

*Also account of 7/1/08*

Notice: This final report is authorized by ss. 281.65 and 281.66, Wis. Stats., and chs. NR 153 and NR 155, Wis. Adm. Code. Personally identifiable information collected will be used for program administration and may be made available to requesters as required under Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

**Instructions: The grant agreement requires grantees to submit a Final Report 60 days after the end date listed in the grant agreement. This Final Report form must be used in conjunction with the "FINAL REPORT INSTRUCTIONS." The instructions detail how to complete and submit the report to DNR.**

RECEIVED

JUL - 7 2008

BUREAU OF WATERSHED MGMT

1. Grant Type

- Agricultural - Targeted Runoff Management Grant
- Urban - Targeted Runoff Management Grant
- Construction - Urban Nonpoint Source & Storm Water Management Grant
- Planning - Urban Nonpoint Source & Storm Water Management Grant

2. Grantee & Project Information

Project Name <b>East Menomonie Water Quality Project</b>	Grant Number <b>USC-LC04-17251-06</b>
Governmental Unit Name <b>Menomonie</b>	Governmental Unit Type (city, village, town, etc.) <b>City</b>
Watershed Name <b>Wilson Creek</b>	Watershed Code <b>LC04-262</b>
DNR Water Management Unit (River System) Name <b>Lower Chippewa</b>	Water Body Identification Code (WBIC) (if applicable)

s. 303(d) Waterbody?  Yes  No

What pollutant(s) were addressed by the project?

**TSS**

For each project site location provide the following: (attach additional sheets if necessary)

Location:		A	B	C	D	E
Minor Civil Division Name		City of Menomonie	City of Menomonie			
PLSS	Town	28	28			
	Range	13W	13W			
	Section	24	25			
	Quarter	South 1/2	North 1/2			
	Quarter-Quarter					
Latitude		44° 53' 15.4" N				
Longitude		91° 53' 52.9" W				
Property Owner(s)	Name	City of Menomonie				
	Mailing address	800 Wilson Avenue Menomonie, WI 54751				
Site address <i>(if different than mailing address)</i>						

3. Summary of Results

A. Performance Standards and Prohibitions and Other Water Resources Management Priorities

For grants issued in calendar year 2006 or later, complete Tables A and B (following) consistent with the entries on your grant application.  
For grants issued prior to calendar year 2006, complete Tables A and B, *to the best of your knowledge*, consistent with the entries on your grant application.

**Table A.** Performance Standards and Prohibitions (per ch. NR 151, Wis. Adm. Code, effective October 1, 2002)

Performance Standard or Prohibition	Units of Measure	Quantity	Measurement Method Used
Sheet, rill and wind erosion	Acres meeting T		
Manure Storage Facilities: New Construction/Alterations	Number of facilities		
	Number of animal units		
Manure Storage Facilities: Closure	Number of facilities		
Manure Storage Facilities: Failing/Leaking Facilities	Number of facilities		
	Number of animal units		
Clean Water Diversions in WQMA	Pollutant load reduction		
	Number of farms with diversions		
	Number animal units		
Nutrient Management on Agricultural Land	Acres planned		
Prohibition: Manure Storage Overflow	Number of facilities		
	Number of animal units		
Prohibition: Unconfined Manure Pile in WQMA	Number of farms		
Prohibition: Direct Runoff From Feedlot/Stored Manure	Pollutant load reduction		
	Number of facilities		
	Number of animal units		
Prohibition: Unlimited Livestock Access	Feet of bank protected		
	Number of farms		
Urban: 20-40% Reduction in Total Suspended Solids (TSS)	Pounds TSS reduced		
	% TSS reduction		

**Table B.** Other Water Resources Management Priorities

I. Agricultural Areas	Units of Measure	Quantity	Measurement Method Used
Buffers	Feet of bank protected		
	Number of farms		
Streambank	Tons of bank erosion reduced		
	Feet of bank protected		
Other (specify)			
II. Developed Urban Areas	Units of Measure	Quantity	Measurement Method Used
Urban: 20-40% Reduction in TSS	Pounds TSS reduced		
	% TSS reduction		
Infiltration	% Pre-development stay-on volume		
	Cubic feet stay-on volume		
Peak flow discharge	Change in cubic feet per second		
Protective areas	Feet of bank protected		
Fueling & maintenance areas	Oily sheen presence		
Streambank	Tons of bank erosion reduced		
	Feet of bank protected	<b>436</b>	<b>Linear Feet - Count</b>
Other (specify)			
III. Planning	Units of Measure	Quantity	Measurement Method Used
Quantify how implementation of the planning project decreased storm water impacts on state waters ( <i>i.e.</i> , storm water plan, I & E plan, <i>etc.</i> )	Municipalities planned for		
	Acres planned for		
Document/track progress made in implementing the planning product ( <i>i.e.</i> , ordinance, utility district evaluation/formation, storm water management plan information & education, <i>etc.</i> )	Municipalities planned for		
	Acres planned for		
Other (specify)			

**B. Project Results Narrative**

The Hospital Ravine, located on Menomonie's east side contained several areas where severe erosion was taking place. This erosion was beginning to threaten adjacent structures, including several apartment buildings, a day care facility and a storm sewer culvert. The combat the erosion and protect adjacent structures, the City constructed 430 linear feet of vegetated riprap bank protection, seven riprap grade control structures and six riprap outlet protection installations. The vegetated riprap bank protection was used in areas where severe undermining of the slope was noted. Riprap grade control structures were used to control the hydraulic grade line of the stream and to waste excess energy in a controlled manner. Riprap outlet protection was used to convey stormwater from storm sewer outlets to the stream in a controlled manner. As a whole, the protection scheme will greatly reduce the erosion potential within the Hospital Ravine.

**4. Satisfaction of Notice Requirements (if applicable)**

If cost sharing for this project was offered under a formal notice to achieve compliance with performance standards or prohibitions, provide information for each notice in the table below.

Notice Information				Notice Satisfaction Information		
Notice Type	Issue Date	From (Name)	To (Name)	Satisfied?		Date Letter Sent
				Yes	No	
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	

**5. Summary of Project Challenges**

The Hospital Ravine project required the City to overcome several challenges. First, a majority of the project was located in relatively inaccessible areas. Adjacent residents were accepting of the project only because of the severity of the erosion and the pledge to restore the access routes with trees to avoid creating a public access route through the Hospital Ravine. Secondly, the project originally contained two wet detention basins upstream of the Hospital Ravine. The original intent was to reduce the erosive potential within the Hospital Ravine by attenuating peak discharge rates to at or below pre-development levels. Unfortunately, due the developed nature of the watershed and the existence of several large wetlands immediately upstream of the existing storm sewer system, it was not possible to construct the proposed wet-detention basins. Finally, the weather in the fall of 2007 and the spring of 2008 made caused several delays during the construction of the project. After storm events, the City's contractor had to wait for the ground to dry enough to permit construction equipment to reach the installations.

**6. Additional Information about the Project (optional)**

**7. Planning Product (UNPS&SW - Planning Projects only)**

Check here if a printed copy of the planning product (e.g., plans, ordinances, analyses) was sent to your DNR Regional Nonpoint Source Coordinator.

Name of Document	Date(s) effective	Date Submitted to NPS Coordinator

**8. Grantee Certification:**

Check here to certify that, to the best of your knowledge, the information contained in this report is correct and true.

Type or print Name and Title of Authorized Representative certifying here.

**Lowell Prange, City Administrator**

Signature of Authorized Representative	Date
<i>Lowell Prange, City Admin.</i>	<i>June 24, 2008</i>