



ANNUAL REPORT FORM FOR INDIVIDUAL NPDES PERMITS FOR MUNICIPAL SEPARATE STORM SEWER SYSTEMS (RULE 62-624.600(2), F.A.C.)

- This Annual Report Form must be completed and submitted to the Department to satisfy the annual reporting requirements established in Rule 62-621.600, F.A.C.
- Submit this fully completed and signed form and any REQUIRED attachments by mail to the address in the box at right.
- Refer to the Form Instructions for guidance on completing each section.
- **Please print or type information in the appropriate areas below.**

Submit the form and attachments to:
 Florida Department of Environmental Protection
 Mail Station 2500
 2600 Blair Stone Road
 Tallahassee, Florida 32399-2400

SECTION I. BACKGROUND INFORMATION

A.	Permittee Name: Town of Fort Myers Beach		
B.	Permit Name: Lee County Municipal Separate Storm Sewer System		
C.	Permit Number: FLS000035		
D.	Annual Report Year: <input type="checkbox"/> Year 1 <input type="checkbox"/> Year 2 <input type="checkbox"/> Year 3 <input type="checkbox"/> Year 4 <input checked="" type="checkbox"/> Year 5 <input type="checkbox"/> Other, specify Year:		
E.	Reporting Time Period (month/year): 03/08 through 03/09		
F.	Name of the Responsible Authority: Jack Green		
	Title: Town Manager		
	Mailing Address: Town of Fort Myers Beach, 2523 Estero Boulevard		
	City: Fort Myers Beach, FL	Zip Code: 33931	County: Lee
	Telephone Number: (239) 765-0202	Fax Number: (239) 765-0909	
G.	E-mail Address: jack@fortmyersbeachfl.goc		
	Name of the Designated Stormwater Management Program Contact (if different from Section I.F above): Cathie Lewis		
	Title: Public Works Director		
	Department: Public Works		
	Mailing Address: Town of Fort Myers Beach, 2523 Estero Boulevard		
	City: Fort Myers Beach, FL	Zip Code: 33931	County: Lee
	Telephone Number: (239) 765-0202	Fax Number: (239) 765-0909	
	E-mail Address: cathie@fortmyersbeachfl.gov		

SECTION II. MS4 MAJOR OUTFALL INVENTORY (Not Applicable In Year 1)

A.	Number of outfalls ADDED to the outfall inventory in the current reporting year (insert "0" if none): 0 (Does this number include non-major outfalls? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable)
B.	Number of outfalls REMOVED from the outfall inventory in the current reporting year (insert "0" if none): 0 (Does this number include non-major outfalls? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable)
C.	Is the change in the total number of outfalls due to lands annexed or vacated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable