeping Practices at their maintenance yards including maintenance yards at ancillary operations.

Scope

- This SOP applies to all maintenance yards including maintenance activities at ancillary operations in the Borough of Harrington Park.

Standards and Specifications (General)

- All containers should be properly labeled and marked, and the labels must remain clean and visible.
- All containers must be kept in condition and tightly closed when not in use.
- When practical, chemicals, fluids and supplies should be kept indoors.
- If containers are stored outside, they must be covered and placed on spill platforms.
- Keep storage areas clean and well organized.
- Spill kits and drip pans must be kept near any liquid transfer areas, protected from rainfall.
- Absorbent spill clean-up materials must be available in maintenance areas and shall be disposed of properly after use.
- Place trash, dirt and other debris in the dumpster.
- Collect waste fluids in properly labeled containers and dispose of them properly.
- Establish and maintain a recycling program by disposing, papers, cans, bottles and trash in designated bins.

Standards and Specifications (Salt and Deicing Material Handling)

- During loading and unloading of salt and de-icing materials, prevent and/or minimize spills. If salt or de-icing materials are spilled, remove the materials using dry cleaning methods. All collected materials shall be either reused or properly discarded.
- Sweeping should be conducted once a week to get rid of dirt and other debris. Sweeping should also be conducted immediately following loading/unloading activities, when practical.
- Minimize the tracking of materials from storage and loading/unloading areas.
- Minimize the distance that salt and de-icing materials are transported during loading/unloading activities.
- Any materials that are stored outside must be tarped when not actively being used.
- If interim seasonal tarping is being implemented, de-icing materials may be stored outdoors only between October 15th through April 30th.

Spill Response and Reporting

- Conduct clean up of any spill(s) immediately after discovery.
- Spills are to be cleaned using dry cleaning methods only.
- Contact the Borough of Harrington Park Fire Department.

Maintenance and Inspection

- Periodically check for leaks and damaged equipment and make repairs as necessary.
- Perform monthly inspections of all (indoor and outdoor if applicable) storage locations.

Municipal Stormwater Regulation Program Maintenance Yard Inventory

Site: _____
 Inspector: _____
 Date: _____

| Quantity | Pervious/Impervious Surface | Impact to Stormwater |
|----------|--------------------------------|--|
| | Raw Materials | |
| | Sand | Inlet _____ ft. away Drains Directly to _____ |
| | Salt/De-icing Materials | Inlet _____ ft. away Drains Directly to _____ |
| | Other | Inlet _____ ft. away Drains Directly to _____ |
| | Organic Material | |
| | Leaves & Brush | Inlet _____ ft. away Drains Directly to _____ |
| | Grass Clippings | Inlet _____ ft. away Drains Directly to _____ |
| | Street Sweepings | Inlet _____ ft. away Drains Directly to _____ |
| | Mulch Storage | Inlet _____ ft. away Drains Directly to _____ |
| | Topsoil Storage | Inlet _____ ft. away Drains Directly to _____ |
| | Drum & Tank Storage | |
| | Drums | Inlet _____ ft. away Drains Directly to _____ |
| | Waste Oil Containers | Inlet _____ ft. away Drains Directly to _____ |
| | Motorized Vehicles | |
| | Leaf Vacs | Inlet _____ ft. away Drains Directly to _____ |
| | Front End Loaders | Inlet _____ ft. away Drains Directly to _____ |
| | Fork Lifts | Inlet _____ ft. away Drains Directly to _____ |
| | Garbage Trucks | Inlet _____ ft. away Drains Directly to _____ |
| | Light/Heavy Trucks | Inlet _____ ft. away Drains Directly to _____ |
| | Paving Vehicles | Inlet _____ ft. away Drains Directly to _____ |
| | Other | Inlet _____ ft. away Drains Directly to _____ |

| Quantity | Equipment and Attachments | Pervious/Impervious Surface | Impact to Stormwater |
|----------|-----------------------------------|-----------------------------|--|
| | Snow Plow Attachments | | |
| | Hydraulic Tailgates | | Inlet ___ ft. away Drains Directly to |
| | Hoppers/Spreaders | | Inlet ___ ft. away Drains Directly to |
| | Fork Lift Attachments | | Inlet ___ ft. away Drains Directly to |
| | Line Painting Equipment | | Inlet ___ ft. away Drains Directly to |
| | Landscaping Equipment | | Inlet ___ ft. away Drains Directly to |
| | Trailers | | Inlet ___ ft. away Drains Directly to |
| | Misc. Metal Storage Parts | | |
| | Scrap Metal | | Inlet ___ ft. away Drains Directly to |
| | Car/Truck Parts | | Inlet ___ ft. away Drains Directly to |
| | Household Hazardous Wastes | | |
| | Acs & Refrigerators | | Inlet ___ ft. away Drains Directly to |
| | Electronics | | Inlet ___ ft. away Drains Directly to |
| | Appliances | | Inlet ___ ft. away Drains Directly to |
| | Other | | |
| | Lead Acid Batteries | | Inlet ___ ft. away Drains Directly to |
| | Used Tires | | Inlet ___ ft. away Drains Directly to |
| | Covered Dumpster | | Inlet ___ ft. away Drains Directly to |
| | Uncovered Dumpsters | | Inlet ___ ft. away Drains Directly to |
| | Paint | | Inlet ___ ft. away Drains Directly to |

| Municipal Source Operations | | |
|-----------------------------------|---------------------------|------------------------|
| | Where does it take place? | How often? |
| Street Sweeping | | |
| Garbage Collection | | |
| Vehicle Maintenance | | |
| Vehicle & Equipment Washing | | |
| Garbage Trucks | | |
| Street Sweepers | | |
| Fertilizer Spreaders | | |
| Asphalt Pavers | | |
| De-icing Vehicles | | |
| Beach Maintenance Vehicles | | |
| Police Cars & Others | | |
| Small Engines (lawn mowers, etc.) | | |
| | How is it stored? | How is it disposed of? |
| Street Sweeping | | |
| Clean Oil | | |
| Waste Oil | | |
| | Rain Shield or Covered? | SOPs in place? |
| Bulk Fuel Delivery | | Yes No |
| Vehicle & Equipment Fueling | | Yes No |

Additional Notes:

* Describe storm sewer locations and where they drain.

* Describe site topography and site drainage patterns.

Municipal Stormwater Regulation Program Maintenance Yard Inventory

Site: _____
 Inspector: _____
 Date: _____

| Quantity | Raw Materials | Pervious/Impervious Surface | Impact to Stormwater |
|----------|--------------------------------|-----------------------------|--|
| | Raw Materials | | |
| | Sand | | Inlet _____ ft. away Drains Directly to _____ |
| | Salt/De-icing Materials | | Inlet _____ ft. away Drains Directly to _____ |
| | Other | | Inlet _____ ft. away Drains Directly to _____ |
| | Organic Material | | |
| | Leaves & Brush | | Inlet _____ ft. away Drains Directly to _____ |
| | Grass Clippings | | Inlet _____ ft. away Drains Directly to _____ |
| | Street Sweepings | | Inlet _____ ft. away Drains Directly to _____ |
| | Mulch Storage | | Inlet _____ ft. away Drains Directly to _____ |
| | Topsoil Storage | | Inlet _____ ft. away Drains Directly to _____ |
| | Drum & Tank Storage | | |
| | Drums | | Inlet _____ ft. away Drains Directly to _____ |
| | Waste Oil Containers | | Inlet _____ ft. away Drains Directly to _____ |
| | Motorized Vehicles | | |
| | Leaf Vacs | | Inlet _____ ft. away Drains Directly to _____ |
| | Front End Loaders | | Inlet _____ ft. away Drains Directly to _____ |
| | Fork Lifts | | Inlet _____ ft. away Drains Directly to _____ |
| | Garbage Trucks | | Inlet _____ ft. away Drains Directly to _____ |
| | Light/Heavy Trucks | | Inlet _____ ft. away Drains Directly to _____ |
| | Paving Vehicles | | Inlet _____ ft. away Drains Directly to _____ |
| | Other | | Inlet _____ ft. away Drains Directly to _____ |

