

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2012

Name of MS4 Town of Mount Hope

SPDES ID

N	Y	R	2	0	A	2	4	5
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Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?
 Yes No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name

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Partner/Coalition Name (con't.)

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SPDES Partner ID - If applicable

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Address

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City State Zip

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eMail

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Phone
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Legally Binding Agreement in accordance
 with GP-0-08-002 Part IV.G.? Yes No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

- MM1

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- MM2

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- MM3

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- MM4

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- MM5

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- MM6

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Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices* required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

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