

Year 2 Annual Report
Massachusetts Small MS4 General Permit
Reporting Period: July 1, 2019-June 30, 2020

Please DO NOT attach any documents to this form. Instead, attach all requested documents to an email when submitting the form

Unless otherwise noted, all fields are required to be filled out. If a field is left blank, it will be assumed the requirement or task has not been completed. Please ONLY report on activities between July 1, 2019 and June 30, 2020 unless otherwise requested.

Part I: Contact Information

Name of Municipality or Organization: TOWN OF BLACKSTONE

EPA NPDES Permit Number: MA041015

Primary MS4 Program Manager Contact Information

Name: Daniel M. Keyes Title: Town Administrator

Street Address Line 1: 15 St. Paul Street

Street Address Line 2:

City: Blackstone State: Ma Zip Code: 01504

Email: dkeyes@townofblackstone.org Phone Number: (508) 883-1500

Stormwater Management Program (SWMP) Information

SWMP Location (web address): https://www.townofblackstone.org/sites/g/files/vyhlf166/f/uploads/storm_water_management-ms4_authorization.pdf

Date SWMP was Last Updated: 09/04/2020

If the SWMP is not available on the web please provide the physical address: