#### MS4 Annual Report Cover Page

MCC form for period ending March 9,

SPI	DES	ID			

This cover page must be completed by the report preparer. Joint reports require only one cover page.

#### **Choose one:**

#### **O** This report is being submitted on behalf of an individual MS4.

Fill in SPDES ID in upper right hand corner.

Nan	ne c	of M	IS4													
			· · · · ·	 	 	 	 	 		 		 			 	 

#### OR

#### **O** This report is being submitted on behalf of a Single Entity

(Per Part II.E of GP-0-10-002)

Name of Single Entity

|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

#### OR

#### ○ This is a joint report being submitted on behalf of a coalition.

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

Name of Coalition

SPDES ID	SPDES ID	SPDES ID
SPDES ID	SPDES ID	SPDES ID
SPDES ID	SPDES ID	SPDES ID
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#### MS4 Annual Report Cover Page

MCC form for period ending March 9,


Provide SPDES ID of each permitted MS4 included in this report.

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# MS4 Municipal Compliance Certification(MCC) Form MCC form for period ending March 9, SPDES ID Name of MS4

Each MS4 must submit an MCC form.

#### Section 1 - MCC Identification Page

Indicate whether this MCC form is being submitted to certify endorsement or acceptance of:

- An Annual Report for a single MS4
- A Single Entity (Per Part II.E of GP-0-10-002)
- A Joint Report

Joint reports may be submitted by permittees with legally binding agreements.

If Joint Report, enter coalition name:

#### MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9,

Name of MS4

SPDES ID

#### Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
- 3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
- 4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

○ Principal Executive Officer/Chief Elected Official

- O Duly Authorized Representative
- $\bigcirc$  Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- $\bigcirc$  Report Preparer

First Name	MI Last Name
Title	
Address	
City	State Zip
eMail	
Phone	County

#### MS4 Municipal Compliance Certification (MCC) Form

SPDES ID

MCC form for period ending March 9,			

Name of MS4

#### Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period?

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/0	Coalit	ion	Jam	e				1	1	-	_		-				1				1		1							
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○ MM5	5																													
○ MM6	5																													
Additio	onal	task	s/re	esp	ons	ibi	litie	es																						

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

MS4 Municipal Compliance Certification(N	<b>1CC</b>	<b>[]) H</b>	For	<u>m</u>		
MCC form for period ending March 9,						
	SP1	DES	ID			 
Name of MS4						

#### **Section 4 - Certification Statement**

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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, 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 knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name	MI	Last Name
Title         (Clearly print title of individual signing report)		
Signature		Date

#### Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505

This report is being submitted for the reporting period ending March 9,	
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.	

		SPL	JE2	ID				
Name of MS4/Coalition								

#### Water Quality Trends

The information in this section is being reported (check one):

- On behalf of an individual MS4
- $\bigcirc$  On behalf of a coalition

How many MS4s are contributed to this report?

1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure One. • Yes

If Yes, choose one of the following

- Report(s) attached to the annual report
- Web Page(s) where report(s) is/are provided below

Please provide specific address of page where report(s) can be accessed - not home page.

URL	 						 								
URI															
URI															
URI															

○ Yes ○ No

Name of

#### MS4 Annual Report Form

#### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		SPE	DES I	D			
f MS4/Coalition							
	1				 	 	 

#### Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- On behalf of an individual MS4
- $\bigcirc$  On behalf of a coalition

How many MS4s contributed to this report?

#### 1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

$\odot$ Construction Sites		$\bigcirc$ Pesticide and Fertilizer Application
○ General Stormwater	Management Information	$\bigcirc$ Pet Waste Management
○ Household Hazardou	us Waste Disposal	○ <mark>Recycling</mark>
○ Illicit Discharge Det	tection and Elimination	$\bigcirc$ Riparian Corridor Protection/Restoration
○ Infrastructure Maint	tenance	○ Trash Management
$\bigcirc$ Smart Growth		$\bigcirc$ Vehicle Washing
O Storm Drain Markin	g	$\bigcirc$ Water Conservation
○ Green Infrastructure	/Better Site Design/Low Impact Development	$\bigcirc$ Wetland Protection
<ul> <li>Other:</li> <li>Other</li> <li><b>2. Specific audience</b></li> </ul>	ees targeted during this reporting period:	○ None
O Public Employees	$\bigcirc$ Contractors	
○ Residential	○ Developers	
○ Businesses	○ General Public	
○ Restaurants	$\bigcirc$ Industries	
○ Other:	○ Agricultural	

Other

#### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		SPI	DES	ID			
Name of MS4/Coalition							

**3.** What strategies did your MS4/Coalition use to achieve education and outreach goals during this reporting period? Check all that apply:

$\bigcirc$ Co	nst	ruc	tion	Sit	e Op	oera	tors	s Tr	ain	ed													÷	# Tr	ain	ed					
○ Dir	ect	t M	aili	ngs																			#	Ma	ilin	gs					
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○ Pul	olic	E	ven	ts/P	resei	ntat	ions	5															#1	Atte	nde	es					
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#### **MS4 Annual Report Form**

#### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### **MS4 Annual Report Form**

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### 4. Evaluating Progress Toward Measurable Goals MCM 1

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D.	Has you	r MS4	made	progress	toward t	this	Measurab	le Go	al duri	ng this r	eporting p	eriod?

○ Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	$\bigcirc$ Yes	○ No
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#### **MS4 Annual Report Form**

This report is being submitte	d for the reporting perio	d ending March 9,	

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this rep	orting period?
Actual # printed materials 20,775.	
Billboards:4 locations/8 wks = 144,275 average daily	
impressions	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this Measurable Goal during this	reporting period?
	$\bigcirc$ Yes $\bigcirc$ No

**E.** Is your MS4 on schedule to meet the deadline set forth in the SWMPP? Ores ONO

#### **MS4 Annual Report Form**

This report is being submitte	d for the reporting period	l ending March 9,	

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D.	Has v	our MS	4 made	progress	toward this	s Measurable	e Goal duri	ing this re	porting period?	
-										

○ Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	$\bigcirc$ Yes	○ No
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#### **MS4 Annual Report Form**

This report is being submitte	d for the reporting perio	d ending March 9,	

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

 	SPD	<b>ES</b>	ID			

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(ex.: samples/participants/events)

D.	Hasy	vour MS4	made p	rogress to	oward this	Measurab	le Goal	during t	this reportin	g period?
		,								

○ Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	$\bigcirc$ Yes	$\odot$ No
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#### **MS4 Annual Report Form**

This rep	ort is beir	ng submitted	for the re	porting	period	ending	March 9,		

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D.	Has y	your MS4	made p	rogress	toward	this	Measura	ble (	Goal	during	this re	porting <b>p</b>	eriod?
		,											

○ Yes ○ No

<b>E.</b> Is your MS4 on schedule to meet the deadline set forth in the SWMPP? ••• •• Yes	meet the deadline set forth in the SWMPP? OYes OY
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	MS4 Annual Repor	rt Form			
This report is being	submitted for the reporting <b>p</b>	period ending	g March 9,		
If submitting this form	n as part of a joint report on behal	lf of a coalitior		S ID blan	k.
			SPDES ID		
Name of MS4/Coalition					
<u>Minimum Co</u>	ntrol Measure 2. Public	Involvemen	<u>nt/Particip</u>	ation	
The information in this section	is being reported (check one):				

- $\bigcirc$  On behalf of an individual MS4  $\bigcirc$  On behalf of a coalition
  - How many MS4s contributed to this report?
- 1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

○ Cleanup Events # Events														
$\bigcirc$ Comments on SWMP Received	s													
$\bigcirc$ Community Hotlines	-													
Phone # ( )	Phone # ( )	-												
Phone # ( )	Phone # ( )	-												
Phone # ( )	Phone # ( )	-												
Phone # ( )	Phone # ( )	-												
Phone # ( )	Phone # ( )	-												
$\bigcirc$ Community Meetings (WNYSC Open Meetin	gs) #Attendee	s												
○ Plantings	Sq. F	t.												
○ Storm Drain Markings	# Drain	S												
$\bigcirc$ Stakeholder Meetings	# Attendee	S												
○ Volunteer Monitoring	# Even	s												
O Other:														
2. Was public notice of availability of this annua	l report and Stormwater Mar	agement												

Program (SWMP) Plan provided?	○ Yes	○ No
○ List-Serve # In List		
○ Newspaper Advertising # Days Run		
○ TV/Radio Notices # Days Run		
Other:		

 $\bigcirc$  Web Page URL: Enter URL(s) on the following two pages.

#### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### Name of MS4/Coalition

#### 2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

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#### This report is being submitted for the reporting period ending March 9,

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#### Name of MS4/Coalition

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Th	is report is being sub	<u>MS4 Annual H</u> mitted for the repo		
]	If submitting this form a	s part of a joint report	on behalf of a co	alition leave SPDES ID blank.
Name of MS <sup>2</sup>	4/Coalition			SPDES ID
<mark>4.a. If this</mark>	s report was made av	ailable on the intern	et, what date v	vas it posted?
Leave	blank if this report wa	s not posted on the in	nternet.	
<mark>4.b. For h</mark>	<mark>ow many days was/w</mark>	ill this report be po	sted?	
If subr	nitting a report for sing	gle MS4, answer 5.a.	. If submitting	a joint report, answer 5.b
<mark>5.a. Was a</mark>	an Annual Report pu	blic meeting held in	this reporting	$\begin{array}{c} \textbf{period?} & \bigcirc \text{Yes} & \bigcirc \text{No} \end{array}$
If Y	(es, what was the date	of the meeting?		
If N	No, is one planned?			$\bigcirc$ Yes $\bigcirc$ No
5.b. Was a	an Annual Report pu	blic meeting held fo	r all MS4s con	tributing to this report during
this r	eporting period?			$\bigcirc$ Yes $\bigcirc$ No

	this reporting period.	$\bigcirc$ 1 cs	$\bigcirc$ NO
	If No, is one planned for each?	○ Yes	○ No
6.	Were comments received during this reporting period?	○ Yes	○ No
	If Yes, attach comments, responses and changes made to		
	SWMP in response to comments to this report.		

#### **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,		

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### 7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

 $\bigcirc$  Yes  $\bigcirc$  No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

#### **MS4 Annual Report Form**

This report is being submitted	for the reporting period ending March 9,	

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPL	DES	ID			

#### 7. Evaluating Progress Toward Measurable Goals MCM 2

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### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** 

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

 $\bigcirc$  Yes  $\bigcirc$  No

#### **MS4 Annual Report Form**

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#### 7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

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### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

 $\bigcirc$  Yes  $\bigcirc$  No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

 $\bigcirc$  Yes  $\bigcirc$  No

#### **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,		

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### 7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

 $\bigcirc$  Yes  $\bigcirc$  No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

 $\bigcirc$  Yes  $\bigcirc$  No

This report is being submitted	for the reporting period ending March 9,	

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

 SP	DES	ID			

#### Name of MS4/Coalition

#### 7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

N/A

(ex.: samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

○ Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

 $\bigcirc$  Yes  $\bigcirc$  No

This report is being submitted for t	the reporting period ending March 9,
If submitting this form as part of a join	t report on behalf of a coalition leave SPDES ID blank.
	SPDES ID
Name of MS4/Coalition	
Minimum Control Measure 3.	Illicit Discharge Detection and Elimination
The information in this section is being reported	(check one):
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition How many MS4s contributed to</li> </ul>	this report?
<b>1. Enter the number</b> and approx. percent	of outfalls mapped: // // // // // // // // // // // // //
2. How many of these outfalls have been s reporting period (outfall reconnaissance)	screened for dry weather discharges during this ce inventory)?
<b>3.a.What types of generating sites/sewersh</b> reporting period?	eds were targeted for inspection during this
• Auto Recyclers	$\bigcirc$ Landscaping (Irrigation)
O Building Maintenance	$\bigcirc$ Marinas
$\odot$ Churches	• Metal Plateing Operations
$\odot$ Commercial Carwashes	○ Outdoor Fluid Storage
○ Commercial Laundry/Dry Cleaners	• Parking Lot Maintenance
• Construction Vehicle Washouts	○ Printing
○ Cross-Connections	○ Residential Carwashing
$\bigcirc$ Distribution Centers	○ Restaurants
$\bigcirc$ Food Processing Facilities	$\bigcirc$ Schools and Universities
○ Garbage Truck Washouts	○ Septic Maintenance
$\odot$ Hospitals	○ Swimming Pools
○ Improper RV Waste Disposal	○ Vehicle Fueling
○ Industrial Process Water	○ Vehicle Maint./Repair Shops
○ Other:	$\odot$ None
○ Sewersheds:	

#### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		SPDES ID	
Name of MS4/Coalition			
<b>3.b.What types of illicit discharges have</b>	e been found during t	his reporting period	?
O Broken Lines From Sanitary Sewer	O Industrial Connection	ons	
○ Cross Connections	$\bigcirc$ Inflow/Infiltration		
○ Failing Septic Systems	$\bigcirc$ Pump Station Failur	re	
O Floor Drains Connected To Storm Sewers	○ Sanitary Sewer Ove	erflows	
○ Illegal Dumping	○ Straight Pipe Sewer	Discharges	
O Other:	○ None		
4. How many illicit discharges/potentia reporting period?	I illegal connections	have been detected d	uring this
5. How many illicit discharges have been	en confirmed during	this reporting period	1?
6. How many illicit discharges/illegal co period?	onnections have been	eliminated during t	his reporting
7. Has the storm sewershed mapping b	een completed in this	reporting period?	○ Yes ○ No
If No, approximately what percent was	completed in this rep	orting period?	8
Storm sewer mapping projec 8. Is the above information available in		Spring 2015	$\bigcirc$ Yes $\bigcirc$ No
Is this information available on the v			$\odot$ Yes $\odot$ No
If Yes, provide URL(s):	1 () 1	1 / 1	
Please provide specific address of page URL	where map(s) can be a	accessed - not home p	age.

#### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

 SPE	DES	ID			

## Name of MS4/Coalition 8. URL(s) con't.:

Please provide specific address of page where map(s) can be accessed - not home page

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URI																					 
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URI	Ĺ					1										1					 
URI	<u>г</u>	I			I	I	I	 		I	I		I			I					]

- 9. Has an IDDE law been adopted for each traditional MS4 and/or have IDDE procedures been approved for all non-traditional MS4s contributing to this report? O Yes O No
- **10. If Yes, has every traditional MS4 contributing to this report certified that this law is equivalent to the NYS Model IDDE Law?** O Yes O No O NT
- **11. What percent of staff in relevant positions and departments has received IDDE training?**

8

#### **MS4 Annual Report Form**

This report is being submitted for t	the reporting period ending March 9,	

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

_	SPL	DES	ID			

#### 12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

O No

D. Has your MS4 made progress toward this measurable goal during this reporting period?

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

○ Yes

#### **MS4 Annual Report Form**

This report is being submitted for t	the reporting period ending March 9,	

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

_	SPL	DES	ID			

#### 12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

O No

D. Has your MS4 made progress toward this measurable goal during this reporting period?

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○<mark>Yes</mark> ○<mark>No</mark>

○ Yes

This report is being submitted for the reporting period ending March 9,		
The report is some second for the reporting period that give on y		

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

 	SPD	ES	ID			

### Name of MS4/Coalition

#### 12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** O Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

#### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

			SPI	DES I	D			
Name of MS4/Coalition								
	Minimum Control Moogurog	4 and 5						

#### <u>Minimum Control Measures 4 and 5.</u> Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- $\bigcirc$  On behalf of a coalition

How many MS4s contributed to this report?

- 1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory<br/>mechanism that provides equivalent protection to the NYS SPDES General Permit for<br/>Stormwater Discharges from Construction Activities?O YesO No
- 1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap O Yes O No O NT

   Image: Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap O Yes O No O NT

   Image: Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap O Yes O No O NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.  $\bigcirc 09/2004 \bigcirc 03/2006 \bigcirc NT$ 

- **2. Does your MS4/Coalition have a SWPPP review procedure in place?** O Yes O No
- **3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?**
- 4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPs?

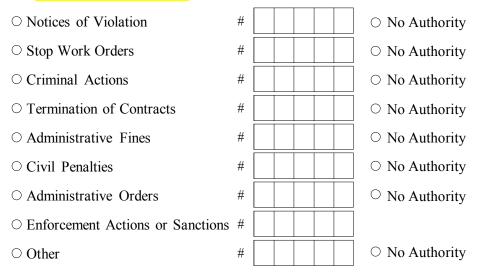
   OYes
   OYes

If Yes, how many public comments were received during this reporting period?

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? O Yes O No

Via NYS 4 Hour Erosion & Sediment Control Training

# 6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:



#### **MS4 Annual Report Form**

#### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):			
<ul> <li>On behalf of an individual MS4</li> <li>On behalf of a coalition         How many MS4s contributed to this report?     </li> </ul>			
1. How many construction projects have been authorized for disturbances of (	one a	cre or I	more
during this reporting period?			
2. How many construction projects disturbing at least one acre were active in	vour	• iurisd	liction
during this reporting period?	<b>J</b>		
3. What percent of active construction sites were inspected during this report	<mark>ing p</mark>	eriod?	○ NT
			%
4. What percent of active construction sites were inspected more than once?			○ NT
			%
5. Do all inspectors working on behalf of the MS4s contributing to this report	t use f	the NY	S
Construction Stormwater Inspection Manual?	Yes	○ No	○ NT
6. Does your MS4/Coalition provide public access to Stormwater Pollution Pr (SWPPPs) of construction projects that are subject to MS4 review and app			<mark>ans</mark>
		$\odot$ No	○ NT
If your MS4 is Non-Traditional, are SWPPPs of construction projects mad		ilable f	
public review?		○ Yes	○ No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		<u>SPD</u>	ES II	)			
Name of MS4/Coalition							
6. con't.: Submit additional pages as needed.							
O MS4/Coalition Office							
Department							
Address						 	
City	Zip	)				 	
					] -		
Phone							
$\odot$ Library							
A demos							

Add	lress															
City	7										Zip					
														-		
Pho	ne															
(		)		-												

 $\bigcirc$  Other

Address															
City										Zip	 				
													-		
Phone															
(	)		-												

• Web Page URL(s): Please provide specific address where SWPPPs can be accessed - not home page.

#### **MS4 Annual Report Form**

This report is being submitted	for the reporting period ending March 9,	
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPE	DES	ID			

#### 7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

### **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** O Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

# **MS4 Annual Report Form**

This report is being submitted	for the reporting period ending March 9,	
1 0		

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDE	ES ID			

#### 7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

# **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** O Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

# **MS4 Annual Report Form**

This report is being submitted	for the reporting period ending March 9,	
1 0		

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

S	SPD.	ES	ID			

#### 7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

# **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** O Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPL	DES	ID			

Name of MS4/Coalition

# **Minimum Control Measure 5. Post-Construction Stormwater Management**

The information in this section is being reported (check one):

○ On behalf of an individual MS4

 $\bigcirc$  On behalf of a coalition

How many MS4s contributed to this report?

1. How many and what type of post-construction stormwater management practices has your MS4/Coalition inventoried, inspected and maintained in this reporting period?

Includes Town Owned & Privately Owned	# Inventoried	# Inspections	# Times Maintained	Town Owned Facilities Only
○ Alternative Practices				
$\bigcirc$ Filter Systems				
$\bigcirc$ Infiltration Basins				
$\bigcirc$ Open Channels				
$\bigcirc$ Ponds				
$\bigcirc$ Wetlands				
$\bigcirc$ Other				

- 2. Do you use an electronic tool (e.g. GIS, database, spreadsheet) to track post-construction BMPs, inspections and maintanance?
- 3. What types of non-structural practices have been used to implement Low Impact Development/Better Site Design/Green Infrastructure principles?
- Building Codes Municipal Comprehensive Plans

○ Overlay Districts ○ Open Space Preservation Program

- Zoning Local Law or Ordinance
- None Land Use Regulation/Zoning
- $\bigcirc$  Watershed Plans  $\bigcirc$  Other Comprehensive Plan
- Other:

			1	1											
			1	1											
			1	1											
			1	1											
			1	1											

MS4 Annual Report Form
This report is being submitted for the reporting period ending March 9,
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.
Name of MS4/Coalition
4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort?
○ <mark>Yes</mark> ○ <mark>No</mark>
4b. Does the MS4 have a banking and credit system for stormwater management practices?
O(Yes) O(No)
4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice?
4d. How many stormwater management practices have been implemented as part of this system in this
reporting period?
5. What percent of municipal officials/MS4 staff responsible for program implementation attended
training on Low Impace Development (LID), Better Site Design (BSD) and other GreenInfrastructure principles in this reporting period?

### **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,		
The report is some second for the reporting period that give on y		

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### 6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

#### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

# **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** O Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

# MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9,		ĺ	
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### 6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

# **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** O Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPE	DES	ID			

# Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

○ On behalf of an individual MS4

 $\bigcirc$  On behalf of a coalition

How many MS4s contributed to this report?



1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

			Self-Assessi	nent
			<b>Operation/Activi</b>	ty/Facility
			performed within	<u>the past 3</u>
<b>Operation/Activity/Facility</b>	Addressed in	n SWMP?	years?	
Street Maintenance	O Yes	○ No	O Yes	○ No
Bridge Maintenance	O Yes	○ No	• Yes	$\bigcirc$ No
Winter Road Maintenance	O Yes	○ No	O Yes	○ No
Salt Storage	O Yes	○ No	O Yes	○ No
Solid Waste Management	O Yes	○ No	O Yes	○ No
New Municipal Construction and Land Disturband	ce $\bigcirc$ Yes	○ No	····· O Yes	○ No
Right of Way Maintenance	O Yes	○ No	• Yes	○ No
Marine Operations.	O Yes	○ No	• Yes	$\bigcirc$ No
Hydrologic Habitat Modification.	····· O Yes	○ No	• Yes	○ No
Parks and Open Space	• Yes	○ No	• Yes	○ No
Municipal Building	····· O Yes	○ No	○ Yes	○ No
Stormwater System Maintenance	····· O Yes	○ No	• Yes	○ No
Vehicle and Fleet Maintenance	○ Yes	○ No	○ Yes	○ No
Other	○ Yes	○ No	○ Yes	○ No

This report is	being submitted	for the reporting	period ending	March 9,
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		SPE	<b>ES</b>	ID			
Name of MS4/Coalition							

2. Provide the following information about municipal operations good housekeeping programs:

O Parking Lots Swept (Number of acres X Number of times swept)	# Acres	
O Streets Swept (Number of miles X Number of times swept)	# Miles	
O Catch Basins Inspected and Cleaned Where Necessary	#	
<ul> <li>Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary</li> </ul>	#	
O Phosphorus Applied In Chemical Fertilizer	# Lbs.	
ONitrogen Applied In Chemical Fertilizer	# Lbs.	
<ul> <li>Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.)</li> </ul>	# Acres	
<b>3.</b> How many stormwater management trainings have been provided during this reporting period?	to municip:	al employees
4. What was the date of the last training?	/	

- 5. How many municipal employees have been trained in this reporting period?
- 6. What percent of municipal employees in relevant positions and departments receive stormwater management training?

%

# **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,		
The report is some second for the reporting period that give on y		

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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### 7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

# **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** O Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

# **MS4 Annual Report Form**

This report is being submitted for the reporting period ending March 9,				
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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#### 7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

# **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/events)

**D. Has your MS4 made progress toward this measurable goal during this reporting period?** O Yes O No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

○ Yes ○ No

	This report is being submitted for the reporting period ending March 9,			
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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	 . (	SPL	DES	ID			
Name of MS4/Coalition							

#### 7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

### A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

# **B.** Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/event								
D. Has your MS4 made progress toward this Measurable Goal during this reporting period?								
	○ <mark>Yes</mark> ○ <mark>No</mark>							
<b>E.</b> Is your MS4 on schedule to meet the deadline set forth in the SWMPP?	Yes ONO							

### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

# Additional Watershed Improvement Strategy Best Management Practices N/A

SPDES ID

The information in this section is being reported (check one):

○ On behalf of an individual MS4

 $\bigcirc$  On behalf of a coalition

How many MS4s contributed to this report?

#### MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)		
NYC EOH Watershed	-	-			
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus		
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus		
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus		
Onondaga Lake Watershed	-	-	-		
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus		
Greenwood Lake Watershed	-	-	-		
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Oyster Bay	-	-	-		
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens		
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens		
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens		
Peconic Estuary	-	-	-		
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen		
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen		
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen		
Oscawana Lake Watershed	-	-	-		
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus		
LI 27 Embayments	-	-	-		
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens		
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens		
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens		

# 1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies?

#### 2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS?

 $\bigcirc$  Yes  $\bigcirc$  No  $\bigcirc$  N/A

 $\bigcirc$  No

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far.

Estimate what percentage was mapped in this reporting period.



O N/A

Additional BMPs Page 1 of 3

### This report is being submitted for the reporting period ending March 9,

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID									
Name of MS4/Coalition										

- 3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? O Yes O No O N/A
- 4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period?
- 5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? O Yes O No O N/A
- 6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? ○ Yes ○ No ○ N/A
- 7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or<br/>phosphorus/nitrogen/pathogen loading?Oregin and the second secon
- 7b.How many projects have been sited in this reporting period?
- 7c. What percent of the projects included in 7b have been completed in this reporting period?
- 7d. What percent of projects planned in previous years have been completed?

○ No Projects Planned

%

%

- 8a.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? O Yes O No O N/A
- 8b.Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? O Yes O No O N/A

<b>This report is being submitted for the reporting period ending</b> If submitting this form as part of a joint report on behalf of a coalitio		S ID blan	 k.
Name of MS4/Coalition	SPDES ID		
9. Has your MS4/Coalition developed and implemented a program o	-	ting? ○ No	○ N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet waste prohibiting goose feeding?	-		rties and O N/A
11. Does your MS4/Coalition have a pet waste bag program?	○ Yes	○ No	○ N/A
12. Does your MS4/Coalition have a program to manage goose populations?	○ Yes	○ No	○ N/A