| Quantity | Equipment and Attachments | Pervious/Impervious Surface | Impact to Stormwater |
|----------|-----------------------------------|-----------------------------|--|
| | Snow Plow Attachments | | Inlet ___ ft. away Drains Directly to |
| | Hydraulic Tailgates | | Inlet ___ ft. away Drains Directly to |
| | Hoppers/Spreaders | | Inlet ___ ft. away Drains Directly to |
| | Fork Lift Attachments | | Inlet ___ ft. away Drains Directly to |
| | Line Painting Equipment | | Inlet ___ ft. away Drains Directly to |
| | Landscaping Equipment | | Inlet ___ ft. away Drains Directly to |
| | Trailers | | Inlet ___ ft. away Drains Directly to |
| | Misc. Metal Storage Parts | | |
| | Scrap Metal | | Inlet ___ ft. away Drains Directly to |
| | Car/Truck Parts | | Inlet ___ ft. away Drains Directly to |
| | Household Hazardous Wastes | | |
| | Acs & Refrigerators | | Inlet ___ ft. away Drains Directly to |
| | Electronics | | Inlet ___ ft. away Drains Directly to |
| | Appliances | | Inlet ___ ft. away Drains Directly to |
| | Other | | |
| | Lead Acid Batteries | | Inlet ___ ft. away Drains Directly to |
| | Used Tires | | Inlet ___ ft. away Drains Directly to |
| | Covered Dumpster | | Inlet ___ ft. away Drains Directly to |
| | Uncovered Dumpsters | | Inlet ___ ft. away Drains Directly to |
| | Paint | | Inlet ___ ft. away Drains Directly to |

| Municipal Source Operations | | |
|-----------------------------------|---------------------------|------------------------|
| | Where does it take place? | How often? |
| Street Sweeping | | |
| Garbage Collection | | |
| Vehicle Maintenance | | |
| Vehicle & Equipment Washing | | |
| Garbage Trucks | | |
| Street Sweepers | | |
| Fertilizer Spreaders | | |
| Asphalt Pavers | | |
| De-icing Vehicles | | |
| Beach Maintenance Vehicles | | |
| Police Cars & Others | | |
| Small Engines (lawn mowers, etc.) | | |
| | How is it stored? | How is it disposed of? |
| Street Sweeping | | |
| Clean Oil | | |
| Waste Oil | | |
| | Rain Shield or Covered? | SOPs in place? |
| Bulk Fuel Delivery | | Yes No |
| Vehicle & Equipment Fueling | | Yes No |

Additional Notes:

* Describe storm sewer locations and where they drain.

* Describe site topography and site drainage patterns.

Municipal Stormwater Regulation Program Maintenance Yard Inventory

Site: _____
 Inspector: _____
 Date: _____

| Quantity | Raw Materials | Pervious/Impervious Surface | Impact to Stormwater |
|----------|--------------------------------|-----------------------------|--|
| | Raw Materials | | |
| | Sand | | Inlet ___ ft. away Drains Directly to |
| | Salt/De-icing Materials | | Inlet ___ ft. away Drains Directly to |
| | Other | | Inlet ___ ft. away Drains Directly to |
| | Organic Material | | |
| | Leaves & Brush | | Inlet ___ ft. away Drains Directly to |
| | Grass Clippings | | Inlet ___ ft. away Drains Directly to |
| | Street Sweepings | | Inlet ___ ft. away Drains Directly to |
| | Mulch Storage | | Inlet ___ ft. away Drains Directly to |
| | Topsoil Storage | | Inlet ___ ft. away Drains Directly to |
| | Drum & Tank Storage | | |
| | Drums | | Inlet ___ ft. away Drains Directly to |
| | Waste Oil Containers | | Inlet ___ ft. away Drains Directly to |
| | Motorized Vehicles | | |
| | Leaf Vacs | | Inlet ___ ft. away Drains Directly to |
| | Front End Loaders | | Inlet ___ ft. away Drains Directly to |
| | Fork Lifts | | Inlet ___ ft. away Drains Directly to |
| | Garbage Trucks | | Inlet ___ ft. away Drains Directly to |
| | Light/Heavy Trucks | | Inlet ___ ft. away Drains Directly to |
| | Paving Vehicles | | Inlet ___ ft. away Drains Directly to |
| | Other | | Inlet ___ ft. away Drains Directly to |

| Quantity | Equipment and Attachments | Pervious/Impervious Surface | Impact to Stormwater |
|----------|-----------------------------------|-----------------------------|--|
| | Equipment and Attachments | | |
| | Snow Plow Attachments | | Inlet ___ ft. away Drains Directly to |
| | Hydraulic Tailgates | | Inlet ___ ft. away Drains Directly to |
| | Hoppers/Spreaders | | Inlet ___ ft. away Drains Directly to |
| | Fork Lift Attachments | | Inlet ___ ft. away Drains Directly to |
| | Line Painting Equipment | | Inlet ___ ft. away Drains Directly to |
| | Landscaping Equipment | | Inlet ___ ft. away Drains Directly to |
| | Trailers | | Inlet ___ ft. away Drains Directly to |
| | Misc. Metal Storage Parts | | |
| | Scrap Metal | | Inlet ___ ft. away Drains Directly to |
| | Car/Truck Parts | | Inlet ___ ft. away Drains Directly to |
| | Household Hazardous Wastes | | |
| | Acs & Refrigerators | | Inlet ___ ft. away Drains Directly to |
| | Electronics | | Inlet ___ ft. away Drains Directly to |
| | Appliances | | Inlet ___ ft. away Drains Directly to |
| | Other | | |
| | Lead Acid Batteries | | Inlet ___ ft. away Drains Directly to |
| | Used Tires | | Inlet ___ ft. away Drains Directly to |
| | Covered Dumpster | | Inlet ___ ft. away Drains Directly to |
| | Uncovered Dumpsters | | Inlet ___ ft. away Drains Directly to |
| | Paint | | Inlet ___ ft. away Drains Directly to |

| Municipal Source Operations | | |
|-----------------------------------|---------------------------|------------------------|
| | Where does it take place? | How often? |
| Street Sweeping | | |
| Garbage Collection | | |
| Vehicle Maintenance | | |
| Vehicle & Equipment Washing | | |
| Garbage Trucks | | |
| Street Sweepers | | |
| Fertilizer Spreaders | | |
| Asphalt Pavers | | |
| De-icing Vehicles | | |
| Beach Maintenance Vehicles | | |
| Police Cars & Others | | |
| Small Engines (lawn mowers, etc.) | | |
| | How is it stored? | How is it disposed of? |
| Street Sweeping | | |
| Clean Oil | | |
| Waste Oil | | |
| | Rain Shield or Covered? | SOPs in place? |
| Bulk Fuel Delivery | | Yes No |
| Vehicle & Equipment Fueling | | Yes No |

Additional Notes:

- * Describe storm sewer locations and where they drain.
- * Describe site topography and site drainage patterns.

| Quantity | Equipment and Attachments | Pervious/Impervious Surface | Impact to Stormwater |
|----------|-----------------------------------|-----------------------------|--|
| | Snow Plow Attachments | | Inlet ___ ft. away Drains Directly to |
| | Hydraulic Tailgates | | Inlet ___ ft. away Drains Directly to |
| | Hoppers/Spreaders | | Inlet ___ ft. away Drains Directly to |
| | Fork Lift Attachments | | Inlet ___ ft. away Drains Directly to |
| | Line Painting Equipment | | Inlet ___ ft. away Drains Directly to |
| | Landscaping Equipment | | Inlet ___ ft. away Drains Directly to |
| | Trailers | | Inlet ___ ft. away Drains Directly to |
| | Misc. Metal Storage Parts | | |
| | Scrap Metal | | Inlet ___ ft. away Drains Directly to |
| | Car/Truck Parts | | Inlet ___ ft. away Drains Directly to |
| | Household Hazardous Wastes | | |
| | Acs & Refrigerators | | Inlet ___ ft. away Drains Directly to |
| | Electronics | | Inlet ___ ft. away Drains Directly to |
| | Appliances | | Inlet ___ ft. away Drains Directly to |
| | Other | | |
| | Lead Acid Batteries | | Inlet ___ ft. away Drains Directly to |
| | Used Tires | | Inlet ___ ft. away Drains Directly to |
| | Covered Dumpster | | Inlet ___ ft. away Drains Directly to |
| | Uncovered Dumpsters | | Inlet ___ ft. away Drains Directly to |
| | Paint | | Inlet ___ ft. away Drains Directly to |

| Municipal Source Operations | | |
|-----------------------------------|---------------------------|------------------------|
| | Where does it take place? | How often? |
| Street Sweeping | | |
| Garbage Collection | | |
| Vehicle Maintenance | | |
| Vehicle & Equipment Washing | | |
| Garbage Trucks | | |
| Street Sweepers | | |
| Fertilizer Spreaders | | |
| Asphalt Pavers | | |
| De-icing Vehicles | | |
| Beach Maintenance Vehicles | | |
| Police Cars & Others | | |
| Small Engines (lawn mowers, etc.) | | |
| | How is it stored? | How is it disposed of? |
| Street Sweeping | | |
| Clean Oil | | |
| Waste Oil | | |
| | Rain Shield or Covered? | SOPs in place? |
| Bulk Fuel Delivery | | Yes No |
| Vehicle & Equipment Fueling | | Yes No |

Additional Notes:

- * Describe storm sewer locations and where they drain.
- * Describe site topography and site drainage patterns.

Municipal Stormwater Regulation Program Maintenance Yard Inventory

Site: _____
 Inspector: _____
 Date: _____

| Quantity | Pervious/Impervious Surface | Impact to Stormwater |
|----------|--------------------------------|--|
| | Raw Materials | |
| | Sand | Inlet _____ ft. away Drains Directly to _____ |
| | Salt/De-icing Materials | Inlet _____ ft. away Drains Directly to _____ |
| | Other | Inlet _____ ft. away Drains Directly to _____ |
| | Organic Material | |
| | Leaves & Brush | Inlet _____ ft. away Drains Directly to _____ |
| | Grass Clippings | Inlet _____ ft. away Drains Directly to _____ |
| | Street Sweepings | Inlet _____ ft. away Drains Directly to _____ |
| | Mulch Storage | Inlet _____ ft. away Drains Directly to _____ |
| | Topsoil Storage | Inlet _____ ft. away Drains Directly to _____ |
| | Drum & Tank Storage | |
| | Drums | Inlet _____ ft. away Drains Directly to _____ |
| | Waste Oil Containers | Inlet _____ ft. away Drains Directly to _____ |
| | Motorized Vehicles | |
| | Leaf Vacs | Inlet _____ ft. away Drains Directly to _____ |
| | Front End Loaders | Inlet _____ ft. away Drains Directly to _____ |
| | Fork Lifts | Inlet _____ ft. away Drains Directly to _____ |
| | Garbage Trucks | Inlet _____ ft. away Drains Directly to _____ |
| | Light/Heavy Trucks | Inlet _____ ft. away Drains Directly to _____ |
| | Paving Vehicles | Inlet _____ ft. away Drains Directly to _____ |
| | Other | Inlet _____ ft. away Drains Directly to _____ |

| Quantity | Equipment and Attachments | Pervious/Impervious Surface | Impact to Stormwater |
|----------|-----------------------------------|-----------------------------|--|
| | Snow Plow Attachments | | Inlet ___ ft. away Drains Directly to |
| | Hydraulic Tailgates | | Inlet ___ ft. away Drains Directly to |
| | Hoppers/Spreaders | | Inlet ___ ft. away Drains Directly to |
| | Fork Lift Attachments | | Inlet ___ ft. away Drains Directly to |
| | Line Painting Equipment | | Inlet ___ ft. away Drains Directly to |
| | Landscaping Equipment | | Inlet ___ ft. away Drains Directly to |
| | Trailers | | Inlet ___ ft. away Drains Directly to |
| | Misc. Metal Storage Parts | | |
| | Scrap Metal | | Inlet ___ ft. away Drains Directly to |
| | Car/Truck Parts | | Inlet ___ ft. away Drains Directly to |
| | Household Hazardous Wastes | | |
| | Acs & Refrigerators | | Inlet ___ ft. away Drains Directly to |
| | Electronics | | Inlet ___ ft. away Drains Directly to |
| | Appliances | | Inlet ___ ft. away Drains Directly to |
| | Other | | |
| | Lead Acid Batteries | | Inlet ___ ft. away Drains Directly to |
| | Used Tires | | Inlet ___ ft. away Drains Directly to |
| | Covered Dumpster | | Inlet ___ ft. away Drains Directly to |
| | Uncovered Dumpsters | | Inlet ___ ft. away Drains Directly to |
| | Paint | | Inlet ___ ft. away Drains Directly to |

| Municipal Source Operations | | |
|-----------------------------------|---------------------------|------------------------|
| | Where does it take place? | How often? |
| Street Sweeping | | |
| Garbage Collection | | |
| Vehicle Maintenance | | |
| Vehicle & Equipment Washing | | |
| Garbage Trucks | | |
| Street Sweepers | | |
| Fertilizer Spreaders | | |
| Asphalt Pavers | | |
| De-icing Vehicles | | |
| Beach Maintenance Vehicles | | |
| Police Cars & Others | | |
| Small Engines (lawn mowers, etc.) | | |
| | How is it stored? | How is it disposed of? |
| Street Sweeping | | |
| Clean Oil | | |
| Waste Oil | | |
| | Rain Shield or Covered? | SOPs in place? |
| Bulk Fuel Delivery | | Yes |
| Vehicle & Equipment Fueling | | No |
| | | Yes |
| | | No |

Additional Notes:
 * Describe storm sewer locations and where they drain.
 * Describe site topography and site drainage patterns.

SPPP Form 17 – Employee Training

Municipality
Information

Municipality: Borough of Harrington Park County Bergen

NJPDES # : 0141852 PI ID #: 210970

Team Member/Title: Mark Kiernan / DPW Superintendent

Effective Date of Permit Authorization (EDPA): 04/01/04

Date of Completion: April 8, 2005 Date of most recent update: March 16, 2010

Describe your employee training program. For each required topic, list the employees that will receive training on that topic, and the date the training will be held. Attach additional pages as necessary.

1. A Waste Disposal Education Course is to be held. Public Works employees are to attend.

2. A Municipal Ordinance Course is to be held. Code enforcement, local police, health department, and public works employees are to attend.

3. An Illicit Connection Elimination and Outfall Pipe Mapping Course is to be held. Public Works employees are to attend.

4. A Stormwater Facility Maintenance Course is to be held. Public Works employees are to attend.

5. A Road Erosion and Outfall Pipe Stream Scouring Remediation Course is to be held. Public Works employees are to attend.

6. A Maintenance Yard Operations Course is to be held. Public Works employees are to attend.

7. A Construction Activity / Post Construction Stormwater Management in New Development Course is to be held. Public Works employees are to attend.

Illicit Connection and Outfall Mapping Field Training is to include procedures to properly conduct illicit connections detections, investigations, and eliminations.

Maintenance Yard Operations field training is to include SOPs for vehicle and equipment maintenance and general good-housekeeping for de-icing material storage.

Dates for the above training programs have yet to be determined and are to occur based upon educational material availability.

Employee Training
 Borough / Township of _____, New Jersey

| Course Topics | Date(s) | | | Employees Trained |
|---|---------|--|--|--|
| Waste Disposal Education | | | | Public Works Employees |
| Municipal Ordinances | | | | Code enforcement Local Police Authorities Public Works Employees |
| Yard Waste Collection Program | | | | Public Works Employees |
| Illicit Connection Elimination and Outfall Pipe Mapping | | | | Public Works Employees |
| Street Sweeping | | | | Public Works Employees |
| Stormwater Facility Maintenance | | | | Public Works Employees |
| Road Erosion Control and Outfall Pipe Stream Scouring Remediation | | | | Public Works Employees |
| Maintenance Yard Operations | | | | Public Works Employees |
| Construction Activity / Post-Construction Storm- water Management in (Re-) Development | | | | Public Works Employees |

Sign-in sheets have been attached for each course given.

Employee Training
 Borough / Township of _____, New Jersey

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| | | | | |
| Yard Waste Collection Program | | | | Public Works Employees |
| | | | | |
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| | | | | |
| Street Sweeping | | | | Public Works Employees |
| | | | | |
| Stormwater Facility Maintenance | | | | Public Works Employees |
| | | | | |
| Road Erosion Control and Outfall Pipe Stream Scouring Remediation | | | | Public Works Employees |
| | | | | |
